



~~B. Hill~~  
~~Crusher~~  
~~Mechanic~~  
~~Wet Tester~~  
Salthi #1

~~Wine~~  
~~42~~

Latest Audograms

~~42 Miller~~  
~~Baggins~~  
~~Wet Tester~~  
~~M. T. and~~  
~~Man #2~~  
~~" #4~~  
not to confound  
N. T. and  
Thomson #1

Characterizing

~~Mix Apr~~  
~~Cplg Cutoff~~

Look at: 1/4 Salthi

B. M.

Cplg cutoff

Crusher

Wet Tester

42" mill

|      |                          |     |
|------|--------------------------|-----|
| 825✓ | 815✓                     |     |
| 803✓ | 784✓                     |     |
| 832✓ |                          | 780 |
| 794✓ |                          | 807 |
| 834✓ | 801✓                     |     |
| 804✓ | 799✓                     |     |
| 793✓ | 811✓                     |     |
| 772✓ | 812✓                     |     |
| 806✓ | <del>824</del> 824 - 842 |     |
| 856✓ | 818✓                     |     |
| 790✓ | 777✓                     |     |
| 787✓ | 853✓                     |     |
| 442✓ | 788✓                     |     |
| 759✓ | 814✓                     |     |
| 802✓ | 809✓                     |     |
| 855✓ | 779✓                     |     |
| 768✓ | 792✓                     |     |
| 808✓ | 787✓                     |     |
| 783✓ | 798✓                     |     |
| 773✓ |                          |     |
| 817✓ | C 379✓                   |     |
| 800✓ |                          |     |
| 791✓ | 830 B✓                   |     |
| 848✓ | 776 B✓                   |     |
| 822✓ | 846 Balis                |     |
|      | 797 Blank                |     |

Substrate L630-2

Calcined Sulfate

Poxy Resin Part A Permalite  
Araldite 502 Ciba Lugsy

111 Trichloro

copy cut of - rubber

42" — cloth

FM filter cloth

newer cloth

chrome orange

DEH 20  
Dow Hardware

(4)

4/81 JW

5/82

10/83 JW

10/84

4/86 JW

g

~~1/4 Lathe Operator~~  
~~Boring Mill~~  
~~\* Coupling Cut off Area~~  
~~" " Operator~~

Crusher Operator  
Lathe #1 Operator  
~~Wet Tester~~  
Mechanic  
#2 Munson Mixer  
Bag Opener  
Dry Feed Screw  
~~General Helper~~  
~~Machine Tender~~

" " Area  
Munson #2  
" #4

~~Relief Oper.~~  
~~Supervisor~~

$\frac{285}{500}$

~~Welder~~  
~~Chute Main~~  
~~Wet Tester~~  
~~Red Horse~~ 42" mill

Boring Mill #2 Oper  
" " 42"

Sittings Maker  
~~Saw #1~~  
~~Saw Operator~~  
~~Mandrel Handler~~  
~~Strip Oper~~  
~~Press Oper~~  
~~Tray loader~~

~~804 1758 1855 855~~  
oper

1.42 .17  
500

809 ✓  
787 ✓  
788 ✓  
768 ✓  
808 ✓  
791 ✓  
818 ✓  
799 ✓  
822 ✓  
800 ✓  
815 ✓  
811 ✓  
853 ✓  
773 ✓  
848 ✓  
777  
784 ✓  
783 ✓  
814 ✓  
817 ✓  
824 lost

Moldex  
2200

audiograms yearly

Bill Lohme Rev 524

Dr. Office  
Referrals -

yearly - <sup>no</sup> Impact

12/13 per month

5% <sup>out</sup> of 10  
referrals

CTD021398

W. E. Lokurs

# SENIORITY LIST

Riverside Plant 260

December 1, 1985

| EMP. NO. | NAME                       | HIRE DATE | EMP. NO. | NAME                        | HIRE DATE |
|----------|----------------------------|-----------|----------|-----------------------------|-----------|
| 104      | CANTRELL, Norman L. 8/84   | 02/09/66  | 247      | MOJESKE, John 6/84          | 08/06/76  |
| 105      | MORALES, David E. 4/85     | 02/24/66  | 253      | BEY, George M. 7/85         | 10/25/76  |
| 106      | WALL, Francis J. 10/83     | 03/14/66  | 255      | HEUTON, Donald R. 10/83     | 11/03/76  |
| 107      | SANDERS, Anzy 4/83         | 03/28/66  | 259      | REYES, Peter C. 8/85        | 01/21/77  |
| 108      | AESCHLIMAN, Kenneth 6/85   | 05/10/67  | 263      | CASAS, John A. 8/85         | 02/23/77  |
| 109      | GRANILLO, Benjamin 8/84    | 09/14/67  | 277      | DARNELL, William C. 10/83   | 08/22/77  |
| 111      | PERRY, Dale C. 10/84       | 09/27/67  | 280      | McGREGOR, Paul 8/84         | 11/14/77  |
| 112      | McFANN, Joseph R. 10/84    | 10/05/67  | 282      | EVANS, George 5/85          | 12/05/77  |
| 114      | GALVIN, Dennis W. 5/84     | 02/02/68  | 286      | COOPER, Homer L. 10/84      | 01/18/78  |
| 115      | SILVA, Tony G. 4/85        | 03/21/68  | 288      | STEWART, Raymond L. 5/85    | 01/31/78  |
| 116      | WILSON, Charles R. 10/84   | 03/25/68  | 289      | BIVENS, Janet R. 5/85       | 02/21/78  |
| 118      | GIL, Larry L. 10/84        | 08/05/68  | 295      | DOBBS, Phillip R. 6/85      | 06/13/78  |
| 121      | STEEN, Theodore C. 10/83   | 02/13/69  | 306      | GEORGE, Alan L. 10/83       | 03/29/79  |
| 123      | SONCRANT, William G. 8/84  | 05/26/69  | 309      | WHITTAKER, Woodrow 10/83    | 04/17/79  |
| 126      | GARCIA, Monty A. 7/85      | 08/05/69  | 322      | ASKEW, William E. 6/85      | 07/13/79  |
| 130      | VANDERTWEEL, Richard 10/83 | 03/23/70  | 332      | AMARO, Richard 6/85         | 09/10/79  |
| 131      | COOLEY, Dennis D. 2/85     | 04/16/70  | 333      | BRADY, Jeffery L. 3/85      | 09/12/79  |
| 132      | HAMILTON, Chris 12/85      | 04/27/70  | 334      | CLAUSON, John N. 10/84      | 09/19/79  |
| 135      | CORRAL, Richard 10/83      | 08/17/70  | 339      | BASTIAANS, Henry J. 12/84   | 12/05/79  |
| 138      | GOODWIN, Loran C. 9/85     | 09/29/71  | 344      | MARTINEZ, Pete G. 11/84     | 04/07/80  |
| 140      | COLE, Harrison 5/85        | 11/22/71  | 345      | PLAZA, Manuel M. 10/83      | 04/08/80  |
| 144      | RENFRO, Edward T. 5/85     | 03/27/72  | 346      | SUAREZ, Andres L. 6/85      | 03/16/81  |
| 155      | HAMPTON, Charles P. 10/84  | 09/18/72  | 350      | AVERY, Albert Jr. 6/85      | 04/13/81  |
| 156      | HORTON, Albert N. 09/20/72 | 09/20/72  | 351      | VILLALPANDO, Andres 6/85    | 05/05/81  |
| 159      | STANFIELD, Richard H. 6/85 | 10/30/72  | 358      | BRYANT, Birk 6/84           | 07/14/81  |
| 161      | JAMES, Jimmy L. 5/85       | 01/15/73  | 360      | PALOMERA, Gregory 08/19/81  | 08/19/81  |
| 162      | TAYLOR, Brian L. 12/85     | 01/23/73  | 367      | ZARAGOZA, Ruben 6/85        | 06/27/83  |
| 166      | SWANK, Kenneth N. 12/85    | 04/16/73  | 368      | SALAS, John 10/83           | 06/28/83  |
| 167      | FONSECA, Robert J. 10/83   | 04/30/73  | 369      | RODRIGUEZ, Jesse A. 8/84    | 07/12/83  |
| 168      | PASILLAS, David 10/83      | 05/07/73  | 370      | MEIER, Steven C. 10/83      | 07/18/83  |
| 170      | MORGAN, J. W. 6/85         | 06/22/73  | 371      | GRZYBCZYK, Richard 8/84     | 01/31/84  |
| 171      | MARRON, Douglas J. 10/83   | 06/25/73  | 374      | LOLIE, Kevin W. 11/84       | 08/03/84  |
| 174      | CHUTE, Robert G. 07/24/73  | 07/24/73  | 376      | PADRON, Martha 5/85         | 08/27/84  |
| 180      | ATENCIO, Steven A. 6/85    | 09/10/73  | 377      | DIMAGGIO, George A. 10/83   | 10/08/84  |
| 187      | RICHARDSON, Jerry D. 11/84 | 10/29/73  | 378      | FOOSE, Dennis J. 10/15/84   | 10/15/84  |
| 194      | SANIGA, Eugene 10/85       | 05/22/74  | 380      | SATHORNKICH, John 10/85     | 02/19/85  |
| 220      | CARON, Alfred J. 10/84     | 02/12/75  | 381      | KAMIREZ, George S. 05/28/85 | 05/28/85  |
| 233      | CHAVEZ, Anthony 4/85       | 10/15/75  | 383      | ANAYA, Madeline 09/16/85    | 09/16/85  |
| 235      | LEDFORD, Joe D. 5/85       | 01/19/76  | 384      | SANDERS, Robert R. 01/20/86 | 01/20/86  |
| 240      | CONTRERAS, Joe L. 5/85     | 04/26/76  | 385      | Sue den, Jesse B. 02/11/86  | 02/11/86  |
|          |                            |           | 386      | Baton, R. Douglas 03/26/86  | 03/26/86  |

78 employees

20% 83-15  
20% 84-20  
40% 85-36

CTD021399

900A

Samples

|            | P                  | A    |
|------------|--------------------|------|
| 0.18✓      | .08✓ .09           | .03✓ |
| 0.08✓      | .18✓ .21           | .05✓ |
| 0.18✓      | <del>.08</del> .17 | .04✓ |
| 0.12✓      | .18✓ .38           | .19✓ |
| 0.03       | .12✓ .18           | .09✓ |
| .03        | .03 .09            | .15✓ |
| .06        | .03 .06            | .52✓ |
| <u>.01</u> | .06 .03            | .13✓ |
| .08        | .02                | .16✓ |
| .12        | <u>.01</u>         | .21✓ |
| .03        | .12                |      |
| .04        | .04                |      |
| <u>.32</u> | .13                |      |
| .09        | .11                |      |
| .08        | .03                |      |
| .05        | .04                |      |
| .05        | <u>.39</u>         |      |
| .09        | .37                |      |
| .11        | .27                |      |
| .21        | .09                |      |
| .19        | .08                |      |
| .09        | .05                |      |
| .06        | .05                |      |
| .03        | .04                |      |
|            | .15                |      |

CTD021400

1984

Mfg

Fin

Crusht

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CTD021401

Riverside } April 6 - 11

- Jim Burk  
- Larry Megaree  
Lee Todd

Asbestos  
Shifts  
Sege Pipe

7:00 - 3:30

CTD021402

Seq T Name STEWARD, RAYMOND L.  
0002 P Soc Sec 570-56-5483  
Date 04/09/1986  
Shift 1ST 8 HOUR

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.180000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator              | Comments |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------------|-------------------------|----------|
| 1.  | 001  | 07:15 | 14:50 | 455 | 0.0000 | 0.1800/       | 0.0       | 0.1800       | Y DISPOSABLE SINGLE USE |          |

Seq T Name AREA  
0003 A Soc Sec  
Date 04/10/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn GENERAL  
Proc  
Job AREA SAMPLE

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.030000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments                                                                     |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|------------------------------------------------------------------------------|
| 1.  | 002  | 11:46 | 12:12 | 26  | 0.0000 | 0.0300/       | 0.0       | 0.0300       |            | PUMP SETTING ON TOP OF BAG OPENER CNTL<br>PANEL 4' FROM FLOOR-MADE ONE DUMP. |

Seq T Name AREA  
0004 A Soc Sec  
Date 04/10/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn GENERAL  
Proc  
Job AREA SAMPLE

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.050000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments                                                                      |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|-------------------------------------------------------------------------------|
| 1.  | 003  | 12:12 | 13:24 | 72  | 0.0000 | 0.0500/       | 0.0       | 0.0500       |            | PUMP SETTING ON TOP OF BAG OPENER CNTL<br>PANEL 4' FROM FLOOR-EMP MADE 1 DUMP |

Seq T Name AREA  
0005 A Soc Sec  
Date 04/10/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn GENERAL  
Proc  
Job AREA SAMPLE

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.040000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments                                                                    |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|-----------------------------------------------------------------------------|
| 1.  | 004  | 13:24 | 14:00 | 36  | 0.0000 | 0.0400/       | 0.0       | 0.0400       |            | PUMP SETTING ON TOP OF BAG OPENER CNTL<br>PANEL 4' FROM FLOOR-NO DUMPS MADE |

CTD021294

|                |                   |                   |                                 |                         |                |
|----------------|-------------------|-------------------|---------------------------------|-------------------------|----------------|
| Seq T Name     | MORALES, DAVID E. | Dept PRODUCTION   | Contaminant                     | Asbestos / CEF 37mm .8u | /P&CAM 239 R=A |
| 0006 P Soc Sec | 549-52-6935       | Locn PIPE MACHINE | TWA                             | 0.080000 F/CC           |                |
| Date           | 04/09/1986        | Proc              | Pel/Exp Limit OSHA PEL = 2 F/CC |                         |                |
| Shift          | 1ST 8 HOUR        | Job TENDER        | Product                         |                         |                |
| -----          |                   |                   |                                 |                         |                |
| 1.             | Equip             | Samp              | Start                           | Stop                    | Min            |
|                |                   | 005               | 07:20                           | 14:51                   | 451            |
|                |                   |                   | LPM                             | Analysis-F/CC           | Conc-F/CC      |
|                |                   |                   | 0.0000                          | 0.0800/                 | 0.0 0.0800     |
| -----          |                   |                   |                                 |                         |                |
| Seq T Name     | AREA              | Dept PRODUCTION   | Contaminant                     | Asbestos / CEF 37mm .8u | /P&CAM 239 R=A |
| 0007 A Soc Sec |                   | Locn PIPE MACHINE | TWA                             | 0.160000 F/CC           |                |
| Date           | 04/10/1986        | Proc              | Pel/Exp Limit OSHA PEL = 2 F/CC |                         |                |
| Shift          | 1ST 8 HOUR        | Job AREA SAMPLE   | Product                         |                         |                |
| -----          |                   |                   |                                 |                         |                |
| 1.             | Equip             | Samp              | Start                           | Stop                    | Min            |
|                |                   | 006               | 13:11                           | 16:15                   | 184            |
|                |                   |                   | LPM                             | Analysis-F/CC           | Conc-F/CC      |
|                |                   |                   | 0.0000                          | 0.1600/                 | 0.0 0.1600     |
| -----          |                   |                   |                                 |                         |                |
| Seq T Name     | CASAS, JOHN A.    | Dept PRODUCTION   | Contaminant                     | Asbestos / CEF 37mm .8u | /P&CAM 239 R=A |
| 0008 P Soc Sec | 573-94-2307       | Locn PRESS        | TWA                             | 0.180000 F/CC           |                |
| Date           | 04/09/1986        | Proc              | Pel/Exp Limit OSHA PEL = 2 F/CC |                         |                |
| Shift          | 1ST 8 HOUR        | Job OPERATOR      | Product                         |                         |                |
| -----          |                   |                   |                                 |                         |                |
| 1.             | Equip             | Samp              | Start                           | Stop                    | Min            |
|                |                   | 007               | 07:45                           | 14:46                   | 421            |
|                |                   |                   | LPM                             | Analysis-F/CC           | Conc-F/CC      |
|                |                   |                   | 0.0000                          | 0.1800/                 | 0.0 0.1800     |
| -----          |                   |                   |                                 |                         |                |
| Seq T Name     | BRYANT, BIRK      | Dept PRODUCTION   | Contaminant                     | Asbestos / CEF 37mm .8u | /P&CAM 239 R=A |
| 0009 P Soc Sec | 266-82-7813       | Locn MANDREL      | TWA                             | 0.120000 F/CC           |                |
| Date           | 04/09/1986        | Proc              | Pel/Exp Limit OSHA PEL = 2 F/CC |                         |                |
| Shift          | 1ST 8 HOUR        | Job HANDLER       | Product                         |                         |                |
| -----          |                   |                   |                                 |                         |                |
| 1.             | Equip             | Samp              | Start                           | Stop                    | Min            |
|                |                   | 008               | 07:30                           | 14:45                   | 435            |
|                |                   |                   | LPM                             | Analysis-F/CC           | Conc-F/CC      |
|                |                   |                   | 0.0000                          | 0.1200/                 | 0.0 0.1200     |
| -----          |                   |                   |                                 |                         |                |
| Seq T Name     | ANAYA, MADELINE   | Dept PRODUCTION   | Contaminant                     | Asbestos / CEF 37mm .8u | /P&CAM 239 R=A |
| 0010 P Soc Sec | 557-96-3180       | Locn TRAY LOADING | TWA                             | 0.030000 F/CC           |                |
| Date           | 04/09/1986        | Proc              | Pel/Exp Limit OSHA PEL = 2 F/CC |                         |                |
| Shift          | 1ST 8 HOUR        | Job OPERATOR      | Product                         |                         |                |
| -----          |                   |                   |                                 |                         |                |
| 1.             | Equip             | Samp              | Start                           | Stop                    | Min            |
|                |                   | 009               | 07:52                           | 14:55                   | 423            |
|                |                   |                   | LPM                             | Analysis-F/CC           | Conc-F/CC      |
|                |                   |                   | 0.0000                          | 0.0300/                 | 0.0 0.0300     |
| -----          |                   |                   |                                 |                         |                |

Comments  
PUMP SETTING ON CNTL PANEL APPROX 5' FROM FLOOR.

