



IRM-RMMSO

Official Correspondence Form

| Name: | U1101202 |
|-----------------------------|---|
| Title: | FEE ASSESSMENT - Periodic Monitoring Report for Mortandad and Sandia Watersheds, November 9-November 19, 2010 |
| Date Received: | 7/7/2011 |
| Addressee Name: | Michael Graham, ADEP |
| Originator: | John E. Kieling, NMED Santa Fe |
| Action Item Description: | |
| Action Due Date: | 9/2/2011 |
| Responsible for Action: | Search Henry, Paul D |
| Responsible Office: | ADEP |
| Distribution: | Michael Graham Deborah K. Woitte Charles McMillan William Alexander Isaac RichardsonIII Phoebe K. Suina Richard Marquez Anthony R. Grieggs Paul Henry Tina Sandoval James Cantwell Scotty Jones |



SUSANA MARTINEZ Governor

JOHN A. SANCHEZ Lieutenant Governor

NEW MEXICO ENVIRONMENT DEPARTMENT

Hazardous Waste Bureau

2905 Rodeo Park Drive East, Building 1 Santa Fe, New Mexico 87505-6303 Phone (505) 476-6000 Fax (505) 476-6030

www.nmenv.state.nm.us



DAVE MARTIN Cabinet Secretary

RAJ SOLOMON, P.E. Deputy Secretary

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

July 1, 2011

George J. Rael, Assistant Manager Environmental Projects Office Los Alamos Site Office U.S. Department of Energy 3747 West Jemez Road, MS A316 Los Alamos, NM 87544 Michael Graham Associate Director Environmental Programs Los Alamos National Security, L.L.C. P.O. Box 1663, MS 991 Los Alamos, NM 87545

RE: FEE ASSESSMENT

PERIODIC MONITORING REPORT FOR MORTANDAD AND SANDIA WATERSHEDS, NOVEMBER 9 – NOVEMBER 19, 2010 LOS ALAMOS NATIONAL LABORATORY (LANL) EPA ID #NM0890010515 HWB-LANL-11-035

The New Mexico Environment Department (NMED) has received the *Periodic Monitoring Report for Mortandad and Sandia Watersheds, November 9-November 19, 2010*, dated May 2011 and received May 6, 2011. NMED has accepted the submittal for review in accordance with the New Mexico Hazardous Waste Permit and Corrective Action Fee Regulations, 20.4.2.201.B(2) NMAC. NMED will review the submittal after the appropriate fees have been received. The fee invoice is attached to this letter. Upon receipt of the payment, NMED will initiate a technical review of the submittal in accordance with 20.4.2.201.B(3) NMAC.

Payment is due within sixty (60) calendar days from the date that you receive the invoice in accordance with 20.4.2.301.C NMAC. If you disagree with the fee assessed, you may notify the NMED in writing, at the address above, of the intent to appeal the invoice under the provisions of 20.4.2.302.A NMAC.

Messrs. Rael and Graham July 1, 2011 Page 2

If payment is by check, then you must provide the invoice number on the check. If payment is transmitted electronically, then you must submit a letter to Mr. James Valdez, NMED Hazardous Waste Bureau, indicating the invoice number, payment amount, and the assessed activity prior to transferring funds.

If you have any questions regarding this letter, please contact Jerzy Kulis at (505) 476-6039.

Sincerely,

John E. Kieling Acting Chief

Hazardous Waste Bureau

cc: J. Valdez, NMED HWB

D. Cobrain, NMED HWB

J. Kulis, NMED HWB

S. Veenis, EP-CAP MS M992

E. Worth, DOE-LASO, MS A316

V. George, EP-CAP, MS M992

File: LANL 2011, Mortandad and Sandia Watersheds and Reading

LANL-11-035



New Mexico Environment Department Hazardous Waste Bureau

Los Alamos National Lab P O Box 1663 MS-M992 Los Alamos, NM 87545 Attn: Cindy Maze July 1, 2011

Invoice # - HWB-LANL-11-035

Periodic Monitoring Report for Mortandad and Sandia Watersheds, November 9 - November 19, 2010, (dated May 2011)

| Quantity | Item | Item Cost | Total Cost |
|----------|---------------------------------------|-----------------|-------------------|
| 1 | Periodic Monitoring Report - 1st Unit | \$2,000.00 | \$2,000.00 |
| (P-1) | | Total Fees | \$2,000.00 |
| | | Adjustment | \$0.00 |
| | | Pay This Amount | \$2,000.00 |

Make Checks Payable to: NMED/HWB

Mail Checks and Invoice to:

New Mexico Environment Department, HWB

Attn: James Valdez

2905 Rodeo Park Drive East, Bldg 1

Santa Fe, NM 87505

| State of New Mexico Use Only: | |
|-------------------------------|--|
| Date Received: | |
| Check Number: | |
| Amount Received: | |

