

LA-UR-18-24667

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Title:

2017 Toxic Chemical Release Inventory Report for the Emergency Planning and Community Right-To-Know Act of 1986, Title III, Section

313

Author(s): Whetham, Walter Wiley

Environmental Regulatory Document Intended for:

Issued: 2018-07-09 (rev.1)



*** Do not send to EPA: This is the final copy of your form.*** FormApproved CMB Number: 2025-0009 Approval Expires: 2018-06-30

Page 1	015													
-				0014						TRI Facility ID Number				
EPA United	States		F	ORM R	<					87544SDLSI	L52835			
Enviror	nmental Protection	Section 313 of the Emergency also known as Title III of the Su								Toxic Chemical, Category, or Generic Name				
Agency	у		•						- 1	Lead				
	WHERE TO SEND MPLETED FORMS:	1. TRI Data Processing Center P.O. Box 10163 Fairfax, VA 22038						ROPRIATE STATE enstructions in App						
		s if you are revising or	Rev	ision (Ente	er up to tv	to two code(s)) Withdrawal (Enter up to two					to two co	 ode(s))		
withdr leave		y submitted form, otherwise			[][]						[][]	l		
Importa	nt: See Instructions	to determine when "Not Applicable	(NA)" boxes sh	ould be che	ecked.			•						
Part I. FACILITY IDENTIFICATION INFORMATION														
	ON 1. REPORTING YE													
SECTIO	N 2. TRADESECRE	TINFORMATION			,									
2.1 Are you claiming the toxic chemical identified on page 2 trade secret? [] Yes (Answer question 2.2; attach substantiation forms) [X] NO (Do not answer 2.2; go to Section 3) 2.2 Is this copy [] Sanitized [] Unsanitized (Answer only if "Yes" in 2.1)														
		I (Important: Read and sign after o												
values	I hereby certify that I have reviewed the attached documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report are accurate based on reasonable estimates using data available to the preparers of this report.													
Name a	and official title of ov	ner/operator or senior manageme	ent official:			ature:							Date Signed:	
Adrier	nne Nash Genera	al Engineer			Refe	erence	Copy	y: Copy of Reco	rd R	esides in CD	X		2018-06-18	
SECTIO	N 4. FACILITY IDENT	TFICATION												
4.1						TRI Fa	cility IE) Number		87544SDLSI	L52835			
U.S. D	or Establishment Name EPARTMENT OF E	ENERGY, LOS ALAMOS NATIO	VAL LABORAT	ORY										
		AD, TA-3, BLDG, 1410, MS-A31	6			Mailing	Address	s (if different from p	rtysic	cal street address	s)			
	unty/Tribe/State/ZIP Co LAMOS / Los Ala	ode amos/BIA Code:/NM:/879	544			City/St	ate/ZIP	Code				Country	(Non-US)	
4.2		ns information for : a or b; check c or d if applicable)		a.[X]An	Entire faci	lity	b.	[] Part of a facility	y	c.[X]AF	ederal fac	cility	d. [] GOOO	
4.3	Tech	nical Contact name	ADRIENNE NA	SH	ADRIE		VASH	@NNSA.DOE.GC		Telephone Numb 505-665-502		area code a	and ext.)	
4.4	Pul	olic Contact name	ADRIENNE NA	SH	ADRIE		VASH	@NNSA.DOEGO		Telephone Numb 505-665-502		area code a	and ext.)	
4.5	NAIC	S Code(s) (6 digits)	a. 928110 (Primary)	b.	C.			d.		е.	f,			
4.6	Dun and Bradstre Number(s) (9 digi													
a. NA														
b.														
SECTIO	IN 5. PARENT COMP													
_	Name of U.S. Paren purposes)	t Company (for TRI Reporting	US DEPARTM	ENT OF EN	OF ENERGY No U.S. Parent Company (for TRI Reporting purposes) []									
5.2	Parent Company's D	Oun & Bradstreet Number	NA[X]											

EPA Form 9350-1 (Rev. 06/2014) - Previous editions are obsolete.

