

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Division of Environmental Remediation

Operations, Maintenance and Monitoring Periodic Review Data Collection Form

PERIOD COVERED BY THE REPORT - 2005

Form Date 2003.01.08

Site / Spill Number: 915141A		Op Unit No.:		Class: 4																								
Site Name: Iroquois Gas Terrestrial (Bristol Meyers Squibb)																												
Current Use: Pharmaceutical Manufacturing																												
OM&M Lead / Funding: <input type="checkbox"/> State Superfund <input type="checkbox"/> State Oil Spill Fund <input type="checkbox"/> Brownfields <input type="checkbox"/> Voluntary Cleanup <input checked="" type="checkbox"/> Responsible Party <input type="checkbox"/> Federal Superfund (NPL)																												
OM&M Start Date: February 1998 <input checked="" type="checkbox"/> ACTUAL <input type="checkbox"/> PLANNED OM&M End Date: Continuing Cost/Yr.: Unknown																												
Media / Receptors: <input type="checkbox"/> Soil <input type="checkbox"/> Air <input type="checkbox"/> Indoor Air <input checked="" type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Surface Water <input type="checkbox"/> Drinking Water <input checked="" type="checkbox"/> Sediment																												
Contaminant(s) of Concern: BTEX (Fmr. MGP Site) Release estimate: Unknown																												
Remedies: (mark all technologies that have been used, circle the remedy (ies) that is/are currently active)																												
<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Air Sparging</td> <td><input checked="" type="checkbox"/> LNAPL Product Recovery</td> <td><input type="checkbox"/> Permeable Reactive Wall</td> </tr> <tr> <td><input type="checkbox"/> Biosparging</td> <td><input checked="" type="checkbox"/> DNAPL Product Recovery</td> <td><input type="checkbox"/> Plume Management Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Enhanced Bioremediation</td> <td><input type="checkbox"/> Monitoring w / No other action</td> <td><input checked="" type="checkbox"/> Pump and Treat</td> </tr> <tr> <td><input checked="" type="checkbox"/> Cap / Cover (acreage? _____)</td> <td><input type="checkbox"/> Monitored Natural Attenuation</td> <td><input type="checkbox"/> Soil Removal</td> </tr> <tr> <td><input checked="" type="checkbox"/> Containment / Stabilization</td> <td><input type="checkbox"/> Multi-phase Extraction</td> <td><input type="checkbox"/> Soil Vapor Extraction</td> </tr> <tr> <td><input checked="" type="checkbox"/> Hydraulic Control</td> <td><input type="checkbox"/> Off Gas Treatment</td> <td><input type="checkbox"/> Soil Washing</td> </tr> <tr> <td><input type="checkbox"/> In-situ Chemical Oxidation</td> <td><input type="checkbox"/> On-site Soil Treatment</td> <td><input type="checkbox"/> Vapor Abatement</td> </tr> <tr> <td><input type="checkbox"/> Alternate/Treated Potable Supply</td> <td><input type="checkbox"/> Other Please specify:</td> <td></td> </tr> </table>					<input type="checkbox"/> Air Sparging	<input checked="" type="checkbox"/> LNAPL Product Recovery	<input type="checkbox"/> Permeable Reactive Wall	<input type="checkbox"/> Biosparging	<input checked="" type="checkbox"/> DNAPL Product Recovery	<input type="checkbox"/> Plume Management Monitoring	<input type="checkbox"/> Enhanced Bioremediation	<input type="checkbox"/> Monitoring w / No other action	<input checked="" type="checkbox"/> Pump and Treat	<input checked="" type="checkbox"/> Cap / Cover (acreage? _____)	<input type="checkbox"/> Monitored Natural Attenuation	<input type="checkbox"/> Soil Removal	<input checked="" type="checkbox"/> Containment / Stabilization	<input type="checkbox"/> Multi-phase Extraction	<input type="checkbox"/> Soil Vapor Extraction	<input checked="" type="checkbox"/> Hydraulic Control	<input type="checkbox"/> Off Gas Treatment	<input type="checkbox"/> Soil Washing	<input type="checkbox"/> In-situ Chemical Oxidation	<input type="checkbox"/> On-site Soil Treatment	<input type="checkbox"/> Vapor Abatement	<input type="checkbox"/> Alternate/Treated Potable Supply	<input type="checkbox"/> Other Please specify:	
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Alternate Potable Supply: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (check all that apply) <input type="checkbox"/> New Well Installation																												
<input type="checkbox"/> Waterline Extension / Hook Up (#_____) <input type="checkbox"/> Drinking Water Filters (#_____) <input type="checkbox"/> Supplied Bottle Water (#_____)																												
Treatment System Size: <input checked="" type="checkbox"/> small (<10 gpm) <input type="checkbox"/> medium (10-50 gpm) <input type="checkbox"/> large (50-500 gpm) <input type="checkbox"/> extra-large (>500 gpm)																												