Seq T Name RICHARDSON, JERRY D.  
0011 P Soc Sec 557-96-1876  
Date 04/09/1986  
Shift 1ST 8 HOUR

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.030000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Equp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.   | 010  | 07:46 | 14:50 | 424 | 0.0000 | 0.0300/       | 0.0       | 0.0300       |            |          |

Seq T Name VOIGHTLANDER, CHRIS W.  
0012 P Soc Sec 553-70-9511  
Date 04/09/1986  
Shift 1ST 8 HOUR

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.060000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Equp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.   | 011  | 08:04 | 15:40 | 456 | 0.0000 | 0.0600/       | 0.0       | 0.0600       |            |          |

Seq T Name EVANS, GEORGE R.  
0013 P Soc Sec 566-04-8933  
Date 04/07/1986  
Shift 1ST 8 HOUR

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.015000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Equp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.   | 012  | 07:45 | 11:05 | 200 | 0.0000 | 0.0200/       | 0.0       | 0.0200       |            |          |
| 2.   | 013  | 11:29 | 15:17 | 228 | 0.0000 | 0.0100/       | 0.0       | 0.0100       |            |          |

Seq T Name COOPER, HOMER L.  
0014 P Soc Sec 568-13-3118  
Date 04/07/1986  
Shift 1ST 8 HOUR

Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
TWA 0.077000 F/CC  
Pel/Exp Limit OSHA PEL = 2 F/CC  
Product

| Equp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.   | 014  | 07:52 | 11:05 | 193 | 0.0000 | 0.1200/       | 0.0       | 0.1200       |            |          |
| 2.   | 015  | 11:29 | 15:17 | 228 | 0.0000 | 0.0400/       | 0.0       | 0.0400       |            |          |

Seq T Name FOOSE, DENNIS J.  
0015 P Soc Sec 568-08-6676  
Date 04/07/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn HYDROTESTER  
Proc LINE 2  
Job OPERATOR

Comments

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|
| 1.    | 016  | 07:49 | 11:05 | 196 | 0.0000 | 0.1300/       | 0.0       | 0.1300       |            |
| 2.    | 017  | 11:29 | 15:20 | 231 | 0.0000 | 0.1100/       | 0.0       | 0.1100       |            |

Seq T Name LOLLIE, KEVIN W.  
0016 P Soc Sec 551-49-5291  
Date 04/07/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn PIPE MACHINE  
Proc LINE 2  
Job HANDLER

Comments

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|
| 1.    | 018  | 08:04 | 15:22 | 438 | 0.0000 | 0.0300/       | 0.0       | 0.0300       |            |

Seq T Name GARCIA, MONTE A.  
0017 P Soc Sec 527-50-6060  
Date 04/07/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn GENERAL  
Proc LINE 2  
Job INSPECTOR

Comments

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|
| 1.    | 019  | 07:55 | 15:10 | 435 | 0.0000 | 0.0400/       | 0.0       | 0.0400       |            |

Seq T Name COOLEY, DENNIS D.  
0018 P Soc Sec 344-30-3938  
Date 04/08/1986  
Shift 1ST 8 HOUR

Dept PRODUCTION  
Locn COUPLING CUT OFF  
Proc  
Job OPERATOR

Comments

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|
| 1.    | 020  | 07:15 | 10:29 | 194 | 0.0000 | 0.3900/       | 0.0       | 0.3900       |            |
| 2.    | 021  | 10:29 | 10:46 | 17  | 0.0000 | 0.3700/       | 0.0       | 0.3700       |            |
| 3.    | 022  | 10:46 | 15:20 | 274 | 0.0000 | 0.2700/       | 0.0       | 0.2700       |            |

CTD021297

Seq T Name COOLEY, DENNIS D.  
 0019 P Soc Sec 344-30-3938  
 Date 04/10/1986  
 Shift 1ST 8 HOUR

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments                                                  |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|-----------------------------------------------------------|
| 1.    | 023  | 14:16 | 15:15 | 59  | 0.0000 | 0.2100/       | 0.0       | 0.2100       |            | RAN 315 PCS OF 8" 15 0 CPLGS WHICH WERE MFG ON 4/4/86 3A. |

Seq T Name AREA  
 0020 A Soc Sec  
 Date 04/10/1986  
 Shift 1ST 8 HOUR

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments                                                            |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|---------------------------------------------------------------------|
| 1.    | 024  | 14:17 | 15:15 | 58  | 0.0000 | 0.0900/       | 0.0       | 0.0900       |            | PUMP SETTING AT CNTL PANEL 3' FROM FLOOR -3' FROM CPLGS IN MACHINE. |

Seq T Name DOBBS, PHILLIP R.  
 0021 P Soc Sec 557-68-1875  
 Date 04/10/1986  
 Shift 1ST 8 HOUR

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.    | 025  | 07:14 | 15:20 | 486 | 0.0000 | 0.0800/       | 0.0       | 0.0800       |            |          |

Seq T Name JAMES, JIMMY L.  
 0022 P Soc Sec 572-82-0622  
 Date 04/08/1986  
 Shift 1ST 8 HOUR

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.    | 026  | 07:20 | 15:12 | 472 | 0.0000 | 0.0500/       | 0.0       | 0.0500       |            |          |

Seq T Name PADRON, MARTHA L.  
 0024 P Soc Sec 569-80-6279  
 Date 04/08/1986  
 Shift 1ST 8 HOUR

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------------|------------|----------|
| 1.    | 027  | 07:25 | 15:15 | 470 | 0.0000 | 0.0500/       | 0.0       | 0.0500       |            |          |

CTD021298

Seq T Name ATENCIO, SR, STEVEN A.  
 0025 P Soc Sec 553-88-1692  
 Date 04/10/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn COUPLING TESTER  
 Proc  
 Job OPERATOR  
 Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
 TWA 0.090000 F/CC  
 Pel/Exp Limit OSHA PEL = 2 F/CC  
 Product

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments                                          |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|---------------------------------------------------|
| 1.    | 028  | 07:15 | 15:29 | 494 | 0.0000 | 0.0900/       | 0.0       | 0.0900 |           |            | 3 HRS ON WET TESTER REST OF TIME WORKING IN YARD. |

Seq T Name SUAREZ, ANDRES L.  
 0026 P Soc Sec 560-68-8273  
 Date 04/08/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn LATHE - 1/4  
 Proc  
 Job OPERATOR  
 Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
 TWA 0.110000 F/CC  
 Pel/Exp Limit OSHA PEL = 2 F/CC  
 Product

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.    | 030  | 08:50 | 11:00 | 130 | 0.0000 | 0.0400/       | 0.0       | 0.0400 |           |            |          |
| 2.    | 031  | 11:27 | 15:17 | 230 | 0.0000 | 0.1500/       | 0.0       | 0.1500 |           |            |          |

Seq T Name BIVENS, JANET R.  
 0027 P Soc Sec 547-72-9345  
 Date 04/08/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn LATHE - FM  
 Proc  
 Job OPERATOR  
 Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
 TWA 0.210000 F/CC  
 Pel/Exp Limit OSHA PEL = 2 F/CC  
 Product

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.    | 032  | 07:35 | 15:20 | 465 | 0.0000 | 0.2100/       | 0.0       | 0.2100 |           |            |          |

Seq T Name MEIER, STEVEN C.  
 0028 P Soc Sec 568-06-9935  
 Date 04/08/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn SAW - REWORK  
 Proc LINE 1  
 Job OPERATOR  
 Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A  
 TWA 0.180000 F/CC  
 Pel/Exp Limit OSHA PEL = 2 F/CC  
 Product

| Equip | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-------|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.    | 033  | 07:10 | 09:30 | 140 | 0.0000 | 0.1700/       | 0.0       | 0.1700 |           |            |          |
| 2.    | 034  | 09:30 | 09:46 | 16  | 0.0000 | 0.3800/       | 0.0       | 0.3800 |           |            |          |
| 3.    | 035  | 09:46 | 15:10 | 324 | 0.0000 | 0.1800/       | 0.0       | 0.1800 |           |            |          |

CTD021299

Seq T Name WILSON, CHARLES R. Dept PRODUCTION Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A

0029 P Soc Sec 422-56-9672 Locn FITTINGS

Date 04/10/1986 Proc Pel/Exp Limit OSHA PEL = 2 F/CC

Shift 1ST 8 HOUR Job INSPECTOR Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.  | 036  | 07:20 | 15:21 | 481 | 0.0000 | 0.0900/       | 0.0       | 0.0900 |           |            |          |

Seq T Name SILVA, TONY G. Dept PRODUCTION Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A

0030 P Soc Sec 573-24-9440 Locn CRUSHER

Date 04/10/1986 Proc Pel/Exp Limit OSHA PEL = 2 F/CC

Shift 1ST 8 HOUR Job OPERATOR Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.  | 037  | 08:03 | 15:19 | 436 | 0.0000 | 0.0000/       | 0.0       | 0.0000 |           |            |          |

Seq T Name EATON, ROLAND D. Dept PRODUCTION Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A

0031 P Soc Sec 565-78-9858 Locn GENERAL

Date 04/08/1986 Proc Pel/Exp Limit OSHA PEL = 2 F/CC

Shift 1ST 8 HOUR Job LABORER Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|----------|
| 1.  | 038  | 07:55 | 15:27 | 452 | 0.0000 | 0.0300/       | 0.0       | 0.0300 |           |            |          |

Seq T Name GEORGE, ALAN L. Dept MAINTENANCE Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A

0032 P Soc Sec 561-90-0168 Locn GENERAL

Date 04/10/1986 Proc Pel/Exp Limit OSHA PEL = 2 F/CC

Shift 1ST 8 HOUR Job MECHANIC Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-F/CC | Conc-F/CC | ST     | Exp Limit | Respirator | Comments                              |
|-----|------|-------|-------|-----|--------|---------------|-----------|--------|-----------|------------|---------------------------------------|
| 1.  | 039  | 07:56 | 16:10 | 494 | 0.0000 | 0.0000/       | 0.0       | 0.0000 |           |            | EMPLOYEE DID SOME WE LDIING THIS DAY. |

Seq T Name DARNELL, WILLIAM C. Dept MAINTENANCE Contaminant Respirable Dust / CT PVC FILTER /CT gravimet R=A

0033 P Soc Sec 568-54-6818 Locn GENERAL

Date 04/10/1986 Proc Pel/Exp Limit OSHA PEL = 5 MG/M3

Shift 1ST 8 HOUR Job MECHANIC Product

| Eqp | Samp | Start | Stop  | Min | LPM    | Analysis-mg/m3 | Conc-mg/m3 | ST     | Exp Limit | Respirator | Comments                                            |
|-----|------|-------|-------|-----|--------|----------------|------------|--------|-----------|------------|-----------------------------------------------------|
| 1.  | 040  | 08:40 | 16:13 | 453 | 0.0000 | 0.1300/        | 0.0        | 0.1300 |           |            | EMPLOYEE PERFORMED M AINTENANCE ON THE SHOTBLASTER. |

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Seq T Name      ENGINEERING
0037 E Soc Sec
Date 04/10/1986
Shift 1ST      8 HOUR
Dept PRODUCTION
Locn BAG OPENER & MIXER
Proc
Job AREA SAMPLE
Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A
TWA 0.190000 F/CC
Pel/Exp Limit OSHA PEL = 2 F/CC
Product
ST Exp Limit Respirator
Comments
1. PUMP SETTING ON MOTO R AT INCLINE CONVEYR
   TO BUCKET ELEVATOR 4' FROM FLOOR
=====
```

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=====
Seq T Name      ENGINEERING
0038 E Soc Sec
Date 04/10/1986
Shift 1ST      8 HOUR
Dept PRODUCTION
Locn BAG OPENER & MIXER
Proc
Job AREA SAMPLE
Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A
TWA 0.090000 F/CC
Pel/Exp Limit OSHA PEL = 2 F/CC
Product
ST Exp Limit Respirator
Comments
1. PUMP SETTING ON MOTO R AT INCLINE CONVEYR
   TO BUCKET ELEVATOR 4' FROM FLOOR
=====
```

```
=====
Seq T Name      ENGINEERING
0039 E Soc Sec
Date 04/10/1986
Shift 1ST      8 HOUR
Dept PRODUCTION
Locn BAG OPENER & MIXER
Proc
Job AREA SAMPLE
Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A
TWA 0.150000 F/CC
Pel/Exp Limit OSHA PEL = 2 F/CC
Product
ST Exp Limit Respirator
Comments
1. PUMP SETTING ON MOTO R AT INCLINE CONVEYR
   TO BUCKET ELEVATOR 4' FROM FLOOR
=====
```

