



## NARRATIVE REPORT FORM

Facility Name: Glenwood Drive and Walker RoadPrimary Facility ID: 881609

|                                                                                 |  |                                        |                |                                           |          |
|---------------------------------------------------------------------------------|--|----------------------------------------|----------------|-------------------------------------------|----------|
| Inspection Date: 4-16-25                                                        |  | Inspection Time: 10:02                 |                | Lat/Long:                                 |          |
| Program: ECB                                                                    |  | <input type="checkbox"/> Storage Tanks |                | <input type="checkbox"/> HSCA             |          |
|                                                                                 |  |                                        |                | <input checked="" type="checkbox"/> LRP   |          |
| Owner Name: Energy Transfer                                                     |  |                                        | Inspection ID: |                                           | Site ID: |
| Facility Location (911) Address:<br>[REDACTED]<br>Washington Crossing, PA 18977 |  |                                        |                | Municipality: Upper Makefield Twp.        |          |
|                                                                                 |  |                                        |                | County: Bucks                             |          |
| Responsible Official Name: Brad Fish                                            |  |                                        |                | Responsible Official Address:             |          |
| Title: Senior Environmental Specialist Emergency Response & Remediation         |  |                                        |                | 100 Green Street<br>Marcus Hook, PA 19061 |          |
| Responsible Official Telephone: 610-859-6297                                    |  |                                        |                | Interviewee Name:                         |          |
| Email Address: bradford.fish@energytransfer.com                                 |  |                                        |                | Affiliation:                              |          |
|                                                                                 |  |                                        |                | Email Address:                            |          |

**Narrative:**

I performed a site visit to oversee any gauging and bailing activities being performed that day. I arrived at [REDACTED] at 10:02, there were two employees of GES and their vehicles in the driveway. They stated that they had finished the first round of gauging and were about to start the second round at the three addresses below. I asked how long they wait for to start the second round of gauging, they told me that they usually start the second round about an hour and half from when they gauged it the first time or after they finish the first round.

| Address    | Time  | PID (ppm) | DTP (ft.) | DTW (ft.) |
|------------|-------|-----------|-----------|-----------|
| [REDACTED] | 10:31 | 410       | 30.70     | 30.71     |
| [REDACTED] | 10:41 | 280.2     | 23.17     | Sheen     |
| [REDACTED] | 11:05 | 41.7      | 35.75     | None      |

All the wells were bailed whether LNAPL was present or not. I noticed that the bailed water was being put into a metal container with a non-hazardous sticker on it. I asked where the orange Home Depot bucket was, and they stated that starting last Monday they were told to switch to the metal container. Then covered with the lid. All the equipment that was used for the gauging and bailing was decontaminated after each well.

I observed that there was a Suburban vehicle in the driveway at [REDACTED].

While the result of the two gauging events were being given to the resident at [REDACTED], I asked if they had any questions or concerns. The only thing they asked was that their sediment filter was being changed every 2-3 weeks since they were black. [REDACTED] asked if [REDACTED] could get more filters, I stated that I'd ask my supervisor. I returned after about 10 minutes and let [REDACTED] know that my supervisor would email ET to see whom [REDACTED] should contact in the future and if [REDACTED] didn't hear back in a week to let the Department know.

|                                                                                                                                                                                                                |  |                                                                                                                                             |  |                       |                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------|-------------------------|
| DEP Representative Name<br>Rebecca Flannery                                                                                                                                                                    |  | DEP Representative Signature<br>Rebecca Flannery<br><small>Digitally signed by Rebecca Flannery<br/>Date: 2025.04.16 16:08:45 -0400</small> |  | Title<br>Geoscientist | Date: 4-16-25           |
|                                                                                                                                                                                                                |  |                                                                                                                                             |  |                       | Telephone: 484-250-5779 |
| Signature by the person interviewed does not necessarily imply concurrence with the findings on this report but does acknowledge that the person was shown the report or that a copy was left with the person. |  |                                                                                                                                             |  |                       |                         |
| Interviewee Name                                                                                                                                                                                               |  | Interviewee Signature                                                                                                                       |  | Title                 | Date:                   |
|                                                                                                                                                                                                                |  |                                                                                                                                             |  |                       | Telephone:              |

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**Narrative (continued):**

I went to the ET trailer and spoke with Nancy Sadlon (ET). I asked if anything new was happening. She reiterated that RETTEW was there surveying the well heads and that the plans for the locations of the proposed three new recovery wells were being reviewed but Upper Makefield Twp. Bucks County Health Department (BCHD), and ET. She was hopeful that the drilling would commence next week. Although Sunday is a holiday, there will still be someone at the trailer to give out water if anyone comes for it