Institutional Controls: <input type="checkbox"/> none required <input checked="" type="checkbox"/> Consent Order/Decree <input type="checkbox"/> Condemnation of Property <input type="checkbox"/> Deed Notice <input checked="" type="checkbox"/> Deed Restriction																												
<input checked="" type="checkbox"/> Discharge Permit <input type="checkbox"/> Ground Water Use Restrictions <input checked="" type="checkbox"/> Site Security <input type="checkbox"/> Environmental Easement <input checked="" type="checkbox"/> Haz. Waste Site Registry																												
<input checked="" type="checkbox"/> Local Permit - BSA <input type="checkbox"/> Part 360 Permit <input type="checkbox"/> Zoning Restriction <input type="checkbox"/> Public Health Advisories <input type="checkbox"/> Spill Database Notification <input type="checkbox"/> Other:																												
Engineering Controls: <input checked="" type="checkbox"/> none required <input type="checkbox"/> Pump & Treat (In-situ remediation) <input type="checkbox"/> Vapor Mitigation <input type="checkbox"/> Water Treatment Filters																												
Annual Institutional / Engineering Controls Certification: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable date:																												
OM&M Review Information: Date of last DEC Inspection: 051105 Date of DEC Split /Check Sampling: None																												
Report(s) used for Evaluation: 2005, First Quarter.																												
Long-Term Monitoring (effectiveness sampling data): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Frequency: Semi-Annual, # of wells: 7. Water levels: 13 pts./ mo.																												
Treatment System Monitoring (performance sampling data): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Frequency: Monthly																												
Remedial Status: Remedy Effective? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable (N/A)																												
ROD Compliance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Consent Order/Decree Compliance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																												
OM&M / Remedy Problem Status (if problem, please refer to problem severity table)																												
<input checked="" type="checkbox"/> NONE <input type="checkbox"/> SLIGHT <input type="checkbox"/> MODERATE <input type="checkbox"/> SEVERE																												
Evaluation: <input checked="" type="checkbox"/> Continue OM&M <input type="checkbox"/> Optimize OM&M / Remedy <input type="checkbox"/> Close Remedial Process <input type="checkbox"/> Closeout Site																												
<input type="checkbox"/> The remedy is performing properly and effectiveness will be evaluated.																												
<input checked="" type="checkbox"/> The remedy is performing properly and is effective.																												
<input type="checkbox"/> The remedy is not performing properly and is being evaluated further.																												
<input type="checkbox"/> The remedy is performing properly but is not effective and is being evaluated.																												
<input type="checkbox"/> The remedy has failed and the site will be reclassified.																												
Comments / Recommendation: Bristol-Meyers Squibb Company continues to operate, maintain and monitor the site in a highly effective manner. All major and minor components of the remedial system are well attended, to protect the functional integrity of containment as designed. APL is collected and treated as needed in auto. The effluent is in compliance to BSA criteria. DNAPL collection is marginal as the only phase change is from the LNAPL in the oil/water separator by time retention. The monitoring wells continue to be sampled semi-annually. Results are similar to prior rounds.																												
Workplan Priority:																												
Consent Order End Date:		Next Review Date: 5/06																										
ROD/Consent Order Modifications? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (per above)		Reclassify the Site? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Class: 4																										
Project Manager / Lead:																												
Signature _____ Date _____ Agency / Division / Region _____ Telephone _____				Date Entered into DER Tracking System and submitted to Supervisor as a Review Report: _____																								



Access 1.JPG



Activated Carbon Drums.JPG



Cap 2.JPG



Cap.JPG



EW Access.JPG



EW Pump.JPG



EW Vaults.JPG



LTM Prep.JPG



MW & Piezometers.JPG



MW.JPG



Oil H2O Seperator.JPG



Pump Controllers.JPG



Site Woodchuck.JPG



Solids Filter.JPG