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=====
Seq T Name      ENGINEERING
0040 E Soc Sec
Date 04/10/1986
Shift 1ST      8 HOUR
Dept PRODUCTION
Locn GENERAL
Proc
Job AREA SAMPLE
Contaminant Asbestos / CEF 37mm .8u /P&CAM 239 R=A
TWA 0.520000 F/CC
Pel/Exp Limit OSHA PEL = 2 F/CC
Product
ST Exp Limit Respirator
Comments
1. PUMP HANGING FROM GU ARD RAIL, 3' FROM
   CAT WALK 3' FROM #2 MUNSON DISCHARGE SCR
=====
```

|                             |       |                 |                  |                                     |               |                |                                                                               |
|-----------------------------|-------|-----------------|------------------|-------------------------------------|---------------|----------------|-------------------------------------------------------------------------------|
| Seq T Name      ENGINEERING |       | Dept PRODUCTION |                  | Contaminant Asbestos / CEF 37mm .8u |               | /P&CAM 239 R=A |                                                                               |
| 0041 E Soc Sec              |       | Locn GENERAL    |                  | TWA      0.130000 F/CC              |               |                |                                                                               |
| Date      04/10/1986        |       | Proc            |                  | Pel/Exp Limit OSHA PEL = 2 F/CC     |               |                |                                                                               |
| Shift 1ST      8 HOUR       |       | Job AREA SAMPLE |                  | Product                             |               |                |                                                                               |
|                             |       |                 |                  |                                     |               |                |                                                                               |
| 1.                          | Equip | Samp            | Start   Stop Min | LPM                                 | Analysis-F/CC | Conc-F/CC      | ST Exp Limit   Respirator   Comments                                          |
|                             |       | 045             | 13:10 16:15 185  | 0.0000                              | 0.1300/   0.0 | 0.1300         | PUMP HANGING FROM GU ARD RAIL 3' FROM FLOOR 6' FROM #4 MUNSON DISCHARGE SCREW |

\*\*\*\*\*  
 \*\* \* End Of Report \*\* \* DREXLES

CTD021302

Seq T Name ANAYA, MADELINE Dept PRODUCTION Locn TRAY LOADING Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0001 P Soc Sec 557-96-3180

Date 04/09/1986

Shift 1ST 8 HOUR

Job OPERATOR Product I

Start Stop Minutes DBA Protection Comments

07:52 15:00 428 82.50

Protection Requirements

BELOW 8-HOUR ACTION LEVEL (85DBA)

HEARING PROTECTION OPTIONAL

Seq T Name BRYANT, BIRK

0002 P Soc Sec 266-82-7813

Date 04/09/1986

Shift 1ST 8 HOUR

Job HANDLER Product

Start Stop Minutes DBA Protection Comments

07:30 14:55 445 92.00

Protection Requirements

EXCEEDS 8 HOUR PEL (90DBA)

PROTECTION MANDATORY

Seq T Name CASAS, JOHN A.

0003 P Soc Sec 573-94-2307

Date 04/09/1986

Shift 1ST 8 HOUR

Job OPERATOR Product

Start Stop Minutes DBA Protection Comments

07:45 15:04 439 92.80

Protection Requirements

EXCEEDS 8 HOUR PEL (90DBA)

PROTECTION MANDATORY

Seq T Name CHUTE, ROBERT G.

0004 P Soc Sec 327-26-8652

Date 04/10/1986

Shift 1ST 8 HOUR

Job MECHANIC Product

Start Stop Minutes DBA Protection Comments

07:00 14:29 449 85.60

Protection Requirements

EXCEEDS 8-HOUR ACTION LEVEL (85DBA)

PROTECTION RECOMMENDED

CTD021303

RNH01 Industrial Hygiene Survey: 86-01 PIPE & PLASTICS-EPG RIVERSIDE

Seq T Name COOLEY, DENNIS D. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0005 P Soc Sec 344-30-3938 Dept PRODUCTION Locn COUPLING CUT OFF

Date 04/08/1986 Proc

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments  
07:15 15:20 485 88.90 Protection Requirements  
EXCEEDS 8-HOUR ACTION LEVEL (85DBA)  
PROTECTION RECOMMENDED

Seq T Name COOPER, HOWER L. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0006 P Soc Sec 568-13-3118 Dept PRODUCTION Locn LATHE LINE

Date 04/07/1986 Proc LINE 2

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments  
07:52 15:19 447 97.60 Protection Requirements  
EXCEEDS 8 HOUR PEL (90DBA)  
PROTECTION MANDATORY

Seq T Name DOBBS, JEFF M. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0007 P Soc Sec 571-92-9159 Dept PRODUCTION Locn BORING MILL

Date 04/08/1986 Proc LINE 1

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments  
07:14 15:20 486 0.00 V Protection Requirements  
Sample VOIDED

Seq T Name EVANS, GEORGE R. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0008 P Soc Sec 566-04-8933 Dept PRODUCTION Locn LATHE LINE

Date 04/07/1986 Proc LINE 2

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments  
07:45 15:17 452 0.00 V Protection Requirements  
Sample VOIDED

CTD021304

Seq T Name FOOSE, DENNIS J.  
 0009 P Soc Sec 568-08-6676  
 Date 04/07/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn HYDROTASTER  
 Proc LINE 2  
 Job OPERATOR  
 Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
 Product  
 Protection Requirements  
 EXCEEDS 8 HOUR PEL (90DBA)  
 PROTECTION MANDATORY

Seq T Name GARCIA, MONTY A.  
 0010 P Soc Sec 527-50-6060  
 Date 04/07/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn FINISHING  
 Proc LINE 2  
 Job INSPECTOR  
 Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
 Product  
 Protection Requirements  
 EXCEEDS 8 HOUR PEL (90DBA)  
 PROTECTION MANDATORY

Seq T Name GEORGE, ALAN L.  
 0011 P Soc Sec 561-90-0168  
 Date 04/10/1986  
 Shift 1ST 8 HOUR  
 Dept MAINTENANCE  
 Locn GENERAL  
 Proc  
 Job MECHANIC  
 Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
 Product  
 Protection Requirements  
 BELOW 8-HOUR ACTION LEVEL (85DBA)  
 HEARING PROTECTION OPTIONAL

Seq T Name JAMES, JIMMY L.  
 0012 P Soc Sec 572-82-0622  
 Date 04/10/1986  
 Shift 1ST 8 HOUR  
 Dept PRODUCTION  
 Locn BORING MILL 42  
 Proc  
 Job OPERATOR  
 Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
 Product  
 Protection Requirements  
 EXCEEDS 8 HOUR PEL (90DBA)  
 PROTECTION MANDATORY

CTD021305

RNH01 Industrial Hygiene Survey: 86-01 PIPE & PLASTICS-EPG RIVERSIDE

Seq T Name JAMES, JIMMY L. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0013 P Soc Sec 572-82-0622 Dept PRODUCTION Locn BORING MILL 42

Date 04/08/1986

Shift 1ST 8 HOUR

Job OPERATOR Product

Start Stop Minutes DBA Protection Comments

07:20 15:10 470 99.10

Protection Requirements

EXCEEDS 8 HOUR PEL (90DBA)

PROTECTION MANDATORY

Seq T Name LOLIE, KEVIN W. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0014 P Soc Sec 551-49-5291 Dept PRODUCTION Locn LATHE LINE

Date 04/07/1986

Shift 1ST 8 HOUR

Job HANDLER Product

Start Stop Minutes DBA Protection Comments

08:04 15:22 438 92.70

Protection Requirements

EXCEEDS 8 HOUR PEL (90DBA)

PROTECTION MANDATORY

Seq T Name MEIER, STEVEN C. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0015 P Soc Sec 568-06-9935 Dept PRODUCTION Locn SAW - REMORK

Date 04/08/1986

Shift 1ST 8 HOUR

Job OPERATOR Product

Start Stop Minutes DBA Protection Comments

07:10 15:09 479 88.50

Protection Requirements

EXCEEDS 8-HOUR ACTION LEVEL (85DBA)

PROTECTION RECOMMENDED

Seq T Name MORALES, DAVID E. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0016 P Soc Sec 549-52-6935 Dept PRODUCTION Locn PIPE MACHINE

Date 04/09/1986

Shift 1ST 8 HOUR

Job TENDER Product

Start Stop Minutes DBA Protection Comments

07:20 14:51 451 89.90

Protection Requirements

EXCEEDS 8-HOUR ACTION LEVEL (85DBA)

PROTECTION RECOMMENDED

CTD021306

RNH01 Industrial Hygiene Survey: 86-01 PIPE & PLASTICS-EPG RIVERSIDE

Seq T Name PADRON, MARTHA L. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0017 P Soc Sec 569-80-6279 Locn COUPLING TESTER

Date 04/08/1986 Proc

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments Protection Requirements

07:25 15:28 483 90.90 EXCEEDS 8 HOUR PEL (90DBA)  
PROTECTION MANDATORY

Seq T Name RICHARDSON, JERRY D. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0018 P Soc Sec 557-96-1876 Locn MANUFACTURING

Date 04/09/1986 Proc

Shift 1ST 8 HOUR Job RELIEF Product

Start Stop Minutes DBA Protection Comments Protection Requirements

07:46 15:02 436 90.10 EXCEEDS 8 HOUR PEL (90DBA)  
PROTECTION MANDATORY

Seq T Name SILVA, TONY G. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0019 P Soc Sec 573-24-9440 Locn CRUSHER

Date 04/10/1986 Proc

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments Protection Requirements

08:03 15:18 435 93.40 EXCEEDS 8 HOUR PEL (90DBA)  
PROTECTION MANDATORY

Seq T Name SUAREZ, ANDRES L. Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER

0020 P Soc Sec 560-68-8273 Locn LATHE - 1/4

Date 04/08/1986 Proc

Shift 1ST 8 HOUR Job OPERATOR Product

Start Stop Minutes DBA Protection Comments Protection Requirements

07:30 15:30 480 96.60 EXCEEDS 8 HOUR PEL (90DBA)  
PROTECTION MANDATORY

CTD021307

Seq T Name VOIGHTLANDER, CHRIS W.  
0021 P Soc Sec 553-70-9511  
Date 04/09/1986  
Shift 1ST 8 HOUR  
Dept PRODUCTION  
Locn GENERAL  
Proc  
Job SUPERVISOR  
Product  
Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
Protection Requirements  
08:04 15:43 459 84.70  
BELOW 8-HOUR ACTION LEVEL (85DBA)  
HEARING PROTECTION OPTIONAL

Seq T Name WILSON, CHARLES R.  
0022 P Soc Sec 422-56-9672  
Date 04/10/1986  
Shift 1ST 8 HOUR  
Dept PRODUCTION  
Locn FITTINGS  
Proc  
Job INSPECTOR  
Product  
Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
Protection Requirements  
07:20 15:21 481 0.00 V  
Sample VOIDED

Seq T Name STEWARD, RAYMOND L.  
0024 P Soc Sec 570-56-5483  
Date 04/09/1986  
Shift 1ST 8 HOUR  
Dept BATCH/FORMING  
Locn MIXER  
Proc  
Job OPERATOR  
Product  
Contaminant NOISE / AUDIO 80 DB CUT OFF /AUDIO DOSIMETER  
Protection Requirements  
07:15 14:51 456 85.90  
EXCEEDS 8-HOUR ACTION LEVEL (85DBA)  
PROTECTION RECOMMENDED

\*\*\* End Of Report \*\*\* DREXLESL

|                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|---------------|---------------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | LOG NO.                                                                                                                                                                                                                                                                                                                                                                                                                     | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            |                 |               |                     |                        |
| EMPLOYEE NAME<br><i>Stewart</i>                                                                                                                                                                                                                                                                                                                                                                                                                              |                 | DEPARTMENT/LINE                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Nixon Operator</i>                                                                                                                                                                                                                                                                                                                                                                                                    |                 | MANUFACTURING PRODUCT                                                                                                                                                                                                                                                                                                                                                                                                       |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                             |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                 |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS<br><input type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB<br><input type="checkbox"/> NOISE<br><input type="checkbox"/><br><input type="checkbox"/> |                 | <input type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER |                              | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER<br><input type="checkbox"/> 5μ PVC FILTER<br><input type="checkbox"/> GLASS FIBER SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |            |                 |               |                     |                        |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                             |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| OUTSIDE TEMP<br>°F                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 | WIND DIRECTION                                                                                                                                                                                                                                                                                                                                                                                                              | WIND VELOCITY<br>MPH         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY                                                                                                                                                                                                                                       |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PUMP SERIAL NO. | T <sub>h</sub>                                                                                                                                                                                                                                                                                                                                                                                                              | SAMPLE NO.                   | MILITARY TIME<br>START    STOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | TOTAL MINS | LPM/CC          | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
| 001                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1880            |                                                                                                                                                                                                                                                                                                                                                                                                                             | 825                          | 7:15    7:50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 455        | 1.75            | 796.25        | 146497.3            | 0.18 f/cc              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | IF SOMETIMES WHEN?                                                                                                                                                                                                                                                                                                                                                                                                          |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DOS SERIAL      | CELL                                                                                                                                                                                                                                                                                                                                                                                                                        | START (TIME)                 | STOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TOTAL MIN  | READ OUT RESULT | SHR CORR %    | CONVERTED DBA LEVEL |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1775            |                                                                                                                                                                                                                                                                                                                                                                                                                             | 7:15                         | 7:51                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 456        |                 |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTA?                                                                                                                                                                                                                                                                                                                                                                                                                          |                 | IF SOMETIMES WHEN?                                                                                                                                                                                                                                                                                                                                                                                                          |                              | MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                 |               |                     |                        |

JN 1041 2000    20111015  
 MONITOR RANGE: 70-110dB  
 SUBJECT:  
 M1  
 PUMP TYPE: M1 2000A  
 SAMPLING TIME: 45 MIN  
 MEASURING PERIOD: 1 min  
 NOISE PERIOD LEVEL: 100 dB  
 100 dB  
 100 dB  
 100 dB  
 100 dB

CTD021310

|                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME                                                                                                                                                                                                                                                                                                                                                                                           |                 | LOC NO.                                                                                                                                                                                                                                                                                                                                                                                                                     | SAMPLE TAKEN BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | DATE OF TEST                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 4/10/86                                                                                                                                                                                                                                                          |
| EMPLOYEE NAME                                                                                                                                                                                                                                                                                                                                                                                        |                 | DEPARTMENT/LINE                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                                                                                                                                                                                                                                                                                                                     |                 | MANUFACTURING PRODUCT                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| Bag Opener<br>Control panel                                                                                                                                                                                                                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                                                          |                 | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                             | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FIBERGLASS<br><input type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB<br><input type="checkbox"/> NOISE |                 | <input type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER | <input type="checkbox"/> 0.8µ MCF, MILLIPORE FILTER<br><input type="checkbox"/> 5µ PVC FILTER<br><input type="checkbox"/> GLASS FIBER SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                     |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                                                                                                                                                         |                 | WIND DIRECTION                                                                                                                                                                                                                                                                                                                                                                                                              | WIND VELOCITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                            | PUMP SERIAL NO. | T/R                                                                                                                                                                                                                                                                                                                                                                                                                         | SAMPLE NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | MILITARY TIME<br>START   STOP   TOTAL MINS<br>LPM/CC   VOLUME LITERS   ANALYSIS RESULT   AIRBORNE CONCENTRATION                                                                                                                                                  |
| 002                                                                                                                                                                                                                                                                                                                                                                                                  | 1880            |                                                                                                                                                                                                                                                                                                                                                                                                                             | 803                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 11:46 12:12 26 1.29 46.54 1512.7 0.031/cc                                                                                                                                                                                                                        |
| 003                                                                                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             | 832                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 12:12 1:24 72 128.88 6355.67 0.0496/cc                                                                                                                                                                                                                           |
| 004                                                                                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             | 794                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1:24 2:50 36 64.44 7828.07 0.044                                                                                                                                                                                                                                 |
| DID EMPLOYEE WEAR RESPIRATOR?   IF SOMETIMES WHEN?   RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                                                                                                         |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| CNTRL NO                                                                                                                                                                                                                                                                                                                                                                                             | DOS SERIAL      | CELL                                                                                                                                                                                                                                                                                                                                                                                                                        | START (TIME)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | STOP   TOTAL MINS   READING   SHR CORR %   CONVERTED DBA LEVEL                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR HEARING PROTECTION?   IF SOMETIMES WHEN?   MAKE & MODEL                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

803 Pump  
 832 no Pump + Pump  
 794 no Pump

CTD021311

**COMMENTS/SKETCHES**

834 Dump  
804 700 Dump + Dump  
793 no Dump

01-16-0056 12/81

|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
|-------------------------------------------------------------------------------------------------|-----------------|----------------|---------------------------------------------------|---------------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------|---------------------|------------------------|
| PLANT NAME                                                                                      |                 |                | LOC NO.                                           |               | SAMPLE TAKEN BY                                |                                                                                                                                                                                                                                                                  | DATE OF TEST                                   |               |                     |                        |
| EMPLOYEE NAME                                                                                   |                 |                | DEPARTMENT/LINE                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                 |                | MANUFACTURING PRODUCT                             |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| #2 Dischg                                                                                       |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| CONTAMINANT                                                                                     |                 |                | SAMPLING METHOD                                   |               |                                                | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                                                |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS                                                             |                 |                | <input type="checkbox"/> OPEN FACE                |               |                                                | <input type="checkbox"/> 0.8µ MCEP, MILLIPORE FILTER                                                                                                                                                                                                             |                                                |               |                     |                        |
| <input type="checkbox"/> ASBESTOS                                                               |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                                | <input type="checkbox"/> 5µ PVC FILTER                                                                                                                                                                                                                           |                                                |               |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                             |                 |                | <input type="checkbox"/> CYCLONE                  |               |                                                | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |                                                |               |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                            |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                                | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |                                                |               |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 |                | <input type="checkbox"/> CHARCOAL TUBE            |               |                                                | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |                                                |               |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 |                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |               |                                                | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |                                                |               |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 |                | <input type="checkbox"/> SILICAL GEL              |               |                                                | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |                                                |               |                     |                        |
| <input type="checkbox"/> PHENOL                                                                 |                 |                | <input type="checkbox"/> FLORISIL TUBE            |               |                                                | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |                                                |               |                     |                        |
| <input type="checkbox"/> PCB                                                                    |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                                | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |                                                |               |                     |                        |
| <input type="checkbox"/> NOISE                                                                  |                 |                | <input type="checkbox"/> AUDIO DOSIMETER          |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| EQUIPMENT                                                                                       |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 |                | <input type="checkbox"/> DUPONT P2500 PUMP        |               | <input type="checkbox"/> DUPONT P200A PUMP     |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> MSA PUMP              |               |                     |                        |
|                                                                                                 |                 |                |                                                   |               | <input type="checkbox"/> DUPONT D376 DOSIMETER |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> DUPONT D381 DOSIMETER |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| WEATHER CONDITIONS                                                                              |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION |                                                   | WIND VELOCITY |                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |               |                     |                        |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>R</sub> | SAMPLE NO.                                        | MILITARY TIME |                                                | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC                                         | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
|                                                                                                 |                 |                |                                                   | START         | STOP                                           |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| 008                                                                                             | 1870            |                | 772                                               | 1:12          | 4:15                                           | 183                                                                                                                                                                                                                                                              | 1.92                                           | 39.36         | 182487              | 0.519                  |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 |                | IF SOMETIMES WHEN?                                |               |                                                | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |                                                |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL           | START                                             | (TIME)        | STOP                                           | TOTAL MIN                                                                                                                                                                                                                                                        | READ OUT REPLY                                 | SHR CORR %    | CONVERTED SMA LEVEL |                        |
|                                                                                                 |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                | IF SOMETIMES WHEN?                                |               |                                                | MAKE & MODEL                                                                                                                                                                                                                                                     |                                                |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |
| COMMENTS/SKETCHES                                                                               |                 |                |                                                   |               |                                                |                                                                                                                                                                                                                                                                  |                                                |               |                     |                        |

CTD021313

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*R1*

|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| PLANT NAME                                                                                      |                                                   | LOG NO.                                                                                      | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  | DATE OF TEST                                   |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | <i>11/19/86</i>                                |
| EMPLOYEE NAME                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                                                   | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                |
| <i>#4 Discharge</i>                                                                             |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CONTAMINANT                                                                                     |                                                   | SAMPLING METHOD                                                                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                                                |
| <input type="checkbox"/> FIBERGLASS                                                             | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASBESTOS                                                               | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> NOISE                                                                  | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/>                                                                        |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/>                                                                        |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EQUIPMENT                                                                                       |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP        | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER |
| <input type="checkbox"/> DUPONT D381 DOSIMETER                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| WEATHER CONDITIONS                                                                              |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| OUTSIDE TEMP                                                                                    | WIND DIRECTION                                    | WIND VELOCITY                                                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                   | T <sub>R</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                  |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | START STOP TOTAL MINS                          |
| <i>009</i>                                                                                      | <i>5851</i>                                       |                                                                                              | <i>806</i>                                                                                                                                                                                                                                                       | <i>1:10 4:15 185</i>                           |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                           |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | MAKE & MODEL                                   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |

COMMENTS/SKETCHES

CTD021314

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

W1

|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------|-----------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                 | LOC NO.                                           | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i>                                                                                                                                                                                                                                    |           |                  |                 |                        |
| EMPLOYEE NAME                                                                                                                                                                                                                                                    |                 | DEPARTMENT/LINE                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>M. Tender</i>                                                                                                                                                                                                             |                 | MANUFACTURING PRODUCT                             |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |           |                  |                 |                        |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                              | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |           |                  |                 |                        |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 5µ PVC FILTER                                                                                                                                                                                                                           |           |                  |                 |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CYCLONE                  |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |           |                  |                 |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> CHARCOAL TUBE            |                              | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |           |                  |                 |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                              | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |           |                  |                 |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> SILICAL GEL              |                              | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |           |                  |                 |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> FLORISIL TUBE            |                              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |           |                  |                 |                        |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |           |                  |                 |                        |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |           |                  |                 |                        |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| OUTSIDE TEMP<br>°F                                                                                                                                                                                                                                               |                 | WIND DIRECTION                                    | WIND VELOCITY<br>MPH         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |           |                  |                 |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T/R                                               | SAMPLE NO.                   | MILITARY TIME<br>START STOP TOTAL MINS                                                                                                                                                                                                                           | LPM/CC    | VOLUME LITERS    | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
| 010                                                                                                                                                                                                                                                              | 1865            |                                                   | 856                          | 7:20 2:51 4:11                                                                                                                                                                                                                                                   | 1.76      | 793.76           | 6/104.7         | 0.077                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                 | IF SOMETIMES WHEN?                                |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |           |                  |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL      | CELL                                              | START (TIME)                 | STOP                                                                                                                                                                                                                                                             | TOTAL MIN | READ OUT RES/ALT | SHR CORR %      | CONVERTED DBA LEVEL    |