Printed using TRI-MEweb

				TRI Facility ID Number					
	EPA FOR	RM R		87544SDLSL52835					
	PART II. CHEMICAL - SPE	ECIFIC INFORMATION		Toxic Cherrical, Category, or Generic Name					
SECTION	N 1. TOXIC CHEMICAL IDENTITY (Important:	DO NOT complete this sectio	n if you are reporting a mixture	e component in Section 2 below	.)				
44	CAS Number (Important: Enter only one number exact)	y as it appears on the Sectio	n 313 list. Enter category code	if reporting a chemical categor	y.)				
1.1	007439921								
4.0	Toxic Chemical or Chemical Category Name (Important	Enter only one name exactly	as it appears on the Section	313 list.)					
1.2	Lead								
	Generic Chemical Name (Important: Complete only if Pa	art I, Section 2.1 is checked "	Yes". Generic Name must be s	structurally descriptive).					
1,3	NA NA								
SECTION	N2. MIXTURE COMPONENT IDENTITY (Important: DO NO	T complete this section if you	completed Section 1.)						
	Generic Chemical Name Provided by Supplier (Importar	nt: Maximum of 70 characters	s, including numbers, spaces,	and punctuation.)					
2.1	NA								
SECTION	N3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL A	T THE FACILITY							
	nt: Check all that apply.)								
3.1	Manufacture the toxic chemical:	3.2 Process the toxic che	emical:	3.3 Otherwise use the to	oxic chemical:				
	a. [] Produce b. [] Import								
	ce or import:	a. [] As a reactant							
	c. [] For on-site use/processing d. [] For sale/distribution	b. [] As a formulation of c. [] As an article com		a. [] As a cherrical processing aid b. [] As a manufacturing aid					
	e. [] As a byproduct	d. [X] Repackaging	ponent	c. [X] Ancillary or oth					
	f. [] As an impurity	e. [] As an impurity							
SECTION		STEAT ANY TIMEDURING T	-E CALENDAR YEAR						
	[05] (Enter two-digit code frominstruction package.		LONDON						
	N 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH		MON-SITE						
			A. Total Release (pounds/yea	ar*) B. Basis of Estimate	lo p				
			(Enter range code or estimate	e**) (Enter code)	C. Percent from Stormwater				
5.1	Fugitive or non-point air emissions	NA []	3	С					
5.2	Stack or point air emissions	NA []	0.44	EI					
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA []							
	Streamor Water Body Name	Reach Code (optional)							
5.3.1	LOS ALAMOS TRIBUTARY TO RIO GRANDE		0.058	M2	0%				
	MORTANDAD TRIBUTARY		0.008	M2	0%				
5.3.3	SANDIA TRIBUTARY TO RIO GRANDE	1	0.152	M2	0%				

EPA Form 9350-1 (Rev. 06/2014) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year **Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

	PART II. CHEMICAL -	TRI Facility ID Number 87544SDLSL52835 Toxic Chemical, Category, or Generic Name Lead								
SECTION	5. QUANTITY OF THE TOXIC CHEMICAL	-	RING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)							
		NA	A, Total Release (pounds/year*) (Enter range code** or	r estimate)	B. Basis of Estimate (Enter code)					
5.4-5.5	Disposal to land on-site	Mr.								
5.4.1	Class I Underground Injection wells	[X]								
5.4.2	Class II-V Underground Injection wells	[X]								
5.5.1.A	RCRA subtitle Clandfills	[X]								
5.5.1.B	Other landfills	[X]								
5.5.2	Land treatment/application farming	[X]								
	RCRA Subtitle C surface impoundments	[X]								
5.5.3B	Other surface impoundments	[X]								
5.5.4	Other disposal	[]	1138		С					
SECTION	CTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL INWASTES TO OFF-SITE LOCATIONS									
6.1 DISC	HARGES TO PUBLICLY OWNED TREATM	/ENTV	VORKS (POTWs)		NA[X]					

EPA Form 9350-1 (Rev. 06/2014) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year **Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