Joe Massaro (ET) arrived as I departed at 11:35

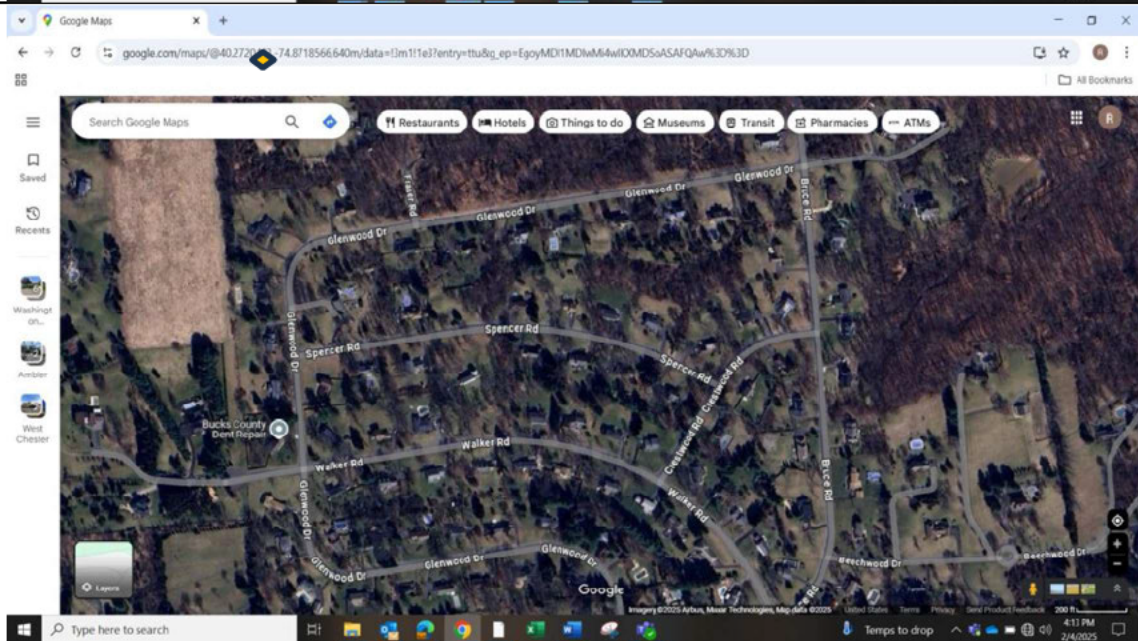
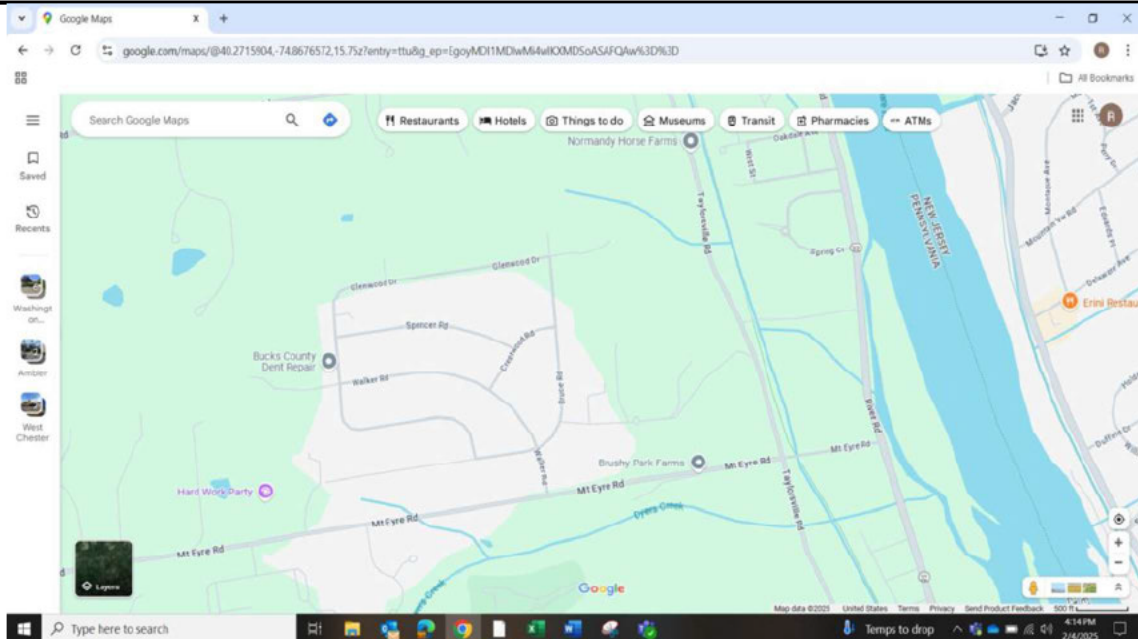
|                                                                                                                                                                                                                       |                                                                                                                                                           |                              |                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------|
| <b>DEP Representative Name</b><br>Rebecca Flannery                                                                                                                                                                    | <b>DEP Representative Signature</b><br>Rebecca Flannery<br><small><i>Digitally signed by Rebecca Flannery<br/>Date: 2025.04.16 16:08:57 -0400</i></small> | <b>Title</b><br>Geoscientist | <b>Date:</b> 4-2-25<br><b>Telephone:</b> 484-250-5779 |
| <i>Signature by the person interviewed does not necessarily imply concurrence with the findings on this report but does acknowledge that the person was shown the report or that a copy was left with the person.</i> |                                                                                                                                                           |                              |                                                       |
| <b>Interviewee Name</b>                                                                                                                                                                                               | <b>Interviewee Signature</b>                                                                                                                              | <b>Title</b>                 | <b>Date:</b><br><b>Telephone:</b>                     |

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### MAPS / PHOTOGRAPHS / ATTACHMENTS



|                                                                                                                                                                                                                       |                                                                                                                                                      |                              |                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------|
| <b>DEP Representative Name</b><br>Rebecca Flannery                                                                                                                                                                    | <b>DEP Representative Signature</b><br>Rebecca Flannery<br><small>Digitally signed by Rebecca Flannery<br/>Date: 2025.04.16 16:09:12 -04'00'</small> | <b>Title</b><br>Geoscientist | <b>Date:</b> 4-16-25<br><b>Telephone:</b> 484-250-5779 |
| <i>Signature by the person interviewed does not necessarily imply concurrence with the findings on this report but does acknowledge that the person was shown the report or that a copy was left with the person.</i> |                                                                                                                                                      |                              |                                                        |
| <b>Interviewee Name</b>                                                                                                                                                                                               | <b>Interviewee Signature</b>                                                                                                                         | <b>Title</b>                 | <b>Date:</b><br><b>Telephone:</b>                      |