|                                                                                                                                                                                                                                                                  | 4733            |                                                   | 7:20                         | 2:51                                                                                                                                                                                                                                                             | 4:11      |                  |                 |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                 | IF SOMETIMES WHEN?                                |                              | MAKE & MODEL                                                                                                                                                                                                                                                     |           |                  |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |           |                  |                 |                        |

JE 001-0780  
DYNAMIC PRNGE: 70-11-1  
SUBJECT:  
MI  
PUN TIME: 01:20:00  
START TIME: 01:20:00  
INTERFERENCE PERIOD: 1 min  
HRR PERIOD LEVEL: 85.0 dB  
L2-3: 12.0  
DISE: 10.0  
PREDICTED DISE: 10.0

CTD021315

|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME                                                                                      |                 | LOG NO.                                           | SAMPLE TAKEN BY       |                                                                                              | DATE OF TEST            |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              | 4/10/86                 |                                                                                                                                                                                                                                                                  |
| EMPLOYEE NAME                                                                                   |                 |                                                   | DEPARTMENT/LINE       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                 |                                                   | MANUFACTURING PRODUCT |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| M. Tend Stator                                                                                  |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                     |                 | SAMPLING METHOD                                   |                       | SAMPLING MEDIA                                                                               |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FIBERGLASS                                                             |                 | <input type="checkbox"/> OPEN FACE                |                       | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> ASBESTOS                                                               |                 | <input type="checkbox"/> CLOSED FACE              |                       | <input type="checkbox"/> 5μ PVC FILTER                                                       |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> TOTAL DUST                                                             |                 | <input type="checkbox"/> CYCLONE                  |                       | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> SILICA DUST                                                            |                 | <input type="checkbox"/> CLOSED FACE              |                       | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 | <input type="checkbox"/> CHARCOAL TUBE            |                       | <input type="checkbox"/> SODIUM BISULFITE                                                    |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                       | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 | <input type="checkbox"/> SILICAL GEL              |                       | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PHENOL                                                                 |                 | <input type="checkbox"/> FLORISIL TUBE            |                       | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PCB                                                                    |                 | <input type="checkbox"/> CLOSED FACE              |                       | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> NOISE                                                                  |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/>                                                                        |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/>                                                                        |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                       |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |                       | <input type="checkbox"/> DUPONT P200A PUMP                                                   |                         | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                |
|                                                                                                 |                 |                                                   |                       | <input type="checkbox"/> DUPONT D376 DOSIMETER                                               |                         | <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                                                   |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                              |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                                    |                       | WIND VELOCITY                                                                                |                         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
| °F                                                                                              |                 |                                                   |                       | MPH                                                                                          |                         |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>h</sub>                                    | SAMPLE NO.            | MILITARY TIME<br>START STOP                                                                  |                         | TOTAL MINS                                                                                                                                                                                                                                                       |
| 011                                                                                             | 0540            |                                                   | 790                   | 1:11 4:15                                                                                    |                         | 184                                                                                                                                                                                                                                                              |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 | IF SOMETIMES WHEN?                                |                       |                                                                                              | RESPIRATOR MAKE & MODEL |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL                                              | START (TIME)          | STOP                                                                                         | TOTAL MIN               | READ OUT RESULT                                                                                                                                                                                                                                                  |
|                                                                                                 |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 | IF SOMETIMES WHEN?                                |                       |                                                                                              | MAKE & MODEL            |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |
| COMMENTS/SKETCHES                                                                               |                 |                                                   |                       |                                                                                              |                         |                                                                                                                                                                                                                                                                  |

CTD021316

## wi

**COMMENTS/SKETCHES**

01-16-0056 12/81

## W1

**COMMENTS/SKETCHES**

01-16-0056 12/81

|                                                                                                 |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
|-------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------|---------------|---------------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                  |                 | LOC NO.                                           | SAMPLE TAKEN BY<br><i>JW</i> |                                                                                                                                                                                                                                                                  | DATE OF TEST<br><i>4/9/86</i> |                         |               |                     |                        |
| EMPLOYEE NAME<br><i>M. Anaya</i>                                                                |                 | DEPARTMENT/LINE                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Tray Loader</i>                                          |                 | MANUFACTURING PRODUCT                             |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| CONTAMINANT                                                                                     |                 | SAMPLING METHOD                                   |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                               |                         |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS                                                             |                 | <input type="checkbox"/> OPEN FACE                |                              | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |                               |                         |               |                     |                        |
| <input type="checkbox"/> ASBESTOS                                                               |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |                               |                         |               |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                             |                 | <input type="checkbox"/> CYCLONE                  |                              | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                                                                                                                                                                                           |                               |                         |               |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                            |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |                               |                         |               |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 | <input type="checkbox"/> CHARCOAL TUBE            |                              | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |                               |                         |               |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                              | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |                               |                         |               |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 | <input type="checkbox"/> SILICAL GEL              |                              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |                               |                         |               |                     |                        |
| <input type="checkbox"/> PHENOL                                                                 |                 | <input type="checkbox"/> FLORISIL TUBE            |                              | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |                               |                         |               |                     |                        |
| <input type="checkbox"/> PCB                                                                    |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |                               |                         |               |                     |                        |
| <input type="checkbox"/> NOISE                                                                  |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| EQUIPMENT                                                                                       |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |                              | <input type="checkbox"/> DUPONT D376 DOSIMETER                                                                                                                                                                                                                   |                               |                         |               |                     |                        |
| <input type="checkbox"/> DUPONT P200A PUMP                                                      |                 | <input type="checkbox"/> MSA PUMP                 |                              | <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                                                   |                               |                         |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| WEATHER CONDITIONS                                                                              |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                                    |                              | WIND VELOCITY                                                                                                                                                                                                                                                    |                               |                         |               |                     |                        |
| °F                                                                                              |                 |                                                   |                              | MPH                                                                                                                                                                                                                                                              |                               |                         |               |                     |                        |
|                                                                                                 |                 |                                                   |                              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                               |                         |               |                     |                        |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>R</sub>                                    | SAMPLE NO.                   | MILITARY TIME<br>START STOP                                                                                                                                                                                                                                      | TOTAL MINS                    | LPM/CC                  | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
| 014                                                                                             | 4746            |                                                   | 759                          | 7:52 6:55                                                                                                                                                                                                                                                        | 423                           | 1.93                    | 816.39        | 2306.7              | 0.029                  |
|                                                                                                 | 1875            |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
|                                                                                                 |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
|                                                                                                 |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
|                                                                                                 |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                   |                 |                                                   | IF SOMETIMES WHEN?           |                                                                                                                                                                                                                                                                  |                               | RESPIRATOR MAKE & MODEL |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| CNTRL NO.                                                                                       | DOS SERIAL      | CELL                                              | START (TIME)                 | STOP                                                                                                                                                                                                                                                             | TOTAL MIN                     | READ OUT RESULT         | 8HR CORR %    | CONVERTED PPM LEVEL |                        |
|                                                                                                 | 4746            |                                                   | 7:52                         | 3:00                                                                                                                                                                                                                                                             | 4:28                          |                         |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                                                   | IF SOMETIMES WHEN?           |                                                                                                                                                                                                                                                                  |                               | MAKE & MODEL            |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |
| COMMENTS/SKETCHES                                                                               |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |                               |                         |               |                     |                        |

01-16-0056 12/81  
 SUBJECT: M1  
 DATE: 04/09/86  
 START TIME: 07:52  
 STOP TIME: 03:00  
 MEASURING PERIOD: 1000 Hz  
 PERIOD LEVEL: 80.0 dB  
 LOCATION: 01-16-0056  
 PROJECTED DOSE: 0.029

CTD021319

|                                                   |  |                       |                              |                               |
|---------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Uverside</i>                     |  | LOG NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>Richardson</i>                |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Relief</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                                                                                                                                                                                                                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |  |

| EXHAUST SYSTEMS/REMARKS                                                                         |  |
|-------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |  |

| WEATHER CONDITIONS |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|---------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP       |  | WIND DIRECTION |  | WIND VELOCITY |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |
| °F                 |  |                |  | MPH           |  |                                                                                                                                                                                                                                                                  |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T, R | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |      |            | START         | STOP |            |        |               |                 |                        |
| 015       | 5599            |      | 802        | 7:46          | 2:50 | 424        | 1.89   | 801.36        | 22012.6         | 0.027                  |
|           |                 |      |            |               |      |            |        |               |                 |                        |
|           |                 |      |            |               |      |            |        |               |                 |                        |
|           |                 |      |            |               |      |            |        |               |                 |                        |
|           |                 |      |            |               |      |            |        |               |                 |                        |

|                                                                                             |  |                    |  |                         |  |
|---------------------------------------------------------------------------------------------|--|--------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATORY?                                                              |  | IF SOMETIMES WHEN? |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |  |                    |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | 8HR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
|          | 4742       |      | 7:46         | 3:02 | 436       |                 |            |                     |

|                                                                                             |  |                    |  |              |  |
|---------------------------------------------------------------------------------------------|--|--------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECT?                                                          |  | IF SOMETIMES WHEN? |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |  |                    |  |              |  |

COMMENTS/SKETCHES

db-201-2750  
 (MILITARY) PMS: 75-1002  
 SUBJECT: MI  
 RUN TIME: 01:21:45  
 START TIME: 01:00:00  
 STOP TIME: 02:21:45  
 MEASURING PERIOD: 1:21:45  
 MAX PERIOD LEVEL: 20.1 db  
 MIN PERIOD LEVEL: 11.5 db  
 TIME: 1:21:45  
 TO: 120.7 db

CTD021320

|                                                                                                 |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
|-------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------|------------------|-----------------|------------------------|
| PLANT NAME<br><b>Riverside</b>                                                                  |                 | TAKEN BY<br><b>JW</b>                             |                    | DATE OF TEST<br><b>4/7/86</b>                                                                                                                                                                                                                                    |            |                         |                  |                 |                        |
| EMPLOYEE NAME<br><b>Cooper, H.</b>                                                              |                 | DEPARTMENT/LINE                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><b>Asst Lathe # 2 Oper</b>                                  |                 | MANUFACTURING PRODUCT                             |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| CONTAMINANT                                                                                     |                 | SAMPLING METHOD                                   |                    | SAMPLING MEDIA                                                                                                                                                                                                                                                   |            |                         |                  |                 |                        |
| <input type="checkbox"/> FIBERGLASS                                                             |                 | <input checked="" type="checkbox"/> OPEN FACE     |                    | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| <input checked="" type="checkbox"/> ASBESTOS                                                    |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| <input type="checkbox"/> TOTAL DUST                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                    | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |            |                         |                  |                 |                        |
| <input type="checkbox"/> SILICA DUST                                                            |                 | <input type="checkbox"/> CYCLONE                  |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 | <input type="checkbox"/> CLOSED FACE              |                    | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |            |                         |                  |                 |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 | <input type="checkbox"/> CHARCOAL TUBE            |                    | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |            |                         |                  |                 |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                    | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |            |                         |                  |                 |                        |
| <input type="checkbox"/> PHENOL                                                                 |                 | <input type="checkbox"/> SILICAL GEL              |                    | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |            |                         |                  |                 |                        |
| <input type="checkbox"/> PCB                                                                    |                 | <input type="checkbox"/> FLORISIL TUBE            |                    | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |            |                         |                  |                 |                        |
| <input checked="" type="checkbox"/> NOISE <b>120 dBS</b>                                        |                 | <input type="checkbox"/> CLOSED FACE              |                    | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |            |                         |                  |                 |                        |
|                                                                                                 |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                    | <input type="checkbox"/> 80dbs <input type="checkbox"/> 85dbs <input type="checkbox"/> 90dbs                                                                                                                                                                     |            |                         |                  |                 |                        |
| EQUIPMENT                                                                                       |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |                    | <input type="checkbox"/> DUPONT P200A PUMP                                                                                                                                                                                                                       |            |                         |                  |                 |                        |
| <input type="checkbox"/> MSA PUMP                                                               |                 | <input type="checkbox"/> DUPONT D376 DOSIMETER    |                    | <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                                                   |            |                         |                  |                 |                        |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| WEATHER CONDITIONS                                                                              |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                                    |                    | WIND VELOCITY                                                                                                                                                                                                                                                    |            |                         |                  |                 |                        |
| °F                                                                                              |                 |                                                   |                    | MPH                                                                                                                                                                                                                                                              |            |                         |                  |                 |                        |
|                                                                                                 |                 |                                                   |                    | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |                         |                  |                 |                        |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>F</sub>                                    | SAMPLE NO.         | MILITARY TIME<br>START STOP                                                                                                                                                                                                                                      | TOTAL MINS | LPM/CC                  | VOLUME LITERS    | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
| 019                                                                                             | 1858            |                                                   | 783                | 7:52 11:05                                                                                                                                                                                                                                                       | 193        | 1.76                    | 339.68           | 416939          | 0.12                   |
| 020                                                                                             |                 |                                                   | 773                | 11:29 3:17                                                                                                                                                                                                                                                       | 228        |                         | 401.28           | 14835.8         | 0.037                  |
|                                                                                                 |                 |                                                   |                    |                                                                                                                                                                                                                                                                  | 421        |                         |                  |                 |                        |
|                                                                                                 |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  | 9WA             | 0.075                  |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 |                                                   | IF SOMETIMES WHEN? |                                                                                                                                                                                                                                                                  |            | RESPIRATOR MAKE & MODEL |                  |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL                                              | START              | (TIME)                                                                                                                                                                                                                                                           | STOP       | TOTAL MIN               | HEARD OUT RESULT | SHR CORR. %     | CONVERTED DBA LEVEL    |
|                                                                                                 | 4734            |                                                   | 7:52               |                                                                                                                                                                                                                                                                  | 3:19       | 447                     |                  |                 |                        |
| DID EMPLOYEE WEAR/HEARING PROTECT                                                               |                 |                                                   | IF SOMETIMES WHEN? |                                                                                                                                                                                                                                                                  |            | MAKE & MODEL            |                  |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |                    |                                                                                                                                                                                                                                                                  |            |                         |                  |                 |                        |

CTD021321

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

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|                                                                                                                                                                                                                                                                  |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|---------------|---------------------|------------------------|-------------------|-------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                 | LOG NO.                                           | SAMPLE TAKEN BY<br><i>JSW</i> | DATE OF TEST<br><i>4/9/86</i>                                                                                                     |            |                 |               |                     |                        |                   |                         |
| EMPLOYEE NAME<br><i>Vaigant/Anderson</i>                                                                                                                                                                                                                         |                 | DEPARTMENT/LINE                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Supervisor</i>                                                                                                                                                                                                            |                 | MANUFACTURING PRODUCT                             |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                               | SAMPLING MEDIA                                                                                                                    |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                               | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                              |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                               | <input type="checkbox"/> 5μ PVC FILTER                                                                                            |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                               | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                            |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                               | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                         |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                               | <input type="checkbox"/> SODIUM BISULFITE                                                                                         |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                               | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                       |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                               | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                               | <input type="checkbox"/> GLASS FIBER FILTER                                                                                       |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                               | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                      |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                 | WIND DIRECTION                                    | WIND VELOCITY                 | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN       |            |                 |               |                     |                        |                   |                         |
| °F                                                                                                                                                                                                                                                               |                 |                                                   | MPH                           | <input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |                 |               |                     |                        |                   |                         |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T <sub>h</sub>                                    | SAMPLE NO.                    | MILITARY TIME                                                                                                                     | TOTAL MINS | LPM/CC          | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |                   |                         |
| 016                                                                                                                                                                                                                                                              | 1858            |                                                   | 855                           | 8:04 3:40                                                                                                                         | 456        | 1.79            | 811.68        | 48046.1             | 0.059                  |                   |                         |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        | IF SOMETIMES WHEN | RESPIRATOR MAKE & MODEL |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL      | CELL                                              | START (TIME)                  | STOP                                                                                                                              | TOTAL MIN  | READ OUT RESULT | 8HR CORR %    | CONVERTED DBA LEVEL |                        |                   |                         |
|                                                                                                                                                                                                                                                                  | 4738            |                                                   | 8:04                          | 3:43                                                                                                                              | 459        |                 |               |                     |                        |                   |                         |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        | IF SOMETIMES WHEN | MAKE & MODEL            |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                 |                                                   |                               |                                                                                                                                   |            |                 |               |                     |                        |                   |                         |

NO. 7-1-2000  
PHONE: 70-1336  
FAX: 70-1336M1  
FOR INFO: ON 7-1-2000  
STATION: 70-1336  
OPERATOR: 70-1336  
DO NOT FOR THE LINE: 70-1336  
Lobby: 70-1336  
DO NOT FOR THE LINE: 70-1336  
DO NOT FOR THE LINE: 70-1336

CTD021322

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

M

|                                                                                                 |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------|-----------------|-------------------------|------------------------|--|
| PLANT NAME<br><i>Riverside</i>                                                                  |                                                                         | LOG NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i>                                                                                                                                                                                                                                     | DATE OF TEST<br><i>4/7/86</i>                  |                    |                 |                         |                        |  |
| EMPLOYEE NAME<br><i>Evans</i>                                                                   |                                                                         | DEPARTMENT/LINE<br><i>Fin</i>                                                                |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Solder #2 Operator</i>                                   |                                                                         | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| CONTAMINANT                                                                                     |                                                                         | SAMPLING METHOD                                                                              |                                                                                                                                                                                                                                                                  | SAMPLING MEDIA                                 |                    |                 |                         |                        |  |
