## Mississippi Department of Environmental Quality Underground Storage Tank Branch

Leaking Underground Storage Tanks

**Technical Updates** 

## Mississippi Department of Environmental Quality Underground Storage Tank Branch

#### Manual of Standard Operating Procedures (SOP)

For Assessment and Cleanup at Leaking Underground Storage Tank Sites

**DRAFT** Dated September 11, 2015

Presented by Martha Martin, Technical Supervisor

# Manual of Standard Operating Procedures (SOP)

- Original dated March 7, 2003
- Revision #1 dated August 5, 2004
- Revision #2 DRAFT dated September 11, 2015

# Main changes to the SOP are as follows:

- Consequences will occur for not following SOP Requirements listed below
  - ✓ Samples not analyzed within holding times
  - ✓ Groundwater does not intersect screened interval
  - ✓ Groundwater samples collected before 75% recovery
  - ✓ QA/QC samples greater than non-detect
  - ✓ QA/QC samples not collected
  - ✓ Duplicate sample has RPD greater than 25%
  - ✓ Samples greater than 6°C when received by laboratory
  - √ Chain-of-custody incomplete

# Main changes to the SOP continued: Section I. Preinvestigation Activities

- ❖ A. Obtaining Site History Before any drilling begins, discuss boring/monitoring well placement and depth with the MDEQ UST project manager.
  - ✓ Remember to review MDEQ files for the site
- ❖ B. Utility Survey Contact tank owner/operator for utility layout, and UST system layout.
- ❖ F. Manual of SOP Field Requirements Have a copy of the MDEQ approved scope of work on site during field activities.

## Main changes to the SOP continued: Section II. Boring Installation and Soil Sampling

#### A. Equipment –

- ✓ Soil borings should not be placed within 25 feet of each other without prior MDEQ approval.
- ✓ Soil borings shall be pre-drilled to a depth of 4 feet using hand-held equipment to ensure the boring is clear of any underground utilities.
- ❖ B. Soil Sampling General Procedures Sonic drilling needs to be sampled at 5-foot intervals.

# Main changes to the SOP continued: Section II. Boring Installation and Soil Sampling

- ❖ C. Soil Sampling BTEX & MTBE Analysis Include on the container label the person collecting the sample and the analysis required.
- Table 2: Soil Analysis
  - ✓ Cool to less than or equal to 6°C.
  - ✓ BTEX high range may use 4-ounce amber glass jar with no preservative and a maximum holding time of 14 days.

## Main changes to the SOP continued: Section II. Boring Installation and Soil Sampling

- F. Boring Termination
  - ✓ Record vapor readings through the termination of the boring.
  - ✓ If the PID/FID readings are still high after drilling 10 feet into the water table, then the boring may need to be drilled deeper. Contact UST project manager to discuss.
  - ✓ If converting to well, drill to a minimum of 18 feet.

# Main changes to the SOP continued: Section III. Monitoring Well Installation

- ❖ B. Monitoring Wells
  - Monitoring well caps shall be watertight and lockable.
  - ✓ Write the number of the monitoring well in the concrete pad.
  - ✓ Monitoring wells shall have at least 15 feet of screened interval.
  - ✓ Added sonic drilling specifications.

# Main changes to the SOP continued: Section IV. Groundwater Sampling

- The Monitoring Well Sampling Record form shall be used for recording static groundwater data before sampling, well purging data, and well sampling data.
- ❖ B. Purging The static water level shall be measured to the nearest 0.01 foot to ensure that the well has recovered to at least 75%.

# Main changes to the SOP continued: Section IV. Groundwater Sampling

- ❖ Table 3: Groundwater Analysis
  - ✓ Cool to less than or equal to 6°C.
  - ✓ BTEX sample shall be preserved with maximum holding time of 14 days.
  - ✓ PAH sampling added the 8270D (SIM) Method which allows the use of 40-mL amber glass vials.
  - ✓ Added EDB and 1,2-DCA, but only use when specifically requested by MDEQ.