				TRI Facility ID Number						
		EPA FORM	/I R			87544	SDLSL52835			
	PART II. CHEMICAL		IFORMATION (CONTINUED)			Taxic C	hemical, Category, or Generi	c Name		
						Lead				
SECTION	N 6.2 TRANSFERS TO OTHER OFF-SIT	ELOCATIONS	NA []							
6.2.1 O	f-Site EPA Identification Number (RCR)	A ID No.)		UTD982598898						
	-Site Location Name:			ENERGYSOLUTIONS CLIVE FACILITY						
Off	-Site Address:			U.S. IN	TERSTAT	E80, E	XIT 49, F			
City	GRANTSVILLE	County	Tooele	State	ய	ZIP	84029	Country (Non-US)		
	Is location under control of reporting t	acility or parent co	mpany?	[]Yes[X]Nb						
	A. Total Transfer (pounds/yea (Enter range code** or estima		B. Basis of Estimate (Enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter cod						
1.4	443.8		1.0		1. M65					
6.2.2 Of	f-Site EPA Identification Number (RCR)	AIDNo.)		WAR00	0001035	5				
	-Site Location Name:			PERMA	A-FIX NOF	THWE	ST RICHLAND INC			
Off	-Site Address:			2025 B	ATTELLE	BOUL	EVARD			
City	RICHLAND	County	Benton	State	WA	ZIP	99354	Country (Non-US)		
	Is location under control of reporting f	acility or parent co	mpany?			[]Yes	[X] No			
	A. Total Transfer (pounds/yea (Enter range code** or estima		B. Basis of Estimate (Enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)						
1,,	1.8		1.0		1. M64					
6.2.3 Of	f-Site EPA Identification Number (RCR/	AIDNo.)		COD98	0591184					
Off-	-Site Location Name:			VEOLIA	A ES TEC	HNICAL	SOLUTIONS LLC			
Off-	-Site Address:		·	9131 E	AST 96T	HAVEN	UE			
City	HENDERSON	County	Adams	State	∞	ZIP	80640	Country (Non-US)		
	Is location under control of reporting f	acility or parent co	mpany?			[]Yes	[X] Nb			
	A. Total Transfer (pounds/yea (Enter range code** or estima		B. Basis of Estimate (Enter code)				. Type of Waste Treatment/D cycling/Energy Recovery (Er			
1.1	1.2		1.0		1. M64					
6.2.4 Of	f-Site EPA Identification Number (ROR/	AIDNo.)		TXR00	0075788	ji i				
	Site Location Name:			WASTE CONTROL SPECIALISTS ANDREWS FACILITY						
Off-	Site Address:			9998 W STATE HIGHWAY 176						
City	ANDREWS	County	Andrews	State	TX	ZIP	79714	Country (Non-US)		
	Is location under control of reporting f	acility or parent co	mpany?			[]Yes	[X] Nb			
	A. Total Transfer (pounds/yea (Enter range code** or estima		B. Basis of Estimate (Enter code)				. Type of Waste Treatment/D cycling/Energy Recovery (En			
1.2	28.3		1,0		1. M64					
	f-Site EPA Identification Number (RCR/	AIDNb.)		NIMD98	6683563	3				
	Site Location Name:						MEXICO			
Off-	Site Address:		p = = = = = = = = = = = = = = = = = = =	402 INE	DUSTRAL	PARK	LOOP NE	·		
City	RIO RANCHO	County	Sandoval	State	NM	ZIP	87124	Country (Non-US)		
	Is location under control of reporting f	acility or parent con	трапу?			[] Yes	[X] Nb			
	A. Total Transfer (pounds/yea (Enter range code** or estimat		B. Basis of Estimate (Enter code)				Type of Waste Treatment/D cycling/Energy Recovery (En			
1.1			1.0		1 . M64					
	f-Site EPA Identification Number (RCR/	(IDNb.)		NV2890009002						
	Site Location Name:					_	nologies, LLC for USDOE			
Off-	Site Address:			NNSS - Zone 2 National Nuclear Security Administration WM						