| <input type="checkbox"/> FIBERGLASS                                                             | <input checked="" type="checkbox"/> OPEN FACE                           | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input checked="" type="checkbox"/> ASBESTOS                                                    | <input type="checkbox"/> CLOSED FACE                                    | <input type="checkbox"/> 5µ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                                        | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE                                    | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE                                  | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES                       | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> SILICAL GEL                                    | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> FLORISIL TUBE                                  | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> CLOSED FACE                                    | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input checked="" type="checkbox"/> NOISE                                                       | <input checked="" type="checkbox"/> AUDIO DOSIMETER <i>Radio Shocks</i> |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> <i>NI</i>                                                              |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| EQUIPMENT                                                                                       |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP                              | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER |                    |                 |                         |                        |  |
| <input type="checkbox"/> DUPONT D381 DOSIMETER                                                  |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| WEATHER CONDITIONS                                                                              |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| OUTSIDE TEMP<br>°F                                                                              | WIND DIRECTION                                                          | WIND VELOCITY<br>MPH                                                                         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |                    |                 |                         |                        |  |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                                         | T <sub>1</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME<br>START STOP TOTAL MINS         | LPM/CC             | VOLUME LITERS   | ANALYSIS RESULT         | AIRBORNE CONCENTRATION |  |
| 017                                                                                             | 18970                                                                   |                                                                                              | 768                                                                                                                                                                                                                                                              | 7:45 11:05 280                                 | 1.85               | 370.0           | 7672.8                  | 0.02 f/cc              |  |
| 018                                                                                             |                                                                         |                                                                                              | 808                                                                                                                                                                                                                                                              | 11:29 3:17 228                                 |                    | 421.8           | 4720.18                 | 0.0097                 |  |
|                                                                                                 |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  | 428                                            |                    |                 | <i>QNA</i>              | 0.014 f/cc             |  |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                | IF SOMETIMES WHEN? |                 | RESPIRATOR MAKE & MODEL |                        |  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| CNTRL NO.                                                                                       | DOS SERIAL                                                              | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                           | TOTAL MIN          | READ OUT RESULT | 8HR CORR %              | CONVERTED DBA LEVEL    |  |
|                                                                                                 | 4739                                                                    | <i>off</i>                                                                                   |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| DID EMPLOYEE WEAR HEARING PROTECTN?                                                             |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                | IF SOMETIMES WHEN? |                 | MAKE & MODEL            |                        |  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |
| COMMENTS/SKETCHES                                                                               |                                                                         |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |                    |                 |                         |                        |  |

*Line 1 1 1/2 hr**Calcs 846*

## Asbestos Cement Pipe

## CAUTION:

- Contains asbestos fiber.
- Avoid creating dust. Breathing asbestos dust can cause serious bodily harm, including cancer and asbestosis.
- When cutting, machining and tapping, always use recommended work practices (Refer to Recommended Work Practice Guide furnished by Manufacturer to your employer).
- Do not use Abrasive Disc Saws.

## Tubo de Cemento Asbestos

## CUIDADO:

- Contiene fibra de asbestos.
- Evite crear polvo. La inhalación de polvo de asbestos puede causar graves daños a la salud, incluyendo cancer y asbestosis.
- Cuando se está cortando, maquinando o tallando, siempre siga las normas de trabajo recomendadas (Refiérase a la Guía de Normas de Trabajo Recomendadas, si Fabricante se la ha proporcionado a su patrón).
- No utilice Sierras de Disco Abrasivo.

CertainTeed

CertainTeed Corporation  
Pipe & Plastics Group  
P.O. Box 880, Valley Forge, PA 19402  
(215) 341-7000

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JRL</i> | DATE OF TEST<br><i>4/7/86</i>                                                                                                                                                                                                                                    |
| EMPLOYEE NAME<br><i>Dennis Foost</i>                                                                                                                                                                                                                             |                                                   | DEPARTMENT/LINE                                                                              |                               |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Hydrostatic #2</i>                                                                                                                                                                                                        |                                                   | MANUFACTURING PRODUCT                                                                        |                               |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              |                               | SAMPLING MEDIA                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |                               |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                               |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> NOISE <i>subsonics</i>                                                                                                                                                                                                       | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY                 | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTTY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>h</sub>                                                                               | SAMPLE NO.                    | MILITARY TIME<br>START    STOP    TOTAL MINS    LPM/CC    VOLUME LITERS    ANALYSIS RESULT    AIRBORNE CONCENTRATION                                                                                                                                             |
|                                                                                                                                                                                                                                                                  | <i>4743</i>                                       |                                                                                              | <i>1899</i>                   |                                                                                                                                                                                                                                                                  |
| <i>021</i>                                                                                                                                                                                                                                                       | <i>1899</i>                                       |                                                                                              | <i>817</i>                    | <i>7:49</i> <i>11:05</i> <i>190</i> <i>1966.88</i> <i>368.48</i> <i>47190.3</i> <i>0.13/cc</i>                                                                                                                                                                   |
| <i>022</i>                                                                                                                                                                                                                                                       |                                                   |                                                                                              | <i>800</i>                    | <i>11:29</i> <i>3:20</i> <i>731</i> <i>434.28</i> <i>46042.5</i> <i>0.11/cc</i>                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                               | <i>427</i> <i>9WA</i> <i>0.119/cc</i>                                                                                                                                                                                                                            |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                                                   | IF SOMETIMES WHEN?                                                                           |                               | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                  | STOP                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                  | <i>4743</i>                                       |                                                                                              | <i>7:49</i>                   | <i>3:23</i>                                                                                                                                                                                                                                                      |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                                                   | IF SOMETIMES WHEN?                                                                           |                               | MAKE & MODEL                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                               |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

AIR TEL 2000  
 INCHILL PRINCE: 20-1700P  
 CUST: 101  
 IN: 21:41:56  
 PRINT TIME: 01:01:53  
 PRINTED: 01:01:53  
 OPERATING PERIOD: 1:00:00  
 MAX. DESIRED LEVEL: 100.00  
 MEAS: 100.00  
 DATE: 4/7/86  
 PROTECTED CODE: 100.00

454

CTD021324

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*M*

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/7/86</i>                                                                                                                                                                                                                                    |
| EMPLOYEE NAME<br><i>Pipe Handler #2</i>                                                                                                                                                                                                                          |                                                   | DEPARTMENT/LINE<br><i>Fin</i>                                                                |                              |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Kelpie</i>                                                                                                                                                                                                                |                                                   | MANUFACTURING PRODUCT                                                                        |                              |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |
| <input checked="" type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                              |                              |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5µ PVC FILTER                                                       |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                       |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                              |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> NOISE <i>Hertz/Sonua</i>                                                                                                                                                                                                     | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>h</sub>                                                                               | SAMPLE NO.                   | MILITARY TIME                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | START    STOP    TOTAL MINS                                                                                                                                                                                                                                      |
| <i>023</i>                                                                                                                                                                                                                                                       | <i>1875</i>                                       |                                                                                              | <i>791</i>                   | <i>8:04    3:22    438</i>                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | LPM/CC    VOLUME LITERS    ANALYSIS RESULT    AIRBORNE CONCENTRATION                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | <i>1.96    858.48    28149.2    0.033</i>                                                                                                                                                                                                                        |
| DID EMPLOYEE WEAR RESPIRATORY?    IF SOMETIMES WHEN?    RESPIRATOR MAKE & MODEL                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                 | STOP                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | TOTAL MIN                                                                                                                                                                                                                                                        |
| <i>4745</i>                                                                                                                                                                                                                                                      |                                                   |                                                                                              | <i>8:04</i>                  | <i>3:22    438</i>                                                                                                                                                                                                                                               |
| DID EMPLOYEE WEAR HEARING PROTECTN?    IF SOMETIMES WHEN?    MAKE & MODEL                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

CTD001325, INC.  
 406-501-7777    406-501-7777  
 DATED: 4/7/86    70-17508  
 START TIME: 08:04  
 END TIME: 03:22  
 DURATION: 05:18  
 5.0% CO2/CO2 RATE  
 100% O2: 91.0%  
 100% O2: 100.0%  
 100% O2: 145.8%  
 100% O2: 91.0%  
 100% O2: 100.0%  
 100% O2: 117.5%

*438*
*438*

CTD021325

# CertainTee

## L HYGIENE MONITORING DATA SHEET

M

|                                                                                                 |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
|-------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| LOC NO.                                                                                         |                 | SAMPLE TAKEN BY                                   |              | DATE OF TEST                                                                                                                                                                                                                                                     |            |
|                                                                                                 |                 | JW                                                |              | 4/12/86                                                                                                                                                                                                                                                          |            |
| EMPLOYEE NAME                                                                                   |                 |                                                   |              | DEPARTMENT/LINE                                                                                                                                                                                                                                                  |            |
| Kunnside                                                                                        |                 |                                                   |              | Fin                                                                                                                                                                                                                                                              |            |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                 |                                                   |              | MANUFACTURING PRODUCT                                                                                                                                                                                                                                            |            |
| Inspector #2                                                                                    |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| CONTAMINANT                                                                                     |                 | SAMPLING METHOD                                   |              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |            |
| <input checked="" type="checkbox"/> FIBERGLASS                                                  |                 | <input checked="" type="checkbox"/> OPEN FACE     |              | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                  |            |
| <input checked="" type="checkbox"/> ASBESTOS                                                    |                 | <input type="checkbox"/> CLOSED FACE              |              | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |            |
| <input type="checkbox"/> TOTAL DUST                                                             |                 | <input type="checkbox"/> CYCLONE                  |              | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                                                                                                                                                                                           |            |
| <input type="checkbox"/> SILICA DUST                                                            |                 | <input type="checkbox"/> CLOSED FACE              |              | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |            |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 | <input type="checkbox"/> CHARCOAL TUBE            |              | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |            |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |              | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |            |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 | <input type="checkbox"/> SILICAL GEL              |              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |            |
| <input type="checkbox"/> PHENOL                                                                 |                 | <input type="checkbox"/> FLORISIL TUBE            |              | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |            |
| <input type="checkbox"/> PCB                                                                    |                 | <input type="checkbox"/> CLOSED FACE              |              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |            |
| <input checked="" type="checkbox"/> NOISE Kunnside                                              |                 | <input type="checkbox"/> AUDIO DOSIMETER          |              |                                                                                                                                                                                                                                                                  |            |
| EQUIPMENT                                                                                       |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |              | <input type="checkbox"/> DUPONT D376 DOSIMETER                                                                                                                                                                                                                   |            |
| <input type="checkbox"/> DUPONT P200A PUMP                                                      |                 | <input type="checkbox"/> MSA PUMP                 |              | <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                                                   |            |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| WEATHER CONDITIONS                                                                              |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                                    |              | WIND VELOCITY                                                                                                                                                                                                                                                    |            |
| °F                                                                                              |                 |                                                   |              | MPH                                                                                                                                                                                                                                                              |            |
|                                                                                                 |                 |                                                   |              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>h</sub>                                    | SAMPLE NO.   | MILITARY TIME                                                                                                                                                                                                                                                    | TOTAL MINS |
| 024                                                                                             | 867             |                                                   | 848          | 7:55 3:10                                                                                                                                                                                                                                                        | 435        |
|                                                                                                 |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
|                                                                                                 |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
|                                                                                                 |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
|                                                                                                 |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                   |                 | IF SOMETIMES WHEN?                                |              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |            |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| CNTRL NO.                                                                                       | DOS SERIAL      | CELL                                              | START (TIME) | STOP                                                                                                                                                                                                                                                             | TOTAL MIN  |
|                                                                                                 | 4733            |                                                   | 7:55         | 3:14                                                                                                                                                                                                                                                             | 439        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 | IF SOMETIMES WHEN?                                |              | MAKE & MODEL                                                                                                                                                                                                                                                     |            |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |
| COMMENTS/SKETCHES                                                                               |                 |                                                   |              |                                                                                                                                                                                                                                                                  |            |

CTD021326

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

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|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|---------------|---------------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/88</i>                                                                                                                                                                                                                                    |            |                 |               |                     |                        |
| EMPLOYEE NAME<br><i>Cooley</i>                                                                                                                                                                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Cpdy Saw</i>                                                                                                                                                                                                              |                                                   | MANUFACTURING PRODUCT                                                                        |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |            |                 |               |                     |                        |
| <input checked="" type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5µ PVC FILTER                                                       |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> NOISE <i>100db</i>                                                                                                                                                                                                                      | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| OUTSIDE TEMP<br>°F                                                                                                                                                                                                                                               |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY<br>MPH         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>R</sub>                                                                               | SAMPLE NO.                   | MILITARY TIME<br>START STOP                                                                                                                                                                                                                                      | TOTAL MINS | LPM/CC          | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
| 025                                                                                                                                                                                                                                                              | 1865                                              |                                                                                              | 822                          | 7:15 10:29                                                                                                                                                                                                                                                       | 194        | 1.84            | 356.96        | 13.68/15.9          | 0.39                   |
| 026                                                                                                                                                                                                                                                              |                                                   |                                                                                              | 815                          | 10:29 10:46                                                                                                                                                                                                                                                      | 17         |                 | 31.28         | 11579.9             | 0.37 f/cc              |
| 027                                                                                                                                                                                                                                                              |                                                   |                                                                                              | 784                          | 10:46 3:20                                                                                                                                                                                                                                                       | 244        |                 | 485.76        | 1316/16.1           | 0.27                   |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  | 475        |                 |               | QWA                 | 0.32                   |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                                                   | IF SOMETIMES WHEN?                                                                           |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                 | STOP                                                                                                                                                                                                                                                             | TOTAL MIN  | READ OUT RESULT | 8HR CORR %    | CONVERTED DBA LEVEL |                        |
|                                                                                                                                                                                                                                                                  | 4733                                              |                                                                                              | 7:15                         | 3:25                                                                                                                                                                                                                                                             | 480        |                 |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                                                   | IF SOMETIMES WHEN?                                                                           |                              | MAKE & MODEL                                                                                                                                                                                                                                                     |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |

COMMENTS/SKETCHES

No dust observed  
Today  
the certain pipe

10:29 11/11/11

db-100-0780  
PUMPING PUMP: 10-11-88  
SUBJECT: T1  
PUL TIME: 10:29  
START TIME: 01:01:00  
STOPPING PERIOD: 1:00:00  
TIME PERIOD LEVEL: 97 dB  
Losses: 84.9 dB  
DOSE (50%): 84.9 dB  
PROJECTED DOSE: 84.9 dB

CTD021327

|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME                                                                                                                                                                                                                                                       |                 | LOG NO.                                           | SAMPLE TAKEN BY | DATE OF TEST<br>4/10/86                                                                                                                                                                                                                                          |
| EMPLOYEE NAME<br>Coolley                                                                                                                                                                                                                                         |                 | DEPARTMENT/LINE                                   |                 |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION<br>Cply Cut off                                                                                                                                                                                                                 |                 | MANUFACTURING PRODUCT                             |                 |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                 | SAMPLING MEDIA                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                 | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 5µ PVC FILTER                                                                                                                                                                                                                           |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                 | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                                                                                                                                                                                           |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 150 mg CHARCOAL                                                                                                                                                                                                                         |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                 | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                 | <input type="checkbox"/> 300 mg SILICA GEL                                                                                                                                                                                                                       |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                 | <input type="checkbox"/> 150 mg SKC FLORISIL TUBE                                                                                                                                                                                                                |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                 | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                 |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                 | WIND DIRECTION                                    | WIND VELOCITY   | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T/R                                               | SAMPLE NO.      | MILITARY TIME                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | START   STOP   TOTAL MINS                                                                                                                                                                                                                                        |
| 028                                                                                                                                                                                                                                                              | 1880<br>1876    |                                                   | 807             | 2:17   3:15   58                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                 | IF SOMETIMES WHEN?                                |                 | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL      | CELL                                              | START (TIME)    | STOP                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                 | IF SOMETIMES WHEN?                                |                 | MAKE & MODEL                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

8" 150 cplg  
 mfg on 4/4/86 3A  
 3/5 pos cut  
 21 sticks 15cplg/stick

CTD021328

|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME                                                                                                                                                                                                                                                       |                 | LOC NO.                                           | SAMPLE TAKEN BY | DATE OF TEST                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | 4/10/86                                                                                                                                                                                                                                                          |
| EMPLOYEE NAME                                                                                                                                                                                                                                                    |                 | DEPARTMENT/LINE                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                                                                                                                                                                                 |                 | MANUFACTURING PRODUCT                             |                 |                                                                                                                                                                                                                                                                  |
| Cplg out off Area                                                                                                                                                                                                                                                |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                 | SAMPLING MEDIA                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                 | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 5µ PVC FILTER                                                                                                                                                                                                                           |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                 | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                                                                                                                                                                                           |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                 | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                 | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                 | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                 | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                 | WIND DIRECTION                                    | WIND VELOCITY   | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T <sub>R</sub>                                    | SAMPLE NO.      | MILITARY TIME                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | START STOP TOTAL MINS                                                                                                                                                                                                                                            |
| 029                                                                                                                                                                                                                                                              | 1880            |                                                   | 842             | 2:16 3:15 59                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                    |                 | IF SOMETIMES WHEN?                                |                 | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL      | CELL                                              | START (TIME)    | STOP TOTAL MIN                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | READ OUT RESULT                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | SHR CORR %                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | CONVERTED DBA LEVEL                                                                                                                                                                                                                                              |
