CON: 12-15 Doc #38945



July 12, 2021 Project No. 20394143

Erman Mullins, EHS

Environmental Health 2014 290th Ave Sidney, Iowa 51652

ABANDONED WATER WELL PLUGGING RECORDS, EATON CORPORATION, SHENANDOAH, IOWA

Dear Mr. Mullins:

On behalf of Eaton Corporation (Eaton), Golder Associates Inc. (Golder) is submitting the Abandoned Water Well Plugging Records (DNR Form 542-1226) for the Eaton facility located at 1600 Airport Road, Shenandoah, Iowa (Site). The four monitoring wells (MW-1, MW-2, MW-3 and MW-4) installed as part of the Phase III Environmental Site Assessment (ESA) were plugged on June 17, 2021 in accordance with 567-lowa Administrative Code (IAC)-39, *Requirements for Properly Plugging Abandoned Wells*. At this time, no further environmental action is planned for the Site. If you have any questions regarding the enclosed forms, please feel free to contact the undersigned.

Sincerely

Golder Associates Inc.

Brett E. Forthaus, P.E. (Missouri)

Senior Project Engineer

Anne M. Faeth-Boyd, R.G., P.E. (Missouri)

Associate and Senior Consultant

Anne Fauth - Bond

BEF/AMF

CC: Jeff Allen and Lisa Sutton, Eaton Corporation

Dan Cook, Iowa DNR

Attachments: Abandoned Water Well Plugging Records for MW-1 through MW-4 (DNR Form 542-1226)



1. Owner:					
Name: Eaton Corporation		Phone: 712-246-1905			
Address: 1600 Airport Road					
City: Shenandoah	State:	lowa Zip: 51601			
If this was a Public Water Su	ipply Well, please provide:				
PWSID Name:		PWSID Number:			
2. Location of Well (Cistern	1: /				
NE ¼ of, SW	% of, SE % of, Section	24 , T 69 N, R 40 ☐ East ☒ West			
County: Fremont	Describe well location of				
GPS Well Location: Latitude:	40°45'35.3156"N	Longitude: 95°23'24.0548"W			
		Longitude: 33 23 24.0348 W			
3. Well Description:					
Well depth:	30.4 ft				
Depth to water	11.0 ft.				
Casing depth:	30.4 ft. Casing Material:	Steel X Plastic Concrete Clay Brick Stone			
Casing diameter:	2 in.				
Year or decade constructed:	2021 Type of Construc	tion: Drilled Driven Bored Augured Dug			
Is this a Monitoring Well?	Yes No Well ID: MV				
Check if Cistern Depth	: ft. Diameter:	ft.			
I certify this well has been plug additional information the cou	ged as required by rule 567-39.8 of nty or department may need conce	the lowa Administrative Code (IAC). I agree to provide any rning this well.			
Signature of Owner Act 11 March Date Plugged: 6/17/21					
If plugged by certified well con-	tractor, complete this box:				
I have plugged this well as requ	ired by rule 567-39.8 of the lowa A	dministrative Code (IAC).			
Signature of Contractor:	Prot	Cert No: 9752			
OR, If plugged by well owner, complete this box: The property owner has plugged this well following requirements in rule 567-39.8 of the lowa Administrative Code (IAC) with the oversight and assistance of the designated county agent.					
Signature of County Agent:		Date Approved:			
Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)					
Complete one form for each well plugged and submit within 30					
days to the local county agent: OR, only if no county agent is available, to:					
		Water Supply Section			
		Iowa Department of Natural Resources			
		502 E 9 th St			
		Des Moines IA 50319-0034			



1. Owner:					
Name: Eaton Corporation		Phone: 712-246-190	5		
Address: 1600 Airport Road					
City: Shenandoah	State: lowa	Zíp:	51601		
If this was a Public Water Supply Well, p	lease provide:				
PWSID Name: PWSID Number:					
2. Location of Well (Cistern):					
NE ¼ of, SW ¼ of, SE	¼ of, Section 24	,T 69 N,R 40	☐ East 🔀 West		
County: Fremont De	escribe well location on pro				
GPS Well Location: Latitude: 40°45'33		Longitude: 95°23'18.3954			
3. Well Description:					
	ft				
Depth to water 11.2	ft.				
Casing depth: 33.5	ft. Casing Material:	Steel X Plastic Concrete	Clay Rrick Stone		
Casing diameter: 2	in.		ody blick stolle		
Year or decade constructed: 2021	Type of Construction:	Drilled Driven Bore	ed X Augured Dug		
Is this a Monitoring Well?	No Well ID: MW-2		So My vagarea _ Dag		
Check if Cistern Depth:	ft. Diameter:	ft.			
I certify this well has been plugged as require additional information the county or departm	d by rule 567-39.8 of the lo	wa Administrative Code (IAC). 1 a	agree to provide any		
Signature of Owner	Jung le	Date Plugged	6/19/21		
If plugged by certified well contractor, compl	ete this box:				
I have plugged this well as required by rule 50	67-39.8 of the lowa Adminis	strative Code (IAC).			
Signature of Contractor: Pakt		Cert No:	9752		
			7-7-5		
OR, If plugged by well owner, complete this box: The property owner has plugged this well following requirements in rule 567-39.8 of the lowa Administrative Code (IAC) with the oversight and assistance of the designated county agent.					
Signature of County Agent:		Data Amanaya da			
- Sharare or country rigerity		Date Approved:	7/		
Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)					
Complete one form for each well alugged and submit within 20					
Complete one form for each well plugged and submit within 30 days to the local county agent: OR, only if no county agent is available, to:					
		k, only if no county agent is avail ter Supply Section	aule, (O:		
	low	a Department of Natural Resou	rces		
	502	E 9 th St			
	Des	Moines IA 50319-0034			



