08.01-07/03/91-00153

(804) 445-1814

5090 1822:LAB:srw

1991 SUL 1991

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

13%比较增加。

一般な感謝ける酸素

State of North Carolina Department of Environment, Health, and Natural Resources Attn: Mr. Jack Butler Division of Solid Waste Management P.O. Box 27687 Raleigh, North Carolina 27611-7687

> Re: MCB Camp Lejeune; Sampling Results (Field Work Hadnot Point Industrial Area and Sites 6, 48, and 69)

Dear Mr. Butler:

As required by the MCB Camp Lejeune Federal Facilities Agreement (FFA) Section XVII., <u>SAMPLING AND DATA DOCUMENT AVAILABILITY</u>, LANTNAVFACENGCOM provides, within 120 days after collection, the quality assured sampling results for this field effort. Sample collection was completed approximately January 25, 1991.

If you have any questions concerning this information, contact Ms. Laurie A. Boucher, P.E., at (804) 445-1814.

Sincerely,

P. A. RAKOWSKI, P.E. Head Environmental Programs Branch Environmental Quality Division By direction of the Commander

Enclosure

Copy to: (w/o encl) MCB Camp Lejeune (AC/S, Environmental Management)

Blind copy to: (w/o encl) 1822 (LAB certified mail #P681 351 888) 1822 Admin. Record File 09A2124 18S LANTDIV Reading File LABDOC:DHRHPSAM

SENDER: Complete interest	
 SENDER: Complete items 1 and 2 when additional and 4. Put your address in the "RETURN TO" Space on the recard from being returned to you. The return receipt for delivered to and the date of delivery. For additional fees postroaster for fees and check box(es) for additional service 1. A show to whom delivered, date, and addressee's addressee's addressee of North Carolina Dept. of Environment, Health and Natural Resources Division of Solid Waste Mgmt. 	verse side. Failure to do this will prevent this <u>e will provide you the name of the person</u> the following services are available. Consult e(s) requested. esc. 2. — Restricted Delivery <u>†(Extra charge)†</u> 4. Article Number <u>P 681 351 888</u> Type of Service: <u>Registered</u> Insured <u>X</u> Certified COD
Raleigh, NC 27611-7687 (Attn: Mr. Jack Butler)	Express Mail Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature – Addressee X 6. Signature – Agent	8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Deflivery	
S Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-268	DOMESTIC RETURN RECEIP

188. million (1998)

Code 1822, Laurie Boucher P 681 351 888