| DID EMPLOYEE WEAR HEARING PROTECT                                                                                                                                                                                                                                |                 | IF SOMETIMES WHEN?                                |                 | MAKE & MODEL                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

CTD021329

R1

|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------|-------------------------|-----------------|------------------------|
| PLANT NAME                                                                                                                                                                                                                                                       |                 | LOG NO.                                           | SAMPLE TAKEN BY | DATE OF TEST                                                                                                                                                                                                                                                     |                    |           |                         |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 | 4/18/80                                                                                                                                                                                                                                                          |                    |           |                         |                 |                        |
| EMPLOYEE NAME                                                                                                                                                                                                                                                    |                 | DEPARTMENT/LINE                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| Dobbs                                                                                                                                                                                                                                                            |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                                                                                                                                                                                 |                 | MANUFACTURING PRODUCT                             |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| B Mill #1                                                                                                                                                                                                                                                        |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                 | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                    |           |                         |                 |                        |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                 | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |                    |           |                         |                 |                        |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |                    |           |                         |                 |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                 | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |                    |           |                         |                 |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |                    |           |                         |                 |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                 | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |                    |           |                         |                 |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                 | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |                    |           |                         |                 |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                 | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |                    |           |                         |                 |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                 | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |                    |           |                         |                 |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |                    |           |                         |                 |                        |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| <input type="checkbox"/>                                                                                                                                                                                                                                         |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                 | WIND DIRECTION                                    | WIND VELOCITY   | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                    |           |                         |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T <sub>h</sub>                                    | SAMPLE NO.      | MILITARY TIME                                                                                                                                                                                                                                                    | TOTAL MINS         | LPM/CC    | VOLUME LITERS           | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
| 030                                                                                                                                                                                                                                                              | 1867            |                                                   | 801             | 7:14                                                                                                                                                                                                                                                             | 3:20               | 486       | 1.70                    | 826.2           | 62549.8                |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                   |                 |                                                   |                 |                                                                                                                                                                                                                                                                  | IF SOMETIMES WHEN? |           | RESPIRATOR MAKE & MODEL |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL      | CELL                                              | START           | (TIME)                                                                                                                                                                                                                                                           | STOP               | TOTAL MIN | READ OUT RESULT         | 8HR CORR %      | CONCENTRATED DRA LEVEL |
|                                                                                                                                                                                                                                                                  | 4740            |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                 |                                                   |                 |                                                                                                                                                                                                                                                                  | IF SOMETIMES WHEN? |           | MAKE & MODEL            |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |                    |           |                         |                 |                        |

CTD021330

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Riveride</i>                                                                                                                                                                                                                                    |                                                   | LOG NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i>                                                                                                                                                                                                                                    |
| EMPLOYEE NAME<br><i>J. James</i>                                                                                                                                                                                                                                 |                                                   | DEPARTMENT/LINE                                                                              |                              |                                                                                                                                                                                                                                                                  |
| JOB/TITLE/ENVIRONMENTAL LOCATION<br><i>42" Mill</i>                                                                                                                                                                                                              |                                                   | MANUFACTURING PRODUCT                                                                        |                              |                                                                                                                                                                                                                                                                  |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |                              |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                              |                                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> NOISE <i>mixes</i>                                                                                                                                                                                                           | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>h</sub>                                                                               | SAMPLE NO.                   | MILITARY TIME                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | START    STOP    TOTAL MIN                                                                                                                                                                                                                                       |
| 031                                                                                                                                                                                                                                                              | 1867                                              |                                                                                              | 799                          | 7:20    3:12    472                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | comp —    1.75    926.0                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                   |                                                   | IF SOMETIMES WHEN?                                                                           |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                 | STOP                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | TOTAL MIN                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                  | 14745                                             |                                                                                              | 7:20                         | 3:10    470                                                                                                                                                                                                                                                      |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                                                   | IF SOMETIMES WHEN?                                                                           |                              | MAKE & MODEL                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |

COMMENTS/SKETCHES

*.7 fiberfield*

4/10/86  
 MONITORING PRICES 70-1-100  
 CORRECTED  
 410  
 POST TIME: 08:00:00  
 STARTING TIME: 08:13:00  
 STOPPING PERIOD: 1:00:00  
 MEASUREMENT LEVEL: 1.05 dB  
 DURATION: 94.1 MB  
 DATE: 4/8/86  
 PROJECTED DUSE: 302.0

*1.42*

*.7 x 855 = 0.0061*

*70/100*  

$$\frac{0.35 \times 855}{.0061 \times 1.75 \times 472 \times 1000} = \frac{299.25}{5038.6} = 0.0594$$

*130/107*  

$$\frac{0.136 \times 855}{.013 \times 1.75 \times 472 \times 1000} = \frac{543.78}{10738.0} = 0.0506$$

CTD021331

|                                                           |  |                       |                              |                               |
|-----------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                            |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i> |
| EMPLOYEE NAME<br><i>Eaton B</i>                           |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>General Helper</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                              | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|----------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                      | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                      | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                   | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)        | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                    | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                          | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>Machine</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |
| <input type="checkbox"/>                                 |                                                   |                                                                                              |
| <input type="checkbox"/>                                 |                                                   |                                                                                              |

| EQUIPMENT                                                                                       |                                            |                                            |                                                                                                                                                                                                                                                                  |                                                |                                                |
|-------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                            |                                            |                                                                                                                                                                                                                                                                  |                                                |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                            |                                            |                                                                                                                                                                                                                                                                  |                                                |                                                |
| WEATHER CONDITIONS                                                                              |                                            |                                            |                                                                                                                                                                                                                                                                  |                                                |                                                |
| OUTSIDE TEMP<br>°F                                                                              | WIND DIRECTION                             | WIND VELOCITY<br>MPH                       | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |                                                |

| CNTRL NO. | PUMP SERIAL NO. | T | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|---|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |   |            | START         | STOP |            |        |               |                 |                        |
| 043       | 1864            |   | 781        | 7:55          | 3:27 | 452        | 1.77   | 800.04        | 706.85          | 0.026                  |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |

|                               |                             |                                    |  |                         |  |
|-------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | 8HR CORR % | CONVERTED RES LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
|          |            |      |              |      |           |                 |            |                     |

|                                     |                             |                                    |  |              |  |
|-------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN? |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES        | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021332

|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                  |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JM</i>                                                                                                                                                                                                                                     | DATE OF TEST<br><i>4/8/86</i>                  |
| EMPLOYEE NAME<br><i>Pedrona</i>                                                                 |                                                   | DEPARTMENT/LINE                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Cpoly Test</i>                                           |                                                   | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                |
| CONTAMINANT                                                                                     |                                                   | SAMPLING METHOD                                                                              |                                                                                                                                                                                                                                                                  | SAMPLING MEDIA                                 |
| <input checked="" type="checkbox"/> FIBERGLASS                                                  | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEP, MILLIPORE FILTER                              |                                                                                                                                                                                                                                                                  |                                                |
| <input checked="" type="checkbox"/> ASBESTOS                                                    | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> AUDIO DOSIMETER          | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                |
| <input checked="" type="checkbox"/> NOISE <i>net</i>                                            |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EQUIPMENT                                                                                       |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP        | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER |
| <input type="checkbox"/> DUPONT D381 DOSIMETER                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| WEATHER CONDITIONS                                                                              |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| OUTSIDE TEMP<br>°F                                                                              | WIND DIRECTION                                    | WIND VELOCITY<br>MPH                                                                         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                   | T <sub>R</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                  |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | START STOP TOTAL MINS                          |
| 032                                                                                             | 1870                                              |                                                                                              | 4734<br>811                                                                                                                                                                                                                                                      | 7:25 3:15 467                                  |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                           |
|                                                                                                 | 4734                                              |                                                                                              | 7:25                                                                                                                                                                                                                                                             | 3:28                                           |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | MAKE & MODEL                                   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |

COMMENTS/SKETCHES

48-701 2780 5 014734  
 DYNAMIC RANGE: 70-110dB  
 START TIME:  
 T1  
 RUN TIME: 01:01:00  
 STOP TIME: 01:01:01  
 AVERAGING PERIOD: 1 min  
 NOISE PERIOD LEVEL: 101.0 dB  
 Leq: 99.9 dB  
 Dose: 114.0 %  
 CORRECTED DOSE: 114.0 %

CTD021333

|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| PLANT NAME                                                                                      |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  | DATE OF TEST                                   |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | 4/10                                           |
| EMPLOYEE NAME                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| atencio                                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                                                   | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                |
| Wet Tester                                                                                      |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CONTAMINANT                                                                                     |                                                   | SAMPLING METHOD                                                                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                                                |
| <input type="checkbox"/> FIBERGLASS                                                             | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASBESTOS                                                               | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5µ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> NOISE                                                                  | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EQUIPMENT                                                                                       |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP        | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER |
| <input type="checkbox"/> DUPONT D381 DOSIMETER                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| WEATHER CONDITIONS                                                                              |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| OUTSIDE TEMP                                                                                    | WIND DIRECTION                                    | WIND VELOCITY                                                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                   | T/R                                                                                          | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                  |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | START STOP TOTAL MINS                          |
| 033                                                                                             | 1804                                              |                                                                                              | 812                                                                                                                                                                                                                                                              | 7:15 3:29 494                                  |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
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|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                           |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | MAKE & MODEL                                   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |

COMMENTS/SKETCHES

7:15-10:30 Tester  
10:30-3:30 Fork Truck Jaul

CTD021334

7

**COMMENTS/SKETCHES**

01-16-0056 12/81

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                                                   | LOG NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i>                                                                                                                                                                                                                                   |
| EMPLOYEE NAME<br><i>Bevins</i>                                                                                                                                                                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                              |                                                                                                                                                                                                                                                                 |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>FM Salter</i>                                                                                                                                                                                                             |                                                   | MANUFACTURING PRODUCT                                                                        |                              |                                                                                                                                                                                                                                                                 |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                  |
| <input checked="" type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |                              |                                                                                                                                                                                                                                                                 |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                              |                                                                                                                                                                                                                                                                 |
| <input checked="" type="checkbox"/> NOISE <i>Machine</i>                                                                                                                                                                                                         | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> FLY. CLOUDY |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>R</sub>                                                                               | SAMPLE NO.                   | MILITARY TIME<br>START    STOP    TOTAL MINS    LPM/CC    VOLUME LITERS    ANALYSIS RESULT    AIRBORNE CONCENTRATION                                                                                                                                            |
| 037                                                                                                                                                                                                                                                              | 18580                                             |                                                                                              | 853                          | 7:35 3:20 4:05 2.14 995.10 209144.1 0.21 f/cc                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| DID EMPLOYEE WEAR RESPIRATORY?    IF SOMETIMES WHEN?    RESPIRATOR MAKE & MODEL                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                 | STOP    TOTAL MIN    READ OUT RESULT    8HR CORR %    CONVERTED DBA LEVEL                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| DID EMPLOYEE WEAR HEARING PROTECTN    IF SOMETIMES WHEN?    MAKE & MODEL                                                                                                                                                                                         |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                 |

*Bag opened put in  
new dust collector put in?*

CTD021336

|                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Gidesside</i>                                                                                                                                                                                                                                                                                                                                                                                                            |                 | LOG NO.                                                                                                                                                                                                                                                                                                                                                                                                                                | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/88</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| EMPLOYEE NAME<br><i>Meyer</i>                                                                                                                                                                                                                                                                                                                                                                                                             |                 | DEPARTMENT/LINE                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>#1 Rough Saw</i>                                                                                                                                                                                                                                                                                                                                                                                   |                 | MANUFACTURING PRODUCT                                                                                                                                                                                                                                                                                                                                                                                                                  |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                                        |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/> FIBERGLASS<br><input checked="" type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB<br><input checked="" type="checkbox"/> NOISE <i>cutting</i> |                 | <input checked="" type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER |                              | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER<br><input type="checkbox"/> 5µ PVC FILTER<br><input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| OUTSIDE TEMP                                                                                                                                                                                                                                                                                                                                                                                                                              |                 | WIND DIRECTION                                                                                                                                                                                                                                                                                                                                                                                                                         | WIND VELOCITY                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                 | PUMP SERIAL NO. | T <sub>h</sub>                                                                                                                                                                                                                                                                                                                                                                                                                         | SAMPLE NO.                   | MILITARY TIME<br>START    STOP    TOTAL MINS<br>LPM/CC    VOLUME LITERS    ANALYSIS RESULT    AIRBORNE CONCENTRATION                                                                                                                                                                                                                                                                                                                                                                                              |
| 038                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1899            |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 758                          | 7:10    9:30    140<br>1.89    264.6    46274    0.17                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 039                                                                                                                                                                                                                                                                                                                                                                                                                                       |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 814                          | 9:30    9:46    16<br>30.24    11579.9    0.383                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 040                                                                                                                                                                                                                                                                                                                                                                                                                                       |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 809                          | 9:46    3:10    324<br>612.36    112436    0.184                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              | 7:50    479    0.186                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                                                                                                                                                                                            |                 | IF SOMETIMES WHEN                                                                                                                                                                                                                                                                                                                                                                                                                      |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| CNTRL NO                                                                                                                                                                                                                                                                                                                                                                                                                                  | DOS SERIAL      | CELL                                                                                                                                                                                                                                                                                                                                                                                                                                   | START (TIME)                 | STOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                           | 473             |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7:10                         | 3:09                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                                                                                                                                                                                                        |                 | IF SOMETIMES WHEN                                                                                                                                                                                                                                                                                                                                                                                                                      |                              | MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                               |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

COMMENTS/SKETCHES

*814 - 9:30 12" X 11 9:58*

*9:38 Measured each pipe (8)  
Measured  
Adjusted Blade*

*9:41 111 9:46*

*9:46 Large Saw 1 Stacking*

ALL TESTS PERFORMED BY CERTAINTEED  
 LABORATORY NUMBER: 704-10008  
 SUBJECT: */*  
 TEST DATE: 04/08/88  
 SAMPLES: 11  
 STOPPING TIME: 00:00:11  
 MEASURING PERIOD: 1 min  
 MEASURING LEVEL: 94 dB  
 Dose: 88.5 dB  
 Dose Limit: 91.2 dB  
 EXPOSED TIME: 91.4 s

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*R1*

|                                                      |  |                               |                 |                                |
|------------------------------------------------------|--|-------------------------------|-----------------|--------------------------------|
| PLANT NAME                                           |  | LOG NO.                       | SAMPLE TAKEN BY | DATE OF TEST<br><i>4/10/86</i> |
| EMPLOYEE NAME<br><i>Wilson</i>                       |  | DEPARTMENT/LINE<br><i>Fin</i> |                 |                                |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Inspector</i> |  | MANUFACTURING PRODUCT         |                 |                                |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 |                                                   |                                                                                              |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CYCLONE                  |                                                                                              |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
|                                                   | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/>                          |                                                   |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |                |                      |                                |                                  |                                       |
|--------------------|----------------|----------------------|--------------------------------|----------------------------------|---------------------------------------|
| OUTSIDE TEMP<br>°F | WIND DIRECTION | WIND VELOCITY<br>MPH | <input type="checkbox"/> SUNNY | <input type="checkbox"/> CLOUDY  | <input type="checkbox"/> HUMID        |
|                    |                |                      | <input type="checkbox"/> FOG   | <input type="checkbox"/> SHOWERS | <input type="checkbox"/> SNOW         |
|                    |                |                      |                                | <input type="checkbox"/> RAIN    | <input type="checkbox"/> PTLY. CLOUDY |

| CNTRL NO. | PUMP SERIAL NO. | T/R | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|-----|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
| 041       | 1899            |     | 779        | 7:20          | 3:24 | 481        | 1.92   | 923.62        | 885742          | 0.09                   |
|           |                 |     | OK         |               |      |            |        |               |                 |                        |
|           |                 |     |            |               |      |            |        |               |                 |                        |
|           |                 |     |            |               |      |            |        |               |                 |                        |

| DID EMPLOYEE WEAR RESPIRATORY? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
|--------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| <input type="checkbox"/> YES   | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | 8HR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 474      |            |      |              |      |           |                 |            |                     |

| DID EMPLOYEE WEAR HEARING PROTECTN |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021338

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**

|                                                           |  |                       |                              |                               |
|-----------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                            |  | LOG NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i> |