1. Owner:				
Name: Eaton Corporation	Phone: 712-246-1905			
Address: 1600 Airport Road				
City: Shenandoah State:	lowa Zip: 51601			
If the same of the				
If this was a Public Water Supply Well, please provide:				
PWSID Name: PWSID Number:				
2. Location of Well (Cistern):				
NE ¼ of, SW ¼ of, SE ¼ of, Section	24 , T 69 N, R 40 ☐ East ☒ West			
County: Fremont Describe well location				
GPS Well Location: Latitude: 40°45'31.0274"N	Longitude: 95°23'17.6258"W			
3. Well Description:				
Well depth: 33.6 ft				
Depth to water 13.4 ft.				
Casing depth: 33.6 ft. Casing Materia	al: Steel X Plastic Concrete Clay Brick Stone			
Casing diameter: 2 in.				
Year or decade constructed: 2021 Type of Constr	ruction: Drilled Driven Bored Augured Dug			
Is this a Monitoring Well? Yes No Well ID: No	/IW-3			
Check if Cistern Depth: ft. Diameter	: ft.			
I certify this well has been plugged as required by rule 567-39.8 additional information the county or department may need con	of the lowa Administrative Code (IAC). I agree to provide any cerning this well.			
Signature of Owner 263/11	Date Plugged: 6/17/2/			
If plugged by certified well contractor, complete this box:	,			
I have plugged this well as required by rule 567-39.8 of the lowar	Administrative Code (IAC).			
Signature of Contractor:	Cert No: 9752			
OR, If plugged by well owner, complete this box: The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code (IAC) with the oversight and assistance of the designated county agent.				
Signature of County Agent:	Date Approved:			
Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)				
Complete one form for each well plugged and submit within 30				
days to the local county agent: OR, only if no county agent is available, to:				
	Water Supply Section			
	lowa Department of Natural Resources 502 E 9 th St			
	Des Moines IA 50319-0034			



1. Owner:				
Name: Eaton Corporation	Phone: 712-246-1905			
Address: 1600 Airport Road				
City: Shenandoah State: J	owa Zip: 51601			
If this was a Public Water Supply Well, please provide:				
PWSID Name:	PWSID Number:			
	rwsib Number:			
2. Location of Well (Cistern):				
NE ¼ of, SW ¼ of, SE ¼ of, Section	24 , T 69 N, R 40 East 🛛 West			
County: Fremont Describe well location or	property: Outside south side of main building			
GPS Well Location: Latitude: 40°45'27.4328"N	Longitude: 95°23'19.4827"W			
3. Well Description:				
Well depth: 33.5 ft				
Depth to water 15.1 ft.				
Casing depth: 33.5 ft. Casing Material:	☐ Steel 🔀 Plastic ☐ Concrete ☐ Clay ☐ Brick ☐ Stone			
Casing diameter: 2 in.				
Year or decade constructed: 2021 Type of Construct	ion: Drilled Driven Bored X Augured Dug			
Is this a Monitoring Well? Yes No Well ID: MW				
Check if Cistern Depth: ft. Diameter:	ft.			
I certify this well has been plugged as required by rule 567-39.8 of the lowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.				
Signature of Owner Actification Date Plugged: 6/17/2/				
If plugged by certified well contractor, complete this box:				
I have plugged this well as required by rule 567-39.8 of the Iowa Ad	ministrative Code (IAC).			
Signature of Contractor: Park	Cert No: 9753			
OR, If plugged by well owner, complete this box: The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code (IAC) with the oversight and assistance of the designated county agent.				
Signature of County Agent:	Date Approved:			
Eligible for Grants-to-Counties cost share: Yes No (Determined by County Agent)				
Complete one form for each well plugged and submit within 30				
days to the local county agent: OR, only if no county agent is available, to:				
	Water Supply Section			
	Iowa Department of Natural Resources			
	502 E 9 th St Des Moines IA 50319-0034			
	nca montes to 20312-0034			