# Main changes to the SOP continued: Section VI. Field Quality Control Checks

- C. Duplicate Samples
  - ✓ Shall be collected from a well suspected or known to be contaminated.
  - ✓ If duplicate is analyzed for PAH, then a RPD should be calculated based on total PAH not for each individual constituent.

## Main changes to the SOP continued: Section VII. Chain-of-Custody Procedures

- ❖B. Documentation of Chain-of-Custody (COC)
  - ✓ The person collecting the samples shall be identified on the COC.
  - ✓ Include the company that the person signing the form represents.
  - ✓ Indicate the time the person relinquishes.
  - ✓ Indicate the shipment method (e.g., USPS, FedEx, UPS, etc.).

# Main changes to the SOP continued: Section VIII. Plugging Monitoring Wells

- Plug monitoring wells according to Office of Land and Water Resources regulations with the following UST revisions:
  - Check wells for free product before plugging.
  - ✓ Recovery well vaults shall also be plugged.
  - ✓ Area around well should be as clean after plugging as before.
  - ✓ Submit the forms required by OLWR, and the UST plugging report.

## Main changes to the SOP continued: Section IX. Miscellaneous

- A. Content of Proposals and Reports
  - ✓ Must include site map to scale and with a north arrow.
  - ✓ Place reference point for surveying on one of the maps.
  - ✓ Must be signed and stamped by PE or PG.
  - ✓ Field logs shall be included in all reports.
  - ✓ Include documentation such as receipts, copies of Government Bill of Lading, and waste manifests.
  - ✓ Monitoring well sampling form.
  - ✓ Offsite access agreements.

## Main changes to the SOP continued: Section IX. Miscellaneous

- B. Submittal of Proposals and Reports
  - ✓ All shall be bound. Less than 50 pages may be stapled. No 3-ring binders (file space is an issue).
  - ✓ Print on both sides of paper.
  - ✓ Faxed or electronic proposals are acceptable for meeting the due date as long as signed by owner, and signed & stamped by ERAC. Still submit the hardcopy.
  - ✓ Faxed or electronic reports are acceptable for meeting the due date as long as signed & stamped by ERAC. Still submit the hardcopy.

### Main changes to the SOP continued:

Appendix - Monitoring Well Sampling Record

Added the requirement to complete and submit the Monitoring Well Sampling Record form for all groundwater sampling activities.

#### Final SOP Comments

- Please submit your comments no later than September,28, 2015.
- Once SOP is finalized, the ERAC Update Applications will be sent out requiring ERACs to sign off that the ERAC will follow the new SOP.

#### Mississippi Department of Environmental Quality Underground Storage Tank Branch

### Additional UST Technical Updates

Presented by Joseph Curro, Technical Supervisor

### Additional Technical Updates

- Turnkey Remedial Action Plans
- Operation and Maintenance Forms
- Standardized Hours
- Chain of Custody Concerns

### Turnkey Remedial Action Plans

- VOCs should be measured and recorded on every O&M visit.
- Triannual reports should include a map where 25-foot circles are drawn around recovery wells.
- Triannual reports should include a summary of vapor recovery each month.

# Turnkey Remedial Action Plans continued

- Recovery wells should always be 4 inches in diameter unless otherwise approved by the project manager.
- Iron and hardness samples of groundwater should be analyzed prior to TRAP preparation.
- All monitoring wells should be sampled every triannual.
- ❖ 3 clean confirmation samplings will be required for site closure.

# Turnkey Remedial Action Plans continued

- All utilities must be cut off upon system shutdown.
- Remediation system may be moved after the first sampling if it appears rebound is not occurring.
- Trust Fund will reimburse for system remobilization if rebound does occur.

# Operation and Maintenance (O&M) Forms

- O&M forms shall be completed with all applicable information.
- Accurate arrival and departure times shall be recorded.
- Person performing the site visit shall print their first and last name and their job classification.
- All pertinent information included in the field notes must be transferred to the O&M form.

# Operation and Maintenance (O&M) Forms continued

- A system maintenance form must be completed for the triannual system cleaning.
- UST Branch has developed a 5-page O&M form, which may be required for submittal in the future.

#### Standardized Hours

- Sonic drilling (0.15 hours per foot 4-inch well).
- MDOT ROW permits.
- Allowing travel time for initial assessment activities.

