

Jerry L. Storedahl, Owner



Office: (360) 636-2420  
FAX: (360) 577-3906

2233 Talley Way • Kelso, Washington 98626

ROCK PRODUCTS, GRADING & EXCAVATING

April 1, 2016

Department of Ecology  
Water Quality Permit Coordinator  
P.O. Box 47600  
Olympia, WA 98504-7600

Dear Sirs,

Please find with this cover letter, Discharge Monitoring Reports (DMR's) from J.L. Storedahl and Sons, Inc. for the first quarter of 2016.

They include:

WAG-50-1359

Daybreak Pit

Thank you for your time. If you have any questions or concerns please feel free to contact me at my office at (360)636-2420.

Sincerely,

A handwritten signature in cursive script that reads 'Brian Sanders'.

Brian Sanders  
Environmental Coordinator

WAG-50-1359

## SAND AND GRAVEL GENERAL PERMIT

## DISCHARGE MONITORING REPORT Form 3B

Stormwater to Surface Water – NAICS Code 212311 (Dimension Stone Mining & Quarrying),  
212321 (Construction Sand & Gravel Mining), 212322 (Industrial Sand Mining)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61<sup>st</sup> Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: SWA

MONITORING PERIOD: FROM: 1 / 1 / 16 TO: 3 / 31 / 16

(Instructions and Signature Block on Reverse Side)

|                                                                              |                                                                                          |                                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| QUARTERLY MONITORING                                                         | <input type="checkbox"/> There was NO discharge at any time during the quarter <u>OR</u> |                                                                                                                                                                                                                                                                                  |
|                                                                              | SAMPLE DATE (MM/DD/YYYY)                                                                 | Nitrate +Nitrite (mg/L as N)                                                                                                                                                                                                                                                     |
|                                                                              |                                                                                          | <u>N/A</u>                                                                                                                                                                                                                                                                       |
|                                                                              | QUARTERLY AVERAGE =                                                                      |                                                                                                                                                                                                                                                                                  |
| MONTHLY MONITORING                                                           | <input type="checkbox"/> There was NO discharge at any time during the month <u>OR</u>   |                                                                                                                                                                                                                                                                                  |
| <u>January</u><br>MONTH                                                      | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>1-5-2016</u>                                                                          | <u>3.0</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>1-21-2016</u>                                                                         | <u>2.9</u>                                                                                                                                                                                                                                                                       |
|                                                                              | SUMMARY AVERAGE = <u>3.0</u>                                                             |                                                                                                                                                                                                                                                                                  |
| <u>February</u><br>MONTH                                                     | <input type="checkbox"/> There was NO discharge at any time during the month <u>OR</u>   |                                                                                                                                                                                                                                                                                  |
|                                                                              | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>2-5-2016</u>                                                                          | <u>3.1</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>2-17-2016</u>                                                                         | <u>3.0</u>                                                                                                                                                                                                                                                                       |
| SUMMARY AVERAGE = <u>3.1</u>                                                 |                                                                                          | <input type="checkbox"/> Check if only ONE discharge during the month                                                                                                                                                                                                            |
| <u>March</u><br>MONTH                                                        | <input type="checkbox"/> There was NO discharge at any time during the month <u>OR</u>   |                                                                                                                                                                                                                                                                                  |
|                                                                              | SAMPLE DATE (MM/DD/YYYY)                                                                 | TURBIDITY (NTUs)                                                                                                                                                                                                                                                                 |
|                                                                              | <u>3-21-2016</u>                                                                         | <u>3.2</u>                                                                                                                                                                                                                                                                       |
|                                                                              | <u>3-28-2016</u>                                                                         | <u>3.0</u>                                                                                                                                                                                                                                                                       |
| SUMMARY AVERAGE = <u>3.1</u>                                                 |                                                                                          | <input type="checkbox"/> Check if only ONE discharge during the month                                                                                                                                                                                                            |
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No                   | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW1

