

## Closure Checklist

**Closure Type:** Facility Closure

**Site Name:** Lomax 16-3/Logan 15-3A Facility

**Remediation #::** 40009

**Latitude, Longitude::** 40.248360,-104.754050

**General Condition of Site:** Good

**USCS Soil Type:** GC - Gravels with fines - gravel/clay mixture

Estimated Depth of Groundwater **more than 20' bgs**

Potential Hydrocarbon Impacted Soils/Spills **Yes**

Salt Crusted Soils or Impacted Vegetation **None Observed**

### Soil Samples

#	Date	Time	Sample ID	PID	Visual	Olfactory	Equipment	Lab
1	05/29/2025	8:20	AST-B01 @3"	0.7	No Staining	No odor	Above-ground Storage Tank	Yes
2	05/29/2025	8:22	AST-B01-01 @3"	0.7	No Staining	No odor	Above-ground Storage Tank	Yes

1 - P1



Facing North

2 - P1



IMG\_6135.jpg

**Was impacted soil identified?:** No

**Total number of soil samples field screened:** 18

**Total number of soil samples collected:** 18

**Highest PID reading:** 20.2

**Total number of soil samples submitted for analysis:** 12

Was groundwater encountered during the investigation **No**

**Measured Depth to Groundwater:**

Was remedial groundwater removal conducted?

**Date groundwater was encountered:**

**Commencement date of removal:**

Sheen on groundwater?

Free product observed?

**Volume of groundwater removed prior to sampling:**

**Volume of groundwater removed post**

**sampling:**

**Total volume of groundwater removed:**

**Total volume of groundwater samples collected:**

**Total volume of groundwater samples submitted to lab for analysis:**

**Signature** 