MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY

INTEROFFICE COMMUNICATION

TO: Sybil Kolon, Gelman/Pall Life Science (PLS) Project Manager

Remediation Division (RD), Jackson District Office,

FROM: Jim Coger, Geologist

RD, Jackson District Office

DATE: May 31, 2011

SUBJECT: Review of the November 3, 2010, Pall Life Science (PLS) Proposal to Reduce

Batch purging from the Ann Arbor Supply Well.

PLS proposes to temporarily reduce the batch purging frequency, from monthly to quarterly, in the Ann Arbor Supply Well (A²SW) for one year.

PLS states that "Changing the frequency will provide insight into how the 1,4-dioxane trends at this location respond under new conditions".

Review of contaminant trends in the A²SW indicates that 1,4-dioxane concentration levels have remained relatively stable over the last three years. The monthly sampling results reflect that the median 1,4-dioxane concentration values for 2008 was 96 ug/l, 96.5 ug/l in 2009, and 89 ug/l in 2010.

I support the proposed change in purge frequency for one year, contingent on PLS continuing to sample the A²SW on a monthly basis during the reduced purge period. The one year/twelve month data set will provide data for evaluating what impact (if any) purging and non-purging months have on the mean, variability, and distribution of the A²SW data population.

Quarterly sampling should continue in monitoring well MW-53i. The monitoring schedule should be changed from annual to quarterly in monitoring wells MW-53s, MW-53d, and MW-93 to evaluate what impact the reduction in purge frequency has on contaminant trends in nearby monitoring wells. All other sampling should continue as previously approved.

Decisions regarding purge frequency in the future will be contingent on review of the data. A decrease in contaminant concentration levels in the A²SW, during the reduced purge event period, may not necessarily reflect that remedial objectives have been met for the Little Lake Area System.

If you have any questions or comments, please let me know.

cc: Mitch Adelman, RRD