

N91192.AR.001527
NIROP FRIDLEY, MN
5090.3a

ANNUAL WATER USE REPORT 2005 WITH TRANSMITTAL NIROP FRIDLEY MN
1/17/2006
BAY WEST

Bay West

Delivering Environmental, Industrial, and Emergency Solutions

Bay West, Inc.
HQ: 5 Empire Drive, St. Paul, MN 55103
651-291-0456 * FAX 651-291-0099
www.baywest.com * info@baywest.com

January 17, 2006

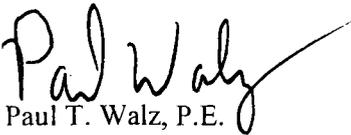
Minnesota DNR - OMB
500 Lafayette Road Box 10
St. Paul, MN 55155-4048

**RE: Annual Water Use Report – 2005
Naval Industrial Reserve Ordnance Plant (NIROP)
Fridley, Minnesota
DNR Permit No. 926127**

Bay West, Inc. is submitting the completed 2005 Water Use Report forms on behalf of the Navy. The Water Use Report covers ground water extraction wells AT-3A, AT-5A, AT-5B, AT-7, AT-8, AT-9 and AT-10. These wells are used to remove contaminated groundwater located on the NIROP property. In accordance with Permit 926127, Federal Agencies are exempt from annual processing fees.

If you need additional information or have any questions, please contact me at 651-291-3491.

Sincerely,



Paul T. Walz, P.E.
Senior Engineer
651/291-3491
paulw@baywest.com

Enclosures

cc/enc: Dan Owens, SouthDivNavFacEngCom
Mark Sladic, Tetra Tech Nus, Inc.
Jeff Tinney, Toltest, Inc.
cc: Bill Busco, EFA Midwest (w/o enclosures)

BWJ040218
Docs #82660

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 3A

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QBAA**

Twp: **30** Rng: **24** Sec: **27** Qtr: **CAD**
Anoka County

Please correct address if needed:

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Phone: **843-820-5562**

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of gallons withdrawn in each month.

Pumping Rate (gpm): 162.4

January	<u>7,321,000 gallons</u>	July	<u>6,886,000 gallons</u>
February	<u>7,434,000 gallons</u>	August	<u>7,464,000 gallons</u>
March	<u>7,473,000 gallons</u>	September	<u>3,853,000 gallons</u>
April	<u>1,575,000 gallons</u>	October	<u>6,855,000 gallons</u>
May	<u>4,966,000 gallons</u>	November	<u>6,850,000 gallons</u>
June	<u>4,748,000 gallons</u>	December	<u>5,654,000 gallons</u>

TOTAL 71,079,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below) _____

SIGNATURE *Paul Walsh*

DATE 1/17/06 PHONE (51) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 5A

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QWTA**

Twp: 30 Rng: 24 Sec: 27 Qtr: DBC
Anoka County

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Please correct address if needed:

Phone: **843-820-5562** _____

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of **gallons** withdrawn in each month.

Pumping Rate (gpm): 133

January <u>5,495,000 gallons</u>	July <u>5,908,000 gallons</u>
February <u>5,675,000 gallons</u>	August <u>6,089,000 gallons</u>
March <u>6,026,000 gallons</u>	September <u>5,654,000 gallons</u>
April <u>1,871,000 gallons</u>	October <u>5,867,000 gallons</u>
May <u>4,206,000 gallons</u>	November <u>5,877,000 gallons</u>
June <u>4,164,000 gallons</u>	December <u>4,850,000 gallons</u>

TOTAL 61,682,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below) _____

SIGNATURE *Parkway*

DATE 1/17/06 PHONE (651) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 5B

Use: **POLLUTION CONTAINMENT**

Source Type: **GROUND WATER**

Source Name: **QBAA**

Twp: **30** Rng: **24** Sec: **27** Qtr: **DBC**
Anoka County

Please correct address if needed:

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Phone: **843-820-5562** _____

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of gallons withdrawn in each month.