### Chain of Custody Concerns

Sample custody must be traceable and accurate from the time of sample collection until results are reported.

#### We are finding:

- Broken chains of custody.
- Wrong dates in sampling date field.
- No temperature readings upon sample receipt.
- Duplicates recorded incorrectly.

#### Sampler Name and Signature

|             | on.                      |                                       |          |             |           |                 |     | '        |          |        |             |        |  |
|-------------|--------------------------|---------------------------------------|----------|-------------|-----------|-----------------|-----|----------|----------|--------|-------------|--------|--|
|             | TELEPHONE                | SAMPLER NAMED (FIRS                   |          |             |           |                 |     |          |          |        |             |        |  |
|             |                          |                                       |          | E-WAL:      |           |                 | c 🔼 |          |          |        |             |        |  |
|             | TURNAROUND TIME          |                                       |          |             |           |                 |     |          |          |        |             |        |  |
|             | ☑ 10 DAYS □ 7 D          |                                       | _        |             |           |                 |     |          |          |        |             |        |  |
|             | ☐ LA - RWQCB REP         | ORT FORMAT UST AGENCY:                |          |             |           |                 |     |          |          |        |             |        |  |
|             | GC/MS MTBE CONFI         | RMATION: HIGHEST HIG                  |          |             |           |                 |     |          |          |        |             |        |  |
|             | SPECIAL INSTRUC          | TIONS OR NOTES:                       | TEMPER   | ATURE ON FI | ECEIPT C° |                 |     |          |          |        |             |        |  |
| "Campler N  | lame" a                  | ad first name                         | on       |             | '         |                 |     |          |          |        |             |        |  |
| _           |                          | nd first name                         |          |             |           |                 |     |          |          | 1 1    |             | 1      |  |
| "Relinguish | ned by" s                | should alway                          | s be th  | ie          |           |                 |     |          |          |        |             |        |  |
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| same        |                          |                                       |          |             | MATRIX    | NO. OF<br>CONT. |     |          |          |        |             |        |  |
| 4           |                          | MW-1                                  | 01/21/15 | 11:09       | GW        | 3               |     | $\top$   |          |        |             | $\top$ |  |
|             | 7                        | MW-2 V                                | 11/21/15 | 11:15       | GW        | 3               |     |          |          |        | $\neg$      |        |  |
| -           | 4                        | MW-3                                  | 0//21/15 | 11:25       | GW        | 3               |     |          |          |        |             | $\top$ |  |
| 1           |                          | MW-4                                  | 01/21/15 | 11:15       | GW        | 3               |     |          | T-T-     | Т      |             | $\top$ |  |
| _           |                          | Trip Blank                            | 01/21/15 | 11:20       | w         | 3               |     | $\neg$   | $\vdash$ | 1      | $\neg$      | $\top$ |  |
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|             |                          |                                       | 1        |             |           | _               |     | _        |          | +-     | <del></del> | +      |  |
|             | Refrequished by: (Signa  | aure)                                 |          | <i>y</i>    |           |                 |     |          | 1        |        |             |        |  |
|             |                          |                                       |          |             |           |                 |     |          |          |        |             |        |  |
|             |                          |                                       |          | _           |           |                 |     |          |          |        |             |        |  |

### Who should sign for drop-offs

| Sampler                   | Relinquished By:    | Date/Time: |
|---------------------------|---------------------|------------|
| Driver if                 | Received By:        | Date/Time: |
| different<br>from sampler | Relinquished By:    | Date/Time: |
| Lab recipient             | Received at Lab By: | Date/Time: |