| EMPLOYEE NAME<br><i>Eaton</i>                             |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>General Helper</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                             | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                     | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                     | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                    | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                  | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)       | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                   | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                         | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>75 dBA</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

|                                                                                                 |                                            |                                            |                                   |                                                |                                                |
|-------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| EQUIPMENT                                                                                       |                                            |                                            |                                   |                                                |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                            |                                            |                                   |                                                |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                            |                                            |                                   |                                                |                                                |

|                    |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |  |  |
|--------------------|--|----------------|--|---------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| WEATHER CONDITIONS |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |  |  |
| OUTSIDE TEMP       |  | WIND DIRECTION |  | WIND VELOCITY |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |  |  |
| °F                 |  |                |  | MPH           |  |                                                                                                                                                                                                                                                                  |  |  |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T. R. | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|-------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |       |            | START         | STOP |            |        |               |                 |                        |
| 043       | 1864            |       | 781        | 7:55          | 3:27 | 452        | 1.77   | 800.04        | 704.85          | 0.026                  |
|           |                 |       |            |               |      |            |        |               |                 |                        |
|           |                 |       |            |               |      |            |        |               |                 |                        |
|           |                 |       |            |               |      |            |        |               |                 |                        |
|           |                 |       |            |               |      |            |        |               |                 |                        |

|                               |                             |                                    |                    |  |  |                         |  |  |
|-------------------------------|-----------------------------|------------------------------------|--------------------|--|--|-------------------------|--|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             |                                    | IF SOMETIMES WHEN? |  |  | RESPIRATOR MAKE & MODEL |  |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                    |  |  |                         |  |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT REF. V. | SHR CORR. % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|------------------|-------------|---------------------|
|          |            |      |              |      |           |                  |             |                     |

|                                    |                             |                                    |                    |  |  |              |  |  |
|------------------------------------|-----------------------------|------------------------------------|--------------------|--|--|--------------|--|--|
| DID EMPLOYEE WEAR HEARING PROTECT? |                             |                                    | IF SOMETIMES WHEN? |  |  | MAKE & MODEL |  |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                    |  |  |              |  |  |

COMMENTS/SKETCHES

CTD021339

RI

|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| PLANT NAME                                                                                                                                                                                                                                                       |                 | LOG NO.                                           | SAMPLE TAKEN BY |                                                                                                                                                                                                                                                                  | DATE OF TEST |
| EMPLOYEE NAME<br><i>George</i>                                                                                                                                                                                                                                   |                 | DEPARTMENT/LINE                                   |                 |                                                                                                                                                                                                                                                                  |              |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Mechanic</i>                                                                                                                                                                                                              |                 | MANUFACTURING PRODUCT                             |                 |                                                                                                                                                                                                                                                                  |              |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                 | SAMPLING MEDIA                                                                                                                                                                                                                                                   |              |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                 | <input type="checkbox"/> 0.8μ MCEP, MILLIPORE FILTER                                                                                                                                                                                                             |              |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |              |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                 | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                                                                                                                                                                                           |              |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |              |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                 | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |              |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                 | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |              |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                 | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |              |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                 | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |              |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                 | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |              |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                 |                                                                                                                                                                                                                                                                  |              |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     |                 | WIND DIRECTION                                    | WIND VELOCITY   | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |              |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T <sub>R</sub>                                    | SAMPLE NO.      | MILITARY TIME<br>START STOP                                                                                                                                                                                                                                      | TOTAL MINS   |
| 044                                                                                                                                                                                                                                                              | 1875            |                                                   | 798             | 7:56 4:10                                                                                                                                                                                                                                                        | 494          |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
|                                                                                                                                                                                                                                                                  |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                   |                 | IF SOMETIMES WHEN?                                |                 | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |              |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL      | CELL                                              | START (TIME)    | STOP                                                                                                                                                                                                                                                             | TOTAL MIN    |
|                                                                                                                                                                                                                                                                  | 4738            |                                                   | 7:56            | 3:56                                                                                                                                                                                                                                                             | 480          |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                 | IF SOMETIMES WHEN?                                |                 | MAKE & MODEL                                                                                                                                                                                                                                                     |              |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                 |                                                   |                 |                                                                                                                                                                                                                                                                  |              |

APPROVED: \_\_\_\_\_  
 PROJECTED: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 TIME: \_\_\_\_\_  
 COMMENTS: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 TIME: \_\_\_\_\_  
 COMMENTS: \_\_\_\_\_

CTD021340

*12/1*

|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
|---------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|--------------------|--------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------|---------------------------|
| PLANT NAME                                                                                  |                 |                                                   |                    | LOG NO.                                    |                                                                                              | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  |                         | DATE OF TEST                                   |                           |
| EMPLOYEE NAME<br><i>K. Jarnell</i>                                                          |                 |                                                   |                    | DEPARTMENT/LINE                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Mechanic (Shot Blaster)</i>                          |                 |                                                   |                    | MANUFACTURING PRODUCT                      |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| CONTAMINANT                                                                                 |                 | SAMPLING METHOD                                   |                    |                                            | SAMPLING MEDIA                                                                               |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> FIBERGLASS                                                         |                 | <input type="checkbox"/> OPEN FACE                |                    |                                            | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> ASBESTOS                                                           |                 | <input type="checkbox"/> CLOSED FACE              |                    |                                            | <input type="checkbox"/> 5µ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> TOTAL DUST                                                         |                 | <input type="checkbox"/> CYCLONE                  |                    |                                            | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> SILICA DUST                                                        |                 | <input type="checkbox"/> CLOSED FACE              |                    |                                            | <input type="checkbox"/> 150 mg CHARCOAL                                                     |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> ASPHALT FUMES                                                      |                 | <input type="checkbox"/> CHARCOAL TUBE            |                    |                                            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                           |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                    |                                            | <input type="checkbox"/> 300 mg SILICA GEL                                                   |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> FORMALDEHYDE                                                       |                 | <input type="checkbox"/> SILICAL GEL              |                    |                                            | <input type="checkbox"/> 150 mg SKC FLORISIL TUBE                                            |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> PHENOL                                                             |                 | <input type="checkbox"/> FLORISIL TUBE            |                    |                                            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> PCB                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                    |                                            | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> NOISE                                                              |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/>                                                                    |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/>                                                                    |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| EQUIPMENT                                                                                   |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                  |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |                    | <input type="checkbox"/> DUPONT P200A PUMP |                                                                                              | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                |                         | <input type="checkbox"/> DUPONT D376 DOSIMETER |                           |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         | <input type="checkbox"/> DUPONT D381 DOSIMETER |                           |
| EXHAUST SYSTEMS/REMARKS                                                                     |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| <input type="checkbox"/> FUNCTIONING NORMALLY                                               |                 | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| WEATHER CONDITIONS                                                                          |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| OUTSIDE TEMP                                                                                |                 | WIND DIRECTION                                    |                    | WIND VELOCITY                              |                                                                                              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                         |                                                |                           |
| °F                                                                                          |                 |                                                   |                    | MPH                                        |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| CNTRL NO.                                                                                   | PUMP SERIAL NO. | T/R                                               | SAMPLE NO.         | MILITARY TIME START                        | STOP                                                                                         | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC                  | VOLUME LITERS                                  | AIRBORNE CONCENTRATION    |
| 045                                                                                         | 1858            | R                                                 | 379                | 8:41                                       | 4:13                                                                                         | 453                                                                                                                                                                                                                                                              | 1.80                    | 816.40                                         | 0.108mg <i>0.132mg/m³</i> |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| DID EMPLOYEE WEAR RESPIRATOR?                                                               |                 |                                                   | IF SOMETIMES WHEN? |                                            |                                                                                              |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL |                                                |                           |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| CNTRL NO                                                                                    | DOS SERIAL      | CELL                                              | START (TIME)       | STOP                                       | TOTAL MIN                                                                                    | READ OUT RESULT                                                                                                                                                                                                                                                  | SHR CORR %              | CONVERTED DBA LEVEL                            |                           |
|                                                                                             |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                          |                 |                                                   | IF SOMETIMES WHEN? |                                            |                                                                                              |                                                                                                                                                                                                                                                                  | MAKE & MODEL            |                                                |                           |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |
| COMMENTS/SKETCHES                                                                           |                 |                                                   |                    |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                           |

CTD021341

45-381-2705 8444745  
DYNAMIC RANGE: 70- 133dB  
SUBJECT:  
M1  
RUN TIME: 0: 2:36:24  
STANDBY TIME: 0: 0:40: 6  
AVERAGING PERIOD: 1 min  
MAX PERIOD LEVEL: 100 dB  
Losses: 25.9 dB  
DOSE (90): 53.5 %  
-- ADJUSTED DOSE: 56.3 %

CTD021342

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

W1

|                                                                                                                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|---------------|---------------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                 | LOC NO.                                           | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i>                                                                                                                                                                                                                                    |            |                 |               |                     |                        |
| EMPLOYEE NAME<br><i>Stewart</i>                                                                                                                                                                                                                                  |                 | DEPARTMENT/LINE                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Mixer Operator</i>                                                                                                                                                                                                        |                 | MANUFACTURING PRODUCT                             |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      |                 | SAMPLING METHOD                                   |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |            |                 |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              |                 | <input type="checkbox"/> OPEN FACE                |                              | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |            |                 |               |                     |                        |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 5µ PVC FILTER                                                                                                                                                                                                                           |            |                 |               |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              |                 | <input type="checkbox"/> CYCLONE                  |                              | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                                                                                                                                                                                           |            |                 |               |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           |                 | <input type="checkbox"/> CHARCOAL TUBE            |                              | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |            |                 |               |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                              | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |            |                 |               |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            |                 | <input type="checkbox"/> SILICAL GEL              |                              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |            |                 |               |                     |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  |                 | <input type="checkbox"/> FLORISIL TUBE            |                              | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |            |                 |               |                     |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     |                 | <input type="checkbox"/> CLOSED FACE              |                              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |            |                 |               |                     |                        |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   |                 | <input type="checkbox"/> AUDIO DOSIMETER          |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| OUTSIDE TEMP<br>°F                                                                                                                                                                                                                                               |                 | WIND DIRECTION                                    | WIND VELOCITY<br>MPH         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO. | T/R                                               | SAMPLE NO.                   | MILITARY TIME<br>START STOP                                                                                                                                                                                                                                      | TOTAL MINS | LPM/CC          | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
| <i>046</i>                                                                                                                                                                                                                                                       | <i>1880</i>     |                                                   | <i>825</i>                   | <i>7:15 2:50</i>                                                                                                                                                                                                                                                 | <i>455</i> | <i>1.75</i>     | <i>796.25</i> |                     |                        |
| DID EMPLOYEE WEAR RESPIRATORY? IF SOMETIMES WHEN? RESPIRATOR MAKE & MODEL                                                                                                                                                                                        |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL      | CELL                                              | START (TIME)                 | STOP                                                                                                                                                                                                                                                             | TOTAL MIN  | READ OUT RESULT | 8HR CORR %    | CONVERTED DBA LEVEL |                        |
| <i>046</i>                                                                                                                                                                                                                                                       | <i>4745</i>     |                                                   | <i>7:15</i>                  | <i>2:51</i>                                                                                                                                                                                                                                                      | <i>456</i> |                 |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN IF SOMETIMES WHEN? MAKE & MODEL                                                                                                                                                                                               |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                 |                                                   |                              |                                                                                                                                                                                                                                                                  |            |                 |               |                     |                        |

COMMENTS/SKETCHES

CTD021343

01-301-2780 01-301-2780  
DYNAMIC RANGE: 75-1500  
SUBJECT:

W1

RUN TIME: 01:07:56:27  
STANDBY TIME: 01:01:27:33  
OPERATING PERIOD: 1:00:00  
MAX PERIOD LEVEL: 30.00  
DOSE (90): 30.00  
PROJECTED DOSE: 30.00

CTD021344

**CertainTeed**

INDUSTRIAL HYGIENE MONITORING DATA SHEET

W1

|                                                      |  |                       |                              |                               |
|------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                       |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>Morales</i>                      |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>M. Tender</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

|                                            |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

|                                               |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| EXHAUST SYSTEMS/REMARKS                       |                                                   |
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

|                    |                |                      |                                |                                  |                                       |
|--------------------|----------------|----------------------|--------------------------------|----------------------------------|---------------------------------------|
| WEATHER CONDITIONS |                |                      |                                |                                  |                                       |
| OUTSIDE TEMP<br>°F | WIND DIRECTION | WIND VELOCITY<br>MPH | <input type="checkbox"/> SUNNY | <input type="checkbox"/> CLOUDY  | <input type="checkbox"/> HUMID        |
|                    |                |                      | <input type="checkbox"/> FOG   | <input type="checkbox"/> SHOWERS | <input type="checkbox"/> SNOW         |
|                    |                |                      |                                | <input type="checkbox"/> RAIN    | <input type="checkbox"/> PTLY. CLOUDY |

| CNTRL NO. | PUMP SERIAL NO. | T | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|---|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |   |            | START         | STOP |            |        |               |                 |                        |
|           | 1865            |   | 856        | 7:20          | 2:51 | 451        | 1.76   | 793.76        |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |

|                                |                             |                                    |  |                         |  |
|--------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATORY? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES   | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO. | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | SHR CORR % | CONVERTED RIA LEVEL |
|-----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 047       | 4733       |      | 7:20         | 2:51 | 478       |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021345

25-31: 2750 5404041  
DYNAMIC RANGE: 70- 17.9  
DATE:

01  
RUN TIME: 8: 2:19:27  
STANDBY TIME: 8: 8:17:27  
PURSUITING PERIOD: 1.1  
DAY PERIOD LEVEL: 101.52  
Losses: 9.13 GB  
DOSE (80): 174.3 %  
PROJECTED DOSE: 147.4 %

CTD021346

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*W1*

|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
|-------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------|---------------------------------------------------|--------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                  |                 |                                            | LOC NO.                                           |                                            | SAMPLE TAKEN BY<br><i>JW</i> |                                                                                                                                                                                                                                                                  | DATE OF TEST<br><i>4/9/86</i> |                                                |
| EMPLOYEE NAME<br><i>Casan</i>                                                                   |                 |                                            | DEPARTMENT/LINE                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Press Operator</i>                                       |                 |                                            | MANUFACTURING PRODUCT                             |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| CONTAMINANT                                                                                     |                 |                                            | SAMPLING METHOD                                   |                                            |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                               |                                                |
| <input type="checkbox"/> FIBERGLASS                                                             |                 |                                            | <input type="checkbox"/> OPEN FACE                |                                            |                              | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |                               |                                                |
| <input type="checkbox"/> ASBESTOS                                                               |                 |                                            | <input type="checkbox"/> CLOSED FACE              |                                            |                              | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |                               |                                                |
| <input type="checkbox"/> TOTAL DUST                                                             |                 |                                            | <input type="checkbox"/> CYCLONE                  |                                            |                              | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |                               |                                                |
| <input type="checkbox"/> SILICA DUST                                                            |                 |                                            | <input type="checkbox"/> CLOSED FACE              |                                            |                              | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |                               |                                                |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 |                                            | <input type="checkbox"/> CHARCOAL TUBE            |                                            |                              | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |                               |                                                |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 |                                            | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                                            |                              | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |                               |                                                |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 |                                            | <input type="checkbox"/> SILICAL GEL              |                                            |                              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |                               |                                                |
| <input type="checkbox"/> PHENOL                                                                 |                 |                                            | <input type="checkbox"/> FLORISIL TUBE            |                                            |                              | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |                               |                                                |
| <input type="checkbox"/> PCB                                                                    |                 |                                            | <input type="checkbox"/> CLOSED FACE              |                                            |                              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |                               |                                                |
| <input type="checkbox"/> NOISE                                                                  |                 |                                            | <input type="checkbox"/> AUDIO DOSIMETER          |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| <input type="checkbox"/>                                                                        |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| <input type="checkbox"/>                                                                        |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| <input type="checkbox"/>                                                                        |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| EQUIPMENT                                                                                       |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP |                                                   | <input type="checkbox"/> DUPONT P200A PUMP |                              | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                |                               | <input type="checkbox"/> DUPONT D376 DOSIMETER |
|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               | <input type="checkbox"/> DUPONT D381 DOSIMETER |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| WEATHER CONDITIONS                                                                              |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                             |                                                   | WIND VELOCITY                              |                              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                               |                                                |
| °F                                                                                              |                 |                                            |                                                   | MPH                                        |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>P</sub>                             | SAMPLE NO.                                        | MILITARY TIME<br>START STOP                |                              | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC                        | VOLUME LITERS                                  |
|                                                                                                 | 1570            |                                            | 787                                               | 7:45                                       | 2:46                         | 421                                                                                                                                                                                                                                                              | 1.88                          | 291.48                                         |
|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
|                                                                                                 |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                   |                 |                                            | IF SOMETIMES WHEN?                                |                                            |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |                               |                                                |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL                                       | START (TIME)                                      | STOP                                       | TOTAL MIN                    | READ OUT RESULT                                                                                                                                                                                                                                                  | 8HR CORR %                    | CONVERTED DBA LEVEL                            |
| 048                                                                                             | 4763            |                                            | 7:45                                              | 3:04                                       | 439                          |                                                                                                                                                                                                                                                                  |                               |                                                |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                                            | IF SOMETIMES WHEN?                                |                                            |                              | MAKE & MODEL                                                                                                                                                                                                                                                     |                               |                                                |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                            |                                                   |                                            |                              |                                                                                                                                                                                                                                                                  |                               |                                                |

COMMENTS/SKETCHES

CTD021347

08-24-12 08:47:14  
DYNAMIC RANGE: 70-100dB  
LOCATION:  
16  
RUN TIME: 0: 2: 3:54  
START/STOP TIME: 0: 3: 47:01

