

Groundwater Monitoring Form

Facility Name: **MADISON GAS & ELECTRIC COMPENSATORY RECHARGE**
 Facility Address: 859 Wedgewood Way
 Madison, WI 53706

For DNR Use Only

Date Received:
 DOC: 169841
 FIN: 31792
 FID: 113353020
 Region: South Central
 Permit Drafter: Robert J Liska
 Reviewer: Robert J Liska
 Office: Fitchburg

Facility Contact: Stephen R. Pitts
 Phone number: () - (608) 252-7935
 Reporting Period: 10/01/2006 - 12/31/2006
 Form Due Date: 02/15/2007
 Permit Number: 0063088

Well Information

Sample Pt No.: **801** Well Name: **Monit. Well in infilt area-MW**
 WI Unique No.: P0885 Pipetop Elevation: 1007.45ft.
 Well Is: Broken Frozen Dry

Abandoned Well

Date: _____ / _____ / _____
 By Whom: _____

Sample Information

Date Sample Taken: 12 / 12 / 2006 (e.g., 02 / 09 / 1958)
 Sample Has: Odor Color Turbidity

Parameter #	Parameter	Sample Value	Units	PALs	ESs	LOD	LOQ	Lab Certification No.
166	Depth To Groundwater	*N/A	feet					
227	Groundwater Elevation	*N/A	feet MSL					
330	Nitrogen, Nitrite + Nitrate Total	*N/A	mg/L					
105	Chloride	*N/A	mg/L					
451	Sodium, Total Recoverable	*N/A	mg/L					
277	Manganese, Total Recoverable	*N/A	mg/L					
462	Solids, Total Dissolved	*N/A	mg/L					

Well Information

Sample Pt No.: 802 Well Name: Background well
 WI Unique No.: P0904 Pipetop Elevation: 1018.48 ft.
 Well Is: Broken Frozen Dry

Abandoned Well

Date:

____ / ____ / ____

By Whom:

Sample Information

Date Sample Taken: 12 / 12 / 2006 (e.g., 02 / 09 / 1958)
 Sample Has: Odor Color Turbidity

Parameter #	Parameter	Sample Value	Units	PALs	ESs	LOD	LOQ	Lab Certification No.
166	Depth To Groundwater	55.16	feet					
227	Groundwater Elevation	963.32	feet MSL					
462	Solids, Total Dissolved	820	mg/L			1.0	3.3	128053530
330	Nitrogen, Nitrite + Nitrate Total	**2.9	mg/L			.50	1.5	128053530
105	Chloride	250	mg/L			1.0	3.3	128053530
451	Sodium, Total Recoverable	95	mg/L			.0100	.035	128053530
277	Manganese, Total Recoverable	.021	mg/L			.00096	.0032	128053530

Well Information

Sample Pt No.: 803 Well Name: Downgradient Well (MW)
 WI Unique No.: P0906 Pipetop Elevation: 999.20 ft.
 Well Is: Broken Frozen Dry

Abandoned Well

Date:

____ / ____ / ____

By Whom:

Sample Information

Date Sample Taken: 12 / 11 / 2006 (e.g., 02 / 09 / 1958)
 Sample Has: Odor Color Turbidity

Parameter #	Parameter	Sample Value	Units	PALs	ESs	LOD	LOQ	Lab Certification No.
166	Depth To Groundwater	41.57	feet					
227	Groundwater Elevation	957.63	feet MSL					
330	Nitrogen, Nitrite + Nitrate Total	2.3	mg/L			.50	1.5	128053530
105	Chloride	**8.8	mg/L			1.0	3.3	128053530
451	Sodium, Total Recoverable	4.3	mg/L			.0100	.035	128053530
277	Manganese, Total Recoverable	<0.00096	mg/L			.00096	.0032	128053530
462	Solids, Total Dissolved	450	mg/L			1.0	3.3	128053530

Well Information

Sample Pt No.: **804** Well Name: **Downgradient Well (MW)**
 WI Unique No.: **PI323** Pipetop Elevation: 991.31 ft.
 Well Is: Broken Frozen Dry

Abandoned Well

Date:

___ / ___ / ___

By Whom:

Sample Information

Date Sample Taken: 12 / 12 / 2006 (e.g., 02 / 09 / 1958)

Sample Has: Odor Color Turbidity

Parameter #	Parameter	Sample Value	Units	PALs	ESs	LOD	LOQ	Lab Certification No.
166	Depth To Groundwater	40.65	feet					
227	Groundwater Elevation	950.66	feet MSL					
330	Nitrogen, Nitrite + Nitrate Total	**2.6	mg/L			0.50	1.5	128053530
105	Chloride	100	mg/L			1.0	3.3	128053530
451	Sodium, Total Recoverable	61	mg/L			.01	.035	128053530
277	Manganese, Total Recoverable	.0038	mg/L			.00096	.0032	128053530
462	Solids, Total Dissolved	550	mg/L			1.0	3.3	128053530

Summary of Laboratories Used in the Above Monitoring

Lab Certification No.	Lab Name
128053530	TestAmerica Watertown, WI.

Sample Collected By: John Coleman Organization: Madison Gas & Electric Company

General Remarks

* MW 801 Not accessible due to reconstruction of infiltration area.
 ** Results reported between the MDL/LOD and LOQ are less certain than results at or above the LOQ

Laboratory Quality Control Comments

Submittal of this form is required by section 283.55, Wis. Stats. and chapters NR 205 and 214, Wis. Adm. Code.

Personally identifiable information collected on this form may be used for purposes other than that for which it was originally collected. Under Wisconsin's open records laws, DNR is required to provide all non-confidential information to any person who requests it. Such information may be provided to the public in written or electronic form. Information reported may be made available to the public via a DNR web page.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

If you have any questions about this form, please call Alice Miramontes at (608)275-3287.

Return Form To

Principal Officer or Authorized Agent

Date

WI Department of Natural Resources
 Alice Miramontes
 3911 Fish Hatch
 Fitchburg, WI 53711

Make two copies of the completed form. Keep one copy and return the original and one copy to the DNR address provided.