MONITORING PERIOD: FROM: 1 / 1 / 16 TO: 3 / 31 / 16

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Kimball L. Storedahl

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

Kimball L. Storedahl

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

4-1-16

DATE: YEAR MO DAY

360-636-2420

TELEPHONE NUMBER

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW2

MONITORING PERIOD: FROM: 1 / 1 / 16 TO: 3 / 31 / 16

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Kimball L. Storedahl

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

Kimball L. Storedahl

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

4-1-16

DATE: YEAR MO DAY

360-636-2420

TELEPHONE NUMBER

WAG-50-1359

2010 SAND AND GRAVEL GENERAL PERMIT  
DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water - NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW3

MONITORING PERIOD: FROM: 1 / 1 / 16 TO: 3 / 31 / 16

Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes                                           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No                                 |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                                                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                                                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Kimball L. Storedahl

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

Kimball L. Storedahl

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

4-1-16

DATE: YEAR MO DAY

360-636-2420

TELEPHONE NUMBER

WAG-50-1359

# 2010 SAND AND GRAVEL GENERAL PERMIT DISCHARGE MONITORING REPORT Form 1A

Stormwater to Ground Water – NAICS 212311 (Dimension Stone), 212321 (Construction Sand and Gravel), 212322 (Industrial Sand)

NAME/ FACILITY: J L Storedahl & Sons - Daybreak Pit  
27140 NE 61st Avenue, Battle Ground Clark County

DISCHARGE MONITORING POINT: GW5

MONITORING PERIOD: FROM: 1 / 1 / 16 TO: 3 / 31 / 16

*Daily monitoring for visible oil sheen is required at all discharge points or representative locations where water collects prior to discharge each day that runoff occurs.*

## DAILY MONITORING WHEN RUNOFF OCCURS

|                                                                              |                                        |                                                                                                                                                                                                                                                                                  |         |        |                                  |
|------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------|----------------------------------|
| Visible Oil Sheen Detected?                                                  | <input type="checkbox"/> Yes           | 1. If Yes, identify all date(s) detected: _____<br>2. If Yes, identify the probable cause of the oil sheen and the actions taken to prevent further contamination in the inspection report. Failure to describe control of sheen in the inspection report is a permit violation. |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No |                                                                                                                                                                                                                                                                                  |         |        |                                  |
| LIMITS                                                                       | Parameter                              | Minimum                                                                                                                                                                                                                                                                          | Maximum | Units  | # Samples                        |
|                                                                              | Oil Sheen                              | No discharge of sheen to ground water or surface water                                                                                                                                                                                                                           |         | Yes/No | Observe daily when runoff occurs |
| Oil Sheen or Petroleum Products Discharged to Ground Water or Surface Water? | <input type="checkbox"/> Yes           | If Yes, date(s) discharged _____                                                                                                                                                                                                                                                 |         |        |                                  |
|                                                                              | <input checked="" type="checkbox"/> No |                                                                                                                                                                                                                                                                                  |         |        |                                  |

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)

Kimball L. Storedahl

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (TYPED OR PRINTED)

Kimball L. Storedahl

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

4-1-16

DATE: YEAR MO DAY

360-636-2420

TELEPHONE NUMBER

**ALS Group USA, Corp.**

dba ALS Environmental

## Analytical Report

**Client:** JL Storedahl & Sons, Incorporated  
**Project:** J.L. Storedahl  
**Sample Matrix:** Water  
**Analysis Method:** SM 2540 D  
**Prep Method:** None

**Service Request:** K1601926**Date Collected:** 02/25/16**Date Received:** 02/25/16**Units:** mg/L**Basis:** NA**Solids, Total Suspended (TSS)**

| Sample Name  | Lab Code     | Result | MRL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| Daybreak SWA | K1601926-002 | 9.5    | 5.0 | 1    | 02/29/16 14:23 |   |
| Method Blank | K1601926-MB1 | ND U   | 4.0 | 1    | 02/29/16 14:23 |   |
| Method Blank | K1601926-MB2 | ND U   | 4.0 | 1    | 02/29/16 14:23 |   |