### Who should sign for shipments

| RELINQUISHED BY :   |                          |                        |        |                  | RECEIVED BY :   |            |          |                     |           |                      |                      |     |
|---|--------------------------|------------------------|--------|------------------|-----------------|------------|----------|---------------------|-----------|----------------------|----------------------|-----|
| Name<br>Company   | SAMPLER                  | Date<br>Time           | ;<br>; | ı                | Name<br>Company | :          | LIST SH  | IPPER<br>ure not re | eauii     | Date<br>Time<br>red) | ;<br>;               |     |
| Signatory   |                          |                        |        |                  | Signatory       | :          | (Signate | are moere           | cquii     | cuj                  |                      |     |
| Name  |                          | Date                   | :      |                  | Name            | : _        |          |                     |           | Date                 | :                    |     |
| Company   | :                        | Time                   | :      | ļ                | Company         | :          | LAB RE   | CIPIENT             |           | Time                 | :                    |     |
| Signatory   | 1                        |                        |        |                  | Signatory       | : <b>L</b> |          |                     |           |                      |                      |     |
| Special Instruction / Comments (billing details, QC Reporting, etc.): |                          |                        |        |                  |                 |            |          |                     |           |                      |                      |     |
| FOR LAB   | USE ONLY Cooler Seal Int | act : □ Yes □ No □ N/A |        | Cooler Temperatu | ire :           | 0          | C Frozen | : ☐ Yes ☐ No        | Cooling N | Method :             | ☐ Icepack ☐ Ice ☐ No | one |

List shipment number, if applicable, on the chain of custody AND seal the chain of custody INSIDE the cooler. Cooler should then be sealed with tape and a custody seal.

### Who should sign for pick-ups

| RELINQUISHED BY:  |      |                         |                    |   |                 | RECEIVED BY : |                |         |           |                  |                        |  |
|---|------|-------------------------|--------------------|---|-----------------|---------------|----------------|---------|-----------|------------------|------------------------|--|
| Name  | ;    | SAMPLER                 | Date               | : |                 | Name          | : 1            | LAB DRI | VER OR    | Date             | :                      |  |
| Company   | ;    |                         | Time               | : |                 | Company       | : [5           | STAFF D | RIVER     | Time             | :                      |  |
| Signatory   | :    |                         |                    |   |                 | Signatory     | :              |         |           |                  |                        |  |
| Name  | ;    |                         | Date               | ; |                 | Name          | ;              |         |           | Date             | :                      |  |
| Company   | ;    |                         | Time               | : |                 | Company       | : 1            | LAB REC | IPIENT    | Time             | :                      |  |
| Signatory   | :    |                         |                    |   |                 | Signatory     | :              |         |           |                  |                        |  |
| Special Instruction / Comments (billing details, QC Reporting, etc.): |      |                         |                    |   |                 |               |                |         |           |                  |                        |  |
| FOR LA  | B US | ONLY Cooler Seal Intact | : 🗆 Yes 🗆 No 🗆 N/A |   | Cooler Temperat | ure :         | O <sub>C</sub> | Frozen  | : □Yes□No | Cooling Method : | □ Icepack □ Ice □ None |  |

If more than 3 people handle the samples and space is not available on the COC, list in the comment field the names, dates, and times of any persons involved in sample transfer

|  |  | Chain Of Custo                     | dy Record          | OL-TO.                              |
|--|--|------------------------------------|--------------------|-------------------------------------|
| рдырми   | Othe   | er COC issu                        | ues                | 9/2014<br>PAGE:1                    |
| ADDRESS:   | 1 -  | PROJECT CONTACT (Report to)        | PROJECT NAME.      | - og a kard                         |
| TELEPHOVE FAX:  TURNAROUND TIME (BUSINESS DAYS);  10 DAYS 7 DAYS 72 HOURS 48                           | E-MAL:   | SAMPLER NAMED (Piro)               | REQUESTED ANALYSIS | LAB USE ONLY                        |
| ☐ LA - RWQCB REPORT FORMAT ☐ UST AGEN GC/MS MTBE CONFIRMATION: HIGHEST  SPECIAL INSTRUCTIONS OR NOTES: | TEMPERATURE ON RECEIPT CO                                  |                                    |                    | FIELD Container/ or PID i or Labora |
| MW-2<br>MW-3<br>MW-4<br>Trip Blank   |  | e for equipment<br>nk is identical |                    | 1 47                                |
|  | Sampling Date do<br>not correspond w<br>field log / O&M fo | ith                                |                    |                                     |
| Retinquishing by: (Signature)  |  |                                    | Date               | Time:                               |

### **QUESTIONS?**