Oty	Mercury		County	Nye	State	NV	ZIP	89023	Country (Non-US)		
	Is location under co	ontrol of reporting f	acility or parent co	mpany?		[] Yes [X] Nb					
	A, Total Tra (Enter rang	nsfer (pounds/yea e code** or estimat	r*) te)	B. Basis of Estimate (Enter code)				Type of Waste Trea cycling/Energy Reco			
1.,	1.2			1.0		1 . M65					
6.2.7 C	off-Site ⊞A Identifica	tion Number (RCR/	NDNb.)		NM489	0139088	3				
Of	f-Site Location Name	:			Waste	Isolation	n Pilot Pl	ant			
Of	f-Site Address:				4021 N	lational F	Parks Hi	ghway			
City	y Carlsbad County			Eddy	State NM		ZIP	88221	Country (Non-US)		
	ls location under co	ontrol of reporting f	acility or parent co	mpany?			[] Yes [X] No			
		nsfer (pounds/yea e code** or estimat		B, Basis of Estimate (Enter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)						
1.	5.2			1.0		1. M41					
SECTIO	N7A, ONSITE WAS	TE TREATMENT ME	THOOS AND EFFIC	BVCY				¥.			
[] Not /	Applicable (NA) - Ch	eck here if no on-si	te waste treatment	is applied to any waste stream conta	ining the	toxic che	mical or c	herrical category.			
	a. General Vaste Stream (enter code)			rent Method(s) Sequence character code(s)]	c. Waste Treatment Efficiency Estimate						
	7A.1a			7A.1 b				7A.	1 c		
	W	2: H12	3 3: H077 4: H0	82 5: H124 6: H129 7: H122				E			
	7A 2 a			7A 2 b	7A 2 c						
	S		2	2 : H101		E6					

*For Dioxin and Dioxin-like Corrpounds, report in grams/year **Pange Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

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EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number	
87544SDLSL52835	
Toxic Chemical, Category, or Generic Name	
Lead	

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON-SITE RECYCLING PROCESSES

[X] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category, Recycling Methods [Enter 3-character code(s)]

SECTION	18. SOURCE REDUCTION AND WASTE MANAGEMENT						
			Pi	olurm A ior Year unds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Yea (pounds/year	
	8.1 - 8.7 Production-Related Waste Managed					MATERIAL S	
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle Clandfills, and other landfills		NA		NA	NA	NA
8.1b	Total other on-site disposal or other releases	1190.417		1141.658	1200	1200	
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle Clandfills, and other landfills	3754.3		477.7	2000	2000	
8.1d	Total other off-site disposal or other releases	50.6		5.2	20	20	
8.2	Quantity used for energy recovery on-site	NA.		NA	NA	NA	
8.3	Quantity used for energy recovery off-site		NA		NA	NA	NA
8.4	Quantity recycled on-site		NA.		NA	NA	NA
8.5	Quantity recycled off-site		NA		NA	NA	NA
8.6	Quantity treated on-site		NA.		NA	NA	NA
8.7	Quantity treated off-site		NA.		NA	NA	NA
8.8	Non-production-related waste managed**				NA		***
8.9	[] Production ratio or [X] Activity ratio (select one and enter value to	o right)			0.89		
8.10	Did your facility engage in any newly implemented source reduction year? If so, complete the following section; if not, check NA.	activities for	this chemical	during the reporting	NA [X]		
	Source Reduction Activities (Enter code(s))		Method	s to Identify Activity (Enter code(s))		timated annual reduction Inter code(s)) (optional)
8.10.1	NA .						

*For Dioxin and Dioxin-like Compounds, report in grams/year
** Includes quantities released to the environment or transferred off-site as a result of
remedial actions, catastrophic events, or other one-time events not associated with
production processes

TRI Facility ID Numb	er er
87544SDLSL528	35
Toxic Chemical, Ca	egory, or Generic Name
Lead	
Additional option	al information on source reduction, recycling, or pollution control activities.
Section 8.11: If yo	u wish to submit additional optional information on source reduction, recycling, or pollution control activities, provide it here.
Topic	Comment
Section 9.1: If you	wish to submit any miscellaneous, additional, or optional information regarding your Form Rsubmission, provide it here.
Topic	Comment