Pumping Rate (gpm): 82

January	<u>3,609,000 gallons</u>	July	<u>3,929,000 gallons</u>
February	<u>3,690,000 gallons</u>	August	<u>4,056,000 gallons</u>
March	<u>3,885,000 gallons</u>	September	<u>3,770,000 gallons</u>
April	<u>1,227,000 gallons</u>	October	<u>3,918,000 gallons</u>
May	<u>2,778,000 gallons</u>	November	<u>3,918,000 gallons</u>
June	<u>2,772,000 gallons</u>	December	<u>3,111,000 gallons</u>

TOTAL 40,657,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below)

SIGNATURE *Parkway*

DATE 1/16/06 PHONE (651) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 7

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QWTA**

Well Unique Number: **611095**
Twp: **30** Rng: **24** Sec: **27** Qtr: **CACD**
Anoka County

US NAVY
DAN OWENS
SOUTH NAVFACENGCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Please correct address if needed:

Phone: **843-820-5562** _____

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of gallons withdrawn in each month.

Pumping Rate (gpm): 49

January	<u>0.0 gallons</u>	July	<u>1,008,000 gallons</u>
February	<u>0.0 gallons</u>	August	<u>2,000,000 gallons</u>
March	<u>0.0 gallons</u>	September	<u>1,946,000 gallons</u>
April	<u>0.0 gallons</u>	October	<u>1,767,000 gallons</u>
May	<u>0.0 gallons</u>	November	<u>1,944,000 gallons</u>
June	<u>0.0 gallons</u>	December	<u>1,499,000 gallons</u>

TOTAL 10,164,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below)

SIGNATURE Paul Walsh DATE 1/17/06 PHONE (651) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 8

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QWTA**

Well Unique Number: **611098**
Twp: **30** Rng: **24** Sec: **27** Qtr: **CACD**
Anoka County

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Please correct address if needed:

Phone: **843-820-5562** _____

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of **gallons** withdrawn in each month.

Pumping Rate (gpm): 11

January	<u>0.0 gallons</u>	July	<u>432,000 gallons</u>
February	<u>0.0 gallons</u>	August	<u>469,440 gallons</u>
March	<u>0.0 gallons</u>	September	<u>490,000 gallons</u>
April	<u>0.0 gallons</u>	October	<u>177,000 gallons</u>
May	<u>445,000 gallons</u>	November	<u>626,000 gallons</u>
June	<u>165,000 gallons</u>	December	<u>452,300 gallons</u>

TOTAL 3,256,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below) _____

SIGNATURE *Parkway*

DATE 1/17/06 PHONE (651) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 9

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QWTA**

Well Unique Number: **611097**
Twp: **30** Rng: **24** Sec: **27** Qtr: **CACD**
Anoka County

Please correct address if needed:

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N CHARLESTON SC 29419-9010

Phone: **843-820-5562**

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of gallons withdrawn in each month.

Pumping Rate (gpm): 119

January	<u>3,116,000 gallons</u>	July	<u>5,946,000 gallons</u>
February	<u>4,240,000 gallons</u>	August	<u>6,085,000 gallons</u>
March	<u>4,194,000 gallons</u>	September	<u>5,468,000 gallons</u>
April	<u>1,570,000 gallons</u>	October	<u>5,199,000 gallons</u>
May	<u>4,466,000 gallons</u>	November	<u>2,344,000 gallons</u>
June	<u>4,740,000 gallons</u>	December	<u>3,777,000 gallons</u>

TOTAL 51,145,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below) _____

SIGNATURE *Parkway* DATE 1/16/06 PHONE (651) 291-3491

2005 DNR - ANNUAL REPORT OF WATER USE
Installation Worksheet

Permit: 926127 Installation: 10

Use: **POLLUTION CONTAINMENT**
Source Type: **GROUND WATER**
Source Name: **QBAA**

Well Unique Number: **611096**
Twp: **30** Rng: **24** Sec: **27** Qtr: **CACD**
Anoka County

US NAVY
DAN OWENS
SOUTH NAVFACENCOM
PO BOX 190010
N-CHARLESTON SC 29419-9010

Please correct address if needed:

Phone: **843-820-5562** _____

A. If no water was withdrawn this year indicate the reason.

- 1. CRP/set aside
- 2. System removed
- 3. Water not required
- 4. Permit suspended
- 5. Other (specify) _____
- 6. Water received from an alternate source (specify) _____

B. List the number of gallons withdrawn in each month.

Pumping Rate (gpm): 27

January	<u>1,374,000 gallons</u>	July	<u>1,070,000 gallons</u>
February	<u>1,290,000 gallons</u>	August	<u>1,228,000 gallons</u>
March	<u>1,382,000 gallons</u>	September	<u>1,183,000 gallons</u>
April	<u>272,000 gallons</u>	October	<u>1,118,000 gallons</u>
May	<u>998,000 gallons</u>	November	<u>1,007,000 gallons</u>
June	<u>998,000 gallons</u>	December	<u>1,021,000 gallons</u>

TOTAL 12,941,000 gallons

C. Affidavit of compliance - Measurement method (check one)

- 1. Flow Meter
- 2. Flow Rate Meter with: Totalizer or Hour meter
- 3. Timing Device: Hour meter or Electric meter x gpm
- 4. Alternate method: If not already approved, enclose request for approval.
- 5. Estimated: An approved measuring device or method is required. (describe below) _____

SIGNATURE *Palwal* DATE 1/17/06 PHONE (651) 291-3491

2005 DNR - FEE CALCULATION WORKSHEET

US NAVY, N CHARLESTON, SC 29419-9010

Permit: **926127** Use: **271** Permit Volume (MG/Y): **526.0** Installations: **7** County: **2**

1. Enter the total volume of water pumped from all installations of this permit. If this amount is 0, skip to line 5 and enter \$101. 250,880,000 gallons
2. Divide line 1 by one million (1,000,000), round to the nearest tenth (one decimal place), and enter here: 250.9 million gallons
3. If the amount on line 2 is less than 50 million gallons, skip to line 5. Otherwise, find the fee rate on the table below and enter it here. \$ 5.00 per million gallons

VOLUME PUMPED (from line 2)		FEE
Less than 50 million gallons		Minimum permit fee \$101
FEE RATE (per million gallons)		
50 to 100 million gallons		\$3.00
100 to 150 million gallons		\$3.50
150 to 200 million gallons		\$4.00
200 to 250 million gallons		\$4.50
250 to 300 million gallons		\$5.00
300 to 350 million gallons		\$5.50
350 to 400 million gallons		\$6.00
400 to 450 million gallons		\$6.50
450 to 500 million gallons		\$7.00
Over 500 million gallons		\$7.50

4. Multiply Line 2 by Line 3. 75.2 million gallons
 For Example:
$$\begin{array}{r} \quad 3.00 \text{ dollars per million gallons} \\ x \quad 75.2 \text{ million gallons} \\ \hline \$225.60 \text{ fee} \end{array}$$
\$ EXEMPT

Classification	Maximum Fee	Classification	Maximum Fee
entity with 1 to 3 permits	\$50,000	entity with more than 5 permits	\$250,000
entity with 4 to 5 permits	\$75,000	city of the first class	\$250,000

5. FEE DETERMINATION:
 - a) If the amount on line 2 is less than or equal to 50 million gallons, enter the minimum fee of \$101 on this line.
 - b) If the amount on line 4 is greater than the maximum fee from the table above, enter the maximum fee from the table on this line.
 - c) Otherwise, enter the amount from line 4. \$ EXEMPT (355)
6. Complete the Data Verification Form. If a fee is required for a permit amendment or transfer, enter the amount on this line: \$ EXEMPT (354)
7. Add lines 5 and 6. Enter the total on this line. This is the 2005 water appropriation fee due. Return this fee with the water use reports and any additional information required. \$ EXEMPT

Make checks payable to "MN DNR Waters", and mail forms and fees to:
Minnesota DNR - OMB
500 Lafayette Rd Box 10
St Paul, MN 55155

Check Amt:
Check #

If you have questions please call (651) 259-5678 24 hours
This report and fee are due by February 15th