Form Approved OVB Number: 2025-0009 Approval Expires: 2018-06-30

Page 1 of 5								,ppi o	и върпос	5. 2010-00	•	
			ORM I	_				TRI	Facility ID	Number		
EPA					875	45LSLW	ISLOSAL					
United States Environmental Protection Agency	Section 313 of the Emergency Ra also known as Title III of the Supe					986,		Tox	ic Chemic	al, Categor	y, or Ge	neric Name
, g,					Lead							
WHERE TO SEND	TRI Data Processing Center			2. APPROPRIATE STATE OFFICE								
COMPLETED FORMS:	P.O. Box 10163 Fairfax, VA 22038			(See instructions in Appendix F)								
This section only applie	s if you are revising or	Rev	vision (En	(Enter up to two code(s)) With					Withdrawal (Enter up to two code(s))			code(s))
withdrawing a previous leave blank:	y submitted form, otherwise			[][]						1 11]	
Important: See Instructions	to determine when "Not Applicable (NA)" boxes sh	nould be ch	necked.								
		Part I. F	FACILITY ID	DENTIFICA	TON INFOR	MATION						
SECTION 1. REPORTING YE												
SECTION 2. TRADE SECRE	TINFORMATION							_				
[] Yes (Answer qu	kic chemical identified on page 2 traduestion 2.2; attach substantiation for swer 2.2; go to Section 3)] Sanitized	[] Unsanitized ly if "Yes" in 2,	1)					
SECTION 3. CERTIFICATION	(Important: Read and sign after con	rpleting all forn	nsections.)								
I hereby certify that I have r	reviewed the attached documents ar	nd that, to the I	best of my	know ledg	e and belief	, the submitted	informa	tion is	true and	complete a	nd that ti	ne amounts and
	curate based on reasonable estimate oner/operator or senior management		available to			report.						Data Classed
The state of the s		orriciai;			nature:	opy: Copy of I	Doord	Dooi	don in CT	N		Date Signed: 2018-06-15
Steven Story Environn SECTION 4. FACILITY IDENT	The second secon			ren	erence Co	opy. Copy of I	recora	resi	des in CL	"	_	2010-00-13
4.1	IIICATION				TD Facility	y ID Number		075	AEL CL M	SLOSAL		
Facility or Establishment Name	1				Treracing	y ID Number		1075	43L3LV	BLUSAL		
	L SECURITY, LLC, LOS ALAMOS	S NATIONAL	LAB									
Street BIKINI ATOLL RD SM30					PO BOX		from phy	sical s	treet acidres	SS)		
City/County/Tribe/State/ZIP Co LOS ALAMOS / Los Ala	ode armos / BIA Code: / NM / 8754	15			LOS AL	ZIP Code AMOS / NIM	/ 8754	15			Country	(Non-US)
	ns information for : (a or b; check c or d if applicable)		a. [X] Aı	n Entire fac	cility	b. [] Part of a	facility		c. [] A Fe	deral facili	ty	d.[X]@00
4.3 Te	chnical Contact name	STEVESTO	ORY			ANLGOV		505	665-2 16			
4.4 F	Public Contact name	Peter Hyde			Email Addres PAHYDE@	SLANIL GOV			667-379	er (include a 2	rea code a	and ext.)
4.5 NA	ICS Code(s) (6 digits)	a. 928110 (Primary)	b.		c.	d.		e.		f.		
4.6 Dun and Bradstre Number(s) (9 digi												
a NA												
b.												
SECTION 5. PARENT COMP										- Company		
purposes)	nt Company (for TRI Reporting	US DEPAR	TMENT C	FENERG	Y				No U.S. Parent Company (for TRI Reporting purposes) []			
	Dun & Bradstreet Number	NA[X]										
PA Form 9350-1 (Rev. 06/2	2014) - Previous editions are obsolet	e.					Printed	using	TR-MEW	eb		

		TRI Facility ID Number								
	EPA FOR	M R		87545L	SLMSLOSAL					
	PART II. CHEMICAL - SPE	CIFIC INFORMATION	ì	Toxic Ch	еттical, Category, or G	eneric Name				
				Lead						
SECTION	11. TOXIC CHEMICAL IDENTITY (Important: I	DO NOT complete this sectio	ion if you are reporting a mixture component in Section 2 below.)							
	CAS Number (Important: Enter only one number exactly	as it appears on the Section	ction 313 list, Enter category code if reporting a chemical category.)							
1.1	007439921									
1.2	Toxic Chemical or Chemical Category Name (Important:	Enter only one name exactly	as it appears on the Section	313 list.)						
1,2	Lead									
1.3	Generic Chemical Name (Important: Complete only if Pa	rt I, Section 2.1 is checked "	Yes". Generic Name must be s	structural	ly descriptive).					
1,3	NA .									
SECTION	12. MIXTURE COMPONENT IDENTITY (Important: DO NOT	Complete this section if you	completed Section 1.)							
Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)										
2,1	NA									
	I3. ACTIVITIES AND USES OF THE TOXIC CHEMICAL AT	THEFACILITY								
(Importar	nt: Check all that apply.)									
3.1		3.2 Process the toxic che	emical:	3,3	Otherwise use the to	xic chemical:				
	a. [] Produce b. [] Import									
If produc	e or import:	a. [] As a reactant								
	c, [] For on-site use/processing	b. [] As a formulation			ocessing aid					
	d. [] For sale/distribution e. [] As a byproduct	c. [] As an article comd. [X] Repackaging	ponent		ing aid					
	f. [] As an impurity	e. [] As an impurity		c. [X] Ancillary or other use						
CDOTTION.	LA MANZIA MARANCI NEI CETT ETTOMO CI ET MONTO CI ETTOMO		ECAL D DADVEAD							
	14. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL ON-S		HE CALENDARY BAR							
	[05] (Enter two-digit code from instruction package.) 15.QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH	44.	40N CITT							
SECTION	15.QUANTITY OF THE TOXIC CHEVICAL ENTERING EAC	H BW ROWENIAL IVEDU			D. Dente of Edition					
			A. Total Release (pounds/yea (Enter range code or estimate		B. Basis of Estimate (Enter code)	C. Percent from Stormwater				
5.1	Fugitive or non-point air emissions	NA[] -	3		С					
5.2	Stack or point air errissions	NA[]	0.44		E1					
5.3	Discharges to receiving streams or water bodies (Enter one name per box)	NA[]								
	Stream or Water Body Name	Reach Code (optional)								
	MORTANDAD TRIBUTARY TO RIO GRANDE		0.008		M2	0%				
	LOS ALAMOS TRIBUTARY TO RIO GRANDE	4	0.058		M2	0%				
5.3.3	SANDIA TRIBUTARY TO RIO GRANDE		0.152		M2	0%				

*For Dioxin and Dioxin-like Compounds, report in grams/year
**Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

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				TRI Facility ID Number	er								
		87545LSLMSLOS	SAL										
	PART II. CHEMICAL	SPE	CIFIC INFORMATION (CONTINUED)	Toxic Chemical, Cate	egory, or Generic Name								
				Lead									
SECTION	SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ON-SITE (Continued)												
		NA	A. Total Release (pounds/year*) (Enter range code** of	r estimate)	B. Basis of Estirrate (Enter code)								
5.4-5.5	Disposal to land on-site			DOM: WYST Z									
5.4.1	Class I Underground Injection wells	[X]											
5.4.2	Class II-V Underground Injection wells	[X]			e e								
5.5.1.A	RCRA subtitle Clandfills	[X]											
5.5,1.B	Other landfills	[X]											
5.5.2	Land treatment/application farming	[X]											
	RORA Subtitle C surface impoundments	[X]											
5.5.3B	Other surface impoundments	[X]											
5.5.4	Other disposal	[]		С									
SECTION	SECTION 6. TRANSFER(S) OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS												
6.1 DISC	HARGES TO PUBLICLY OWNED TREAT	MENTV	VORKS (POTWs)		NA [X]								

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						TRI Fac	lity ID Number			
		EPA FOR	MR			87545	SLMSLOSAL			
	PART II. CHEMIC		NFORMATION (CONTINUED)			Toxic O	nemical, Category, or Gener	ic Name		
						Lead				
SECTIO	N 6.2 TRANSFERS TO OTHER OFF-S	SITELOCATIONS	NA[]			Leau				
	ff-Site EPA Identification Number (R		1,4,11	NV2890009002						
District Co.	-Site Location Name:	51.51.01E-101E-100		National Secuity Technologies, LLC for USDOE						
Off	-Site Address:			NNSS - Zone 2 National Nuclear Security Administration						
City	Mercury	County	Nye	State	NV	ZIP	89023	Country (Non-US)		
	Is location under control of reporting	ng facility or parent co	ompany?	[] Yes [X] Nb						
	A. Total Transfer (pounds/) (Enter range code** or esti		B. Basis of Estimate (Enter code)				Type of Waste Treatment/D cycling/Energy Recovery (E			
1.	1.2		1.0		1. M65					
6.2.20	f-Site ⊞A Identification Number (R0	ORA ID No.)		UTD9	82598898					
	-Site Location Name:			ENER	GY SOLUT	TONS C	LIVE FACILITY			
Off	-Site Address:			U.S. II	NTERSTATE OF THE PROPERTY OF T	ΓΕ 80, E	XIT 49			
City	GRANTSVILLE	County	Tooele	State	UT :	ZIP	84029	Country (Non-US)		
	Is location under control of reporting	ng facility or parent co	ompany?			[]Yes	[X]Nb			
	A. Total Transfer (pounds/y (Enter range code** or esti		B. Basis of Estimate (Enter code)		C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)					
	443.8		1.0		1. M65					
-	f-Site EPA Identification Number (R	CRA ID No.)		_	00001035					
	-Site Location Name:			_	_		ST RICHLAND INC			
Or-	-Site Address:		-	2025	BATTELL	BOUL	EVARD		_	
City	RICHLAND	County	Benton	State	WA	ZIP	99354	(Non-US)		
	Is location under control of reporting	ng facility or parent co	ompany?			[]Yes	[X] Nb			
	A. Total Transfer (pounds/y (Enter range code** or esti		B. Basis of Estimate (Enter code)				Type of Waste Treatment/E cycling/Energy Recovery (E			
1.	1.8		1.0		1. M64					
	f-Site EPA Identification Number (RC	ORA IDNb.)		COD980591184						
	-Site Location Name:			VEOLIA ES TECHNICAL SOLUTIONS LLC 9131 EAST 96TH AVENUE						
OH-	-Site Address:			9131	EAST 96T	HAVEN	UE .	-		
City	HENDERSON	County	Adams	State	co	ZIP	80640	Country (Non-US)		
	Is location under control of reporting	ng facility or parent co	ompany?			[]Yes	[X]Nb			
	A. Total Transfer (pounds/y (Enter range code** or esti	rear*) mate)	B. Basis of Estimate (Enter code)				Type of Waste Treatment/E cycling/Energy Recovery (E			
194	1.2		1.0		1. M64					
	f-Site EPA Identification Number (R	CRAIDNo.)			88088464					
	-Site Location Name:						CIALISTS			
Off	-Site Address:			9998	WSTATE	HIGHW	AY 176			
City	ANDREWS	County	Andrews	State	TX	ZIP	79714	(Non-US)		
	Is location under control of reporting	g facility or parent co	orrpany?			[]Yes	[X]Nb			
	A. Total Transfer (pounds/y (Enter range code** or esti		B. Basis of Estirrate (Enter code)				Type of Waste Treatment/E cycling/Energy Recovery (E			
1.	28.3	1. M64								
0.000	f-Site EPA Identification Number (RC	CRAIDNb.)		NMD986683563						
	Site Location Name:				E MGMT					
Off-	-Site Address:			33rd	St./Northe	rn Blvd.				

City	RIO RANCHO		County	Sandoval	State	NIM	ZIP	87124	Country (Non-US)		
	Is location under control of reporting facility or parent company?										
A. Total Transfer (pounds/year*) (Enter range code** or estimate)				B. Basis of Estimate (Enter code)					laste Treatment/Disposal/ orgy Recovery (Enter code)		
1, 1.4				1,, 0		1. M64					
6.2.7 Off-Site EPA Identification Number (RCRA ID No.) NM4890139088											
Off-Site Location Name:					Waste Isolation Pilot Plant						
Of	f-Site Address:				4021 National Parks Highway						
City	Carlsbad		County	Eddy	State	NM	ZIP	88221	Country (Non-US)		
Is location under control of reporting facility or parent company?						[X]Yes[]Nb					
A. Total Transfer (pounds/year*) B. Basis of Estimate (Enter range code** or estimate) (Enter code)				C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (Enter code)							
1 . 5.2			1.0	1. M41							
SECTIO	ON 7A. ONSITE WAST	E TREATMENT ME	THOOS AND EFFIC	DENCY							
[] Not /	Applicable (NA) - Che	eck here if no on-si	te waste treatmer	t is applied to any waste stream cont	aining th	ne toxic che	errical or o	chemical category.			
a, General b. Waste Treatment Method(s) Sequence (enter code) [enter 3-character code(s)]						c. Waste Treatment Efficiency Estimate					
	7A.1a	a 7A.1b				7A.1 c					
	W 2: H123 3: H077 4: H082 5: H124 6: H129 7: H122					E3					
7A 2 a 7A 2 b						7A 2 c					
S 2: H101						E 6					

EPA Form 9350-1 (Rev. 06/2014) - Previous editions are obsolete.

*For Dioxin and Dioxin-like Compounds, report in grams/year **Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TO Facility ID Number	
TRI Facility ID Number	
87545LSLMSLOSAL	
Toxic Chemical, Category, or Generic Name	
Lead	

SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] NA - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.
Energy Recovery Methods [Enter 3-character code(s)]

SECTION 7C. ON SITE RECYCLING PROCESSES

[X] NA - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [Enter 3-character code(s)]

SECTION	N. SOURCE REDUCTION AND WASTE MANAGEMENT						
			P	iolurm A rior Year unds/year*)	Column B Ourrent Reporting Year (pounds/year*)	Colum C Following Yea (pounds/year*	
	8.1 - 8.7 Production-Related Waste Managed		P COP N	and the land		THE PLANT	
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle Clandfills, and other landfills		NA.		NA	NA	NA
8.1b	Total other on-site disposal or other releases				1141.658	1200	1200
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle Clandfills, and other landfills				477.7	2000	2000
8.1d	Total other off-site disposal or other releases		50.6		5.2	20	20
8.2	Quantity used for energy recovery on-site		NA		NA	NA	NA
8.3	Quantity used for energy recovery off-site				NA .	NA	NA
8.4	Quantity recycled on-site				NA	NA	NA
8.5	Quantity recycled off-site				NA .	NA	NA
8.6	Quantity treated on-site				NA	NA	NA
8.7	Quantity treated off-site		NA		NA .	NA	NA
8.8	Non-production-related waste managed**			NA NA			
8.9	[] Production ratio or [X] Activity ratio (select one and enter value to right)			0.89			
8.10	Did your facility engage in any newly implemented source reduction year? If so, complete the following section; if not, check NA.	during the reporting	reporting NA [X]				
	Source Reduction Activities (Enter code(s))		Method	s to Identify Activity (Enter code(s))		timated annual reductio inter code(s)) (optional)
8.10.1	NA						

*For Dioxin and Dioxin-like Compounds, report in grams/year
** Includes quantities released to the environment or transferred off-site as a result of
remedial actions, catastrophic events, or other one-time events not associated with
production processes

EPA Form 9350-1 (Rev. 06/2014) - Previous editions are obsolete.

TRI Facility ID Number

87545LSLMSLOSAL

Toxic Chemical, Category, or Generic Name

Lead

Additional optional information on source reduction, recycling, or pollution control activities.

Section 8.11: If you wish to submit additional optional information on source reduction, recycling, or pollution control activities, provide it here.

Topic Comment

Section 9.1: If you wish to submit any miscellaneous, additional, or optional information regarding your Form Rsubmission, provide it here.

Topic Comment