S SB EXCHANGE RATE  
Losses(00): 90.0 dB  
DOSE (90): 117.2 %  
PROJECTED DOSE: 132.8 %  
Losses(90): 91.1 dB  
DOSE (90): 102.8 %  
PROJECTED DOSE: 115.2 %

CTD021348

|                                                             |  |                       |                              |                               |
|-------------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                              |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JD</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>Ryan</i>                                |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Mandul (handler)</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORESIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|---------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP       |  | WIND DIRECTION |  | WIND VELOCITY |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T <sub>P</sub> | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|----------------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |                |            | START         | STOP |            |        |               |                 |                        |
|           | 1567            |                | 442        | 7:30          | 2:45 | 435        | 1.73   | 742.55        |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |

|                               |                             |                                    |                    |  |  |                         |  |  |
|-------------------------------|-----------------------------|------------------------------------|--------------------|--|--|-------------------------|--|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             |                                    | IF SOMETIMES WHEN? |  |  | RESPIRATOR MAKE & MODEL |  |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                    |  |  |                         |  |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | REAR OUT RESULT | 8HR CORR % | CONVERTED PMA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 049      | Y743       |      | 7:30         | 2:55 | 425       |                 |            |                     |

|                                    |                             |                                    |                    |  |  |              |  |  |
|------------------------------------|-----------------------------|------------------------------------|--------------------|--|--|--------------|--|--|
| DID EMPLOYEE WEAR HEARING PROTECTA |                             |                                    | IF SOMETIMES WHEN? |  |  | MAKE & MODEL |  |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                    |  |  |              |  |  |

COMMENTS/SKETCHES

CTD021349

DE-001/2780 8-10-47  
DYNAMIC RANGE: 70- 1335  
SUBJECT:  
01  
RUN TIME: 24 24 34  
RECORD TIME: 01 01 14  
ACQUISITION PERIOD: 1 sec  
REL. PERIOD LIMIT: 100 sec  
DOSE: 82.5 MS  
DOSE (90%): 31.1 %  
PROJECTED DOSE: 35.3 %

CTD021350

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*W1*

|                                                        |  |                       |                              |                               |
|--------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                         |  | LOC. NO.              | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>M. Anaya</i>                       |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Tray Loader</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

|                                            |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

|                                               |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| EXHAUST SYSTEMS/REMARKS                       |                                                   |
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

|                    |                |                      |                                |                                  |                                       |
|--------------------|----------------|----------------------|--------------------------------|----------------------------------|---------------------------------------|
| WEATHER CONDITIONS |                |                      |                                |                                  |                                       |
| OUTSIDE TEMP<br>°F | WIND DIRECTION | WIND VELOCITY<br>MPH | <input type="checkbox"/> SUNNY | <input type="checkbox"/> CLOUDY  | <input type="checkbox"/> HUMID        |
|                    |                |                      | <input type="checkbox"/> FOG   | <input type="checkbox"/> SHOWERS | <input type="checkbox"/> SNOW         |
|                    |                |                      |                                | <input type="checkbox"/> RAIN    | <input type="checkbox"/> PTLY. CLOUDY |

| CNTRL NO. | PUMP SERIAL NO. | T <sub>R</sub> | SAMPLE NO. | MILITARY TIME |             | TOTAL MINS | LPM/CC      | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|----------------|------------|---------------|-------------|------------|-------------|---------------|-----------------|------------------------|
|           |                 |                |            | START         | STOP        |            |             |               |                 |                        |
|           | <i>4746</i>     |                | <i>759</i> | <i>7:52</i>   | <i>2:55</i> | <i>428</i> | <i>1.93</i> | <i>816.39</i> |                 |                        |
|           | <i>1875</i>     |                |            |               |             |            |             |               |                 |                        |
|           |                 |                |            |               |             |            |             |               |                 |                        |
|           |                 |                |            |               |             |            |             |               |                 |                        |
|           |                 |                |            |               |             |            |             |               |                 |                        |

|                                |                             |                                    |  |                         |  |
|--------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATORY? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES   | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO   | DOS SERIAL  | CELL | START (TIME) | STOP        | TOTAL MIN  | READ OUT RESULT | SHR CORR % | CONVERTED DBA LEVEL |
|------------|-------------|------|--------------|-------------|------------|-----------------|------------|---------------------|
| <i>050</i> | <i>4746</i> |      | <i>7:52</i>  | <i>3:00</i> | <i>428</i> |                 |            |                     |

|                                     |                             |                                    |  |              |  |
|-------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN? |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES        | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021351

dB-301-2780 8/11/9742  
DYNAMIC RANGE: 70- 133dB  
SUBJECT:  
M1  
RUN TIME: 0: 7:18:52  
STANDBY TIME: 0: 0:21:76  
AVERAGING PERIOD: 1.000  
MAX PERIOD LEVEL: 100.00  
Losses: 90.1 dB  
DOSE (90): 91.5 %  
PROJECTED DOSE: 100.7 %

CTD021352

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*W1*

|                                                   |  |                       |                              |                               |
|---------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Uverside</i>                     |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>Richardson</i>                |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Relief</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |

|                                            |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

|                                               |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| EXHAUST SYSTEMS/REMARKS                       |                                                   |
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

|                    |                |                      |                                |                                  |                                       |
|--------------------|----------------|----------------------|--------------------------------|----------------------------------|---------------------------------------|
| WEATHER CONDITIONS |                |                      |                                |                                  |                                       |
| OUTSIDE TEMP<br>°F | WIND DIRECTION | WIND VELOCITY<br>MPH | <input type="checkbox"/> SUNNY | <input type="checkbox"/> CLOUDY  | <input type="checkbox"/> HUMID        |
|                    |                |                      | <input type="checkbox"/> POG   | <input type="checkbox"/> SHOWERS | <input type="checkbox"/> SNOW         |
|                    |                |                      |                                | <input type="checkbox"/> RAIN    | <input type="checkbox"/> PTLY. CLOUDY |

| CNTRL NO.   | PUMP SERIAL NO. | T <sub>h</sub> | SAMPLE NO. | MILITARY TIME |             | TOTAL MINS | LPM/CC      | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-------------|-----------------|----------------|------------|---------------|-------------|------------|-------------|---------------|-----------------|------------------------|
|             |                 |                |            | START         | STOP        |            |             |               |                 |                        |
| <i>1899</i> |                 |                | <i>802</i> | <i>7:46</i>   | <i>2:50</i> | <i>424</i> | <i>1.89</i> | <i>801.36</i> |                 |                        |
|             |                 |                |            |               |             |            |             |               |                 |                        |
|             |                 |                |            |               |             |            |             |               |                 |                        |
|             |                 |                |            |               |             |            |             |               |                 |                        |
|             |                 |                |            |               |             |            |             |               |                 |                        |

|                               |                             |                                    |  |                         |  |
|-------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO   | DOS SERIAL  | CELL | START (TIME) | STOP        | TOTAL MIN  | READ OUT RESULT | SHR CORR % | CONVERTED DBA LEVEL |
|------------|-------------|------|--------------|-------------|------------|-----------------|------------|---------------------|
| <i>051</i> | <i>4742</i> |      | <i>7:46</i>  | <i>3:02</i> | <i>436</i> |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECT? |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021353

db-301/2780 5/18/72  
DYNAMIC RANGE: 70-100dB  
SUBJECT:  
NO  
RUN TIME: 9: 1: 29.00  
STANDBY TIME: 0: 0: 0.10  
WARMING PERIOD: 1.410  
MAX PERIOD LEVEL: 93 dB  
Loss: 94.5 dB  
DOSE (90): 11.5  
DETECTED DOSE: 10.1

CTD021354

|                                                       |  |                       |                              |                               |
|-------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                        |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/9/86</i> |
| EMPLOYEE NAME<br><i>Voightlander</i>                  |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Supervisor</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                       | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS               | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |
| <input type="checkbox"/> ASBESTOS                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST               | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER/SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST              | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES            | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER) | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE             | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                   | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                      | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input type="checkbox"/> NOISE                    | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |
| <input type="checkbox"/>                          |                                                   |                                                                                              |

|                                                                                                 |                                            |                                            |                                       |                                                |                                                |
|-------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------|---------------------------------------|------------------------------------------------|------------------------------------------------|
| EQUIPMENT                                                                                       |                                            |                                            |                                       |                                                |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP     | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                            |                                            |                                       |                                                |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                            |                                            |                                       |                                                |                                                |
| WEATHER CONDITIONS                                                                              |                                            |                                            |                                       |                                                |                                                |
| OUTSIDE TEMP<br>°F                                                                              | WIND DIRECTION                             | WIND VELOCITY<br>MPH                       | <input type="checkbox"/> SUNNY        | <input type="checkbox"/> CLOUDY                | <input type="checkbox"/> HUMID                 |
|                                                                                                 |                                            |                                            | <input type="checkbox"/> FOG          | <input type="checkbox"/> SHOWERS               | <input type="checkbox"/> SNOW                  |
|                                                                                                 |                                            |                                            | <input type="checkbox"/> PTLY. CLOUDY |                                                |                                                |

| CNTRL NO. | PUMP SERIAL NO. | T | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|---|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |   |            | START         | STOP |            |        |               |                 |                        |
|           | 1858            |   | 855        | 8:04          | 3:40 | 466        | 1.78   | 811.68        |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |
|           |                 |   |            |               |      |            |        |               |                 |                        |

|                               |                             |                                    |                   |  |  |                         |  |  |
|-------------------------------|-----------------------------|------------------------------------|-------------------|--|--|-------------------------|--|--|
| DID EMPLOYEE WEAR RESPIRATORY |                             |                                    | IF SOMETIMES WHEN |  |  | RESPIRATOR MAKE & MODEL |  |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                   |  |  |                         |  |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | SHR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 052      | 4738       |      | 8:04         | 3:43 | 469       |                 |            |                     |

|                                    |                             |                                    |                   |  |  |              |  |  |
|------------------------------------|-----------------------------|------------------------------------|-------------------|--|--|--------------|--|--|
| DID EMPLOYEE WEAR HEARING PROTECTN |                             |                                    | IF SOMETIMES WHEN |  |  | MAKE & MODEL |  |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |                   |  |  |              |  |  |

COMMENTS/SKETCHES

# CertainTeed

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

M

|                                                                                                 |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                  |                                                                       | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i>                                                                                                                                                                                                                                     | DATE OF TEST<br><i>4/7/86</i>                  |
| EMPLOYEE NAME<br><i>Evans</i>                                                                   |                                                                       | DEPARTMENT/LINE<br><i>Fin</i>                                                                |                                                                                                                                                                                                                                                                  |                                                |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Satck #2 Operator</i>                                    |                                                                       | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                |
| CONTAMINANT                                                                                     |                                                                       | SAMPLING METHOD                                                                              |                                                                                                                                                                                                                                                                  | SAMPLING MEDIA                                 |
| <input type="checkbox"/> FIBERGLASS                                                             | <input checked="" type="checkbox"/> OPEN FACE                         | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |                                                                                                                                                                                                                                                                  |                                                |
| <input checked="" type="checkbox"/> ASBESTOS                                                    | <input type="checkbox"/> CLOSED FACE                                  | <input type="checkbox"/> 5μ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                                      | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE                                  | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE                                | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES                     | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> SILICAL GEL                                  | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> FLORISIL TUBE                                | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> CLOSED FACE                                  | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                |
| <input checked="" type="checkbox"/> NOISE                                                       | <input checked="" type="checkbox"/> AUDIO DOSIMETER <i>RadioShack</i> |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EQUIPMENT                                                                                       |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP                            | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER |
| <input type="checkbox"/> DUPONT D381 DOSIMETER                                                  |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| WEATHER CONDITIONS                                                                              |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| OUTSIDE TEMP                                                                                    | WIND DIRECTION                                                        | WIND VELOCITY                                                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                                       | T <sub>g</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                  |
|                                                                                                 |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  | START STOP TOTAL MINS                          |
|                                                                                                 | 1870                                                                  |                                                                                              | 768                                                                                                                                                                                                                                                              | 7:45 11:05 200                                 |
|                                                                                                 |                                                                       |                                                                                              | 808                                                                                                                                                                                                                                                              | 11:29 3:17 228                                 |
|                                                                                                 |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  | 428                                            |
|                                                                                                 |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
|                                                                                                 |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                   |                                                                       | IF SOMETIMES WHEN                                                                            |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |
| CNTRL NO                                                                                        | DOS SERIAL                                                            | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                           |
| 053                                                                                             | 4739                                                                  | aff                                                                                          |                                                                                                                                                                                                                                                                  |                                                |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                                                                       | IF SOMETIMES WHEN                                                                            |                                                                                                                                                                                                                                                                  | MAKE & MODEL                                   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                                       |                                                                                              |                                                                                                                                                                                                                                                                  |                                                |

COMMENTS/SKETCHES

*Line 1 1 1/2 hr*

*Calist 846*

### Asbestos Cement Pipe

#### CAUTION:

- Contains asbestos fiber.
- Avoid creating dust. Breathing asbestos dust can cause serious bodily harm, including cancer and asbestosis.
- When cutting, machining and tapping, always use recommended work practices (Refer to Recommended Work Practice Guide furnished by Manufacturer to your employer).
- Do not use Abrasive Disc Saws.

### Tubo de Cemento Asbestos

#### CUIDADO:

- Contiene fibra de asbestos.
- Evite crear polvo. La inhalación de polvo de asbestos puede causar graves daños a la salud, incluyendo cáncer y asbestosis.
- Cuando se está cortando, maquinando o tornando, siempre siga las normas de trabajo recomendadas (Refiérase a la Guía de Normas de Trabajo Recomendadas, el Fabricante se le ha proporcionado a su patrón).
- No utilice Sierras de Disco Abrasivas.

CertainTeed

CertainTeed Corporation  
Pipe & Plastics Group  
P.O. Box 880, Valley Forge, PA 19405  
(215) 341-7000

CTD021356

db-301/37 8-11-4704  
 DYNAMIC RANGE: 70- 100dB  
 SUBJECT: 447  
 MI  
 RUN TIME: 0: 7:27:52  
 STANDBY TIME: 0: 0:31:18

AMPLITUDE DISTRIBUTION

SPL(dB)-----  
 70----- 4.94  
 71- 0.26  
 72- 0.33  
 73- 0.30  
 74- 0.30  
 75- 0.34  
 76- 0.36  
 77- 0.38  
 78- 0.34  
 79- 0.39  
 80- 0.45  
 81- 0.54  
 82- 0.57  
 83- 0.83  
 84- 1.36  
 85- 2.25  
 86- 2.80  
 87- 2.55  
 88- 3.90  
 89- 4.43  
 90- 5.05  
 91- 5.65  
 92- 5.89  
 93- 5.30  
 94- 5.26  
 95- 4.82  
 96- 4.37  
 97- 4.09  
 98- 4.12  
 99- 4.18  
 100- 4.07  
 101- 3.76  
 102- 3.30  
 103- 2.97  
 104- 2.36  
 105- 1.63  
 106- 1.16  
 107- 0.80  
 108- 0.67  
 109- 0.45  
 110- 0.36  
 111- 0.28  
 112- 0.23  
 113- 0.17  
 114- 0.10  
 115- 0.07  
 116- 0.05  
 117- 0.02  
 118- 0.02  
 119- 0.01  
 120- 0.00  
 121- 0.00  
 122- 0.00  
 123- 0.00  
 124- 0.00  
 125- 0.00  
 126- 0.00  
 127- 0.00  
 128- 0.00  
 129- 0.00  
 130-  
 131- 0.00  
 132- 0.00  
 133- 0.02

EXCEEDANCE LEVELS (Lp)

L(1.0) = 110dB  
 L(10.0) = 103dB  
 L(25.0) = 99dB  
 L(50.0) = 97dB  
 L(50.0) = 93dB  
 L(60.0) = 90dB  
 L(85.0) = 86dB  
 L(99.9) = 70dB

5 dB EXCHANGE RATE

Lotha(90): 97.6 dB  
 DOSE (90): 255.6 %  
 PROJECTED DOSE: 271.7 %

Lotha(90): 97.2 dB  
 DOSE (90): 253.3 %  
 PROJECTED DOSE: 271.7 %

METROSONICS, INC.

CTD021357

|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------------|-----------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        | LOC NO.                       |              | SAMPLE TAKEN BY<br><i>JW</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                         | DATE OF TEST<br><i>4/7/86</i> |                 |                        |
| EMPLOYEE NAME<br><i>Cooper, H.</i>                                                                                                                                                                                                                                                                                                                                                                                                            |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        | DEPARTMENT/LINE               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Unit Lather # 2 Oper</i>                                                                                                                                                                                                                                                                                                                                                                               |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        | MANUFACTURING PRODUCT         |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                         |                               |                 |                        |
| <input type="checkbox"/> FIBERGLASS<br><input checked="" type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB<br><input checked="" type="checkbox"/> NOISE <i>Microsonics</i> |                 |                | <input checked="" type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER |                               |              | <input checked="" type="checkbox"/> 0.8μ MCEP, MILLIPORE FILTER<br><input type="checkbox"/> 5μ PVC FILTER<br><input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                         |                               |                 |                        |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOBIMETER <input type="checkbox"/> DUPONT D381 DOBIMETER                                                                                                                                                                              |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                                                                                                       |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                                                                                               |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| OUTSIDE TEMP                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 | WIND DIRECTION |                                                                                                                                                                                                                                                                                                                                                                                                                                        | WIND VELOCITY                 |              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY                                                                                                                                                                                                                                                  |                         |                               |                 |                        |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                     | PUMP SERIAL NO. | T.R.           | SAMPLE NO.                                                                                                                                                                                                                                                                                                                                                                                                                             | MILITARY TIME<br>START   STOP |              | TOTAL MINS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | LPM/CC                  | VOLUME LITERS                 | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               | <i>1858</i>     |                | <i>783</i>                                                                                                                                                                                                                                                                                                                                                                                                                             | <i>7:52</i>                   | <i>11:05</i> | <i>193</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <i>1.76</i>             | <i>339.68</i>                 |                 |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |                | <i>773</i>                                                                                                                                                                                                                                                                                                                                                                                                                             | <i>11:29</i>                  | <i>3:17</i>  | <i>228</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         | <i>401.28</i>                 |                 |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              | <i>421</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                               |                 |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                                   |                 |                | IF SOMETIMES WHEN?                                                                                                                                                                                                                                                                                                                                                                                                                     |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | RESPIRATOR MAKE & MODEL |                               |                 |                        |
| CNTRL NO                                                                                                                                                                                                                                                                                                                                                                                                                                      | DOS SERIAL      | CELL           | START (TIME)                                                                                                                                                                                                                                                                                                                                                                                                                           | STOP                          | TOTAL MIN    | READ OUT RESULT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | SHR CORR %              | CONVERTED DBA LEVEL           |                 |                        |
| <i>054</i>                                                                                                                                                                                                                                                                                                                                                                                                                                    | <i>4734</i>     |                | <i>7:52</i>                                                                                                                                                                                                                                                                                                                                                                                                                            | <i>3:19</i>                   | <i>447</i>   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| DID EMPLOYEE WEAR/HEARING PROTECTN?                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                         |                               |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                                   |                 |                | IF SOMETIMES WHEN?                                                                                                                                                                                                                                                                                                                                                                                                                     |                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | MAKE & MODEL            |                               |                 |                        |

COMMENTS/SKETCHES

SN: 221-2768      S/N: 4743  
DYNAMIC RANGE: 70- 133dB  
RECEIVED  
(M)  
RUN TIME:      2: 7:34:56  
STOPPED TIME: 2: 9:17:07  
MEASURING PERIOD: 1 min  
MAX PERIOD LEVEL: 101 dF  
Dose:            95.0 dB  
DOSE (90):      188.9 %  
PROJECTED DOSE: 199.7 %

CTD021359

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*M*

|                                                                                                 |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
|-------------------------------------------------------------------------------------------------|-----------------|----------------|---------------------------------------------------|-----------------------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                  |                 |                |                                                   | LOC NO.               |           | SAMPLE TAKEN BY<br><i>JD</i>                                                                                                                                                                                                                                     |            | DATE OF TEST<br><i>4/7/86</i> |                        |
| EMPLOYEE NAME<br><i>Dennis Foost</i>                                                            |                 |                |                                                   | DEPARTMENT/LINE       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Hydrotester #2</i>                                       |                 |                |                                                   | MANUFACTURING PRODUCT |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| CONTAMINANT                                                                                     |                 |                | SAMPLING METHOD                                   |                       |           | SAMPLING MEDIA                                                                                                                                                                                                                                                   |            |                               |                        |
| <input type="checkbox"/> FIBERGLASS                                                             |                 |                | <input checked="" type="checkbox"/> OPEN FACE     |                       |           | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                  |            |                               |                        |
| <input checked="" type="checkbox"/> ASBESTOS                                                    |                 |                | <input type="checkbox"/> CLOSED FACE              |                       |           | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |            |                               |                        |
| <input type="checkbox"/> TOTAL DUST                                                             |                 |                | <input type="checkbox"/> CYCLONE                  |                       |           | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |            |                               |                        |
| <input type="checkbox"/> SILICA DUST                                                            |                 |                | <input type="checkbox"/> CLOSED FACE              |                       |           | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |            |                               |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 |                | <input type="checkbox"/> CHARCOAL TUBE            |                       |           | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |            |                               |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 |                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |                       |           | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |            |                               |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 |                | <input type="checkbox"/> SILICAL GEL              |                       |           | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |            |                               |                        |
| <input type="checkbox"/> PHENOL                                                                 |                 |                | <input type="checkbox"/> FLORISIL TUBE            |                       |           | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |            |                               |                        |
| <input type="checkbox"/> PCB                                                                    |                 |                | <input type="checkbox"/> CLOSED FACE              |                       |           | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |            |                               |                        |
| <input checked="" type="checkbox"/> NOISE <i>Hydrotesters</i>                                   |                 |                | <input type="checkbox"/> AUDIO DOSIMETER          |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| EQUIPMENT                                                                                       |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 |                | <input type="checkbox"/> DUPONT P2500 PUMP        |                       |           | <input type="checkbox"/> DUPONT P200A PUMP                                                                                                                                                                                                                       |            |                               |                        |
| <input type="checkbox"/> MSA PUMP                                                               |                 |                | <input type="checkbox"/> DUPONT D376 DOSIMETER    |                       |           | <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                                                                   |            |                               |                        |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| WEATHER CONDITIONS                                                                              |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION |                                                   | WIND VELOCITY         |           | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |            |                               |                        |
| °F                                                                                              |                 |                |                                                   | MPH                   |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T/R            | SAMPLE NO.                                        | MILITARY TIME         |           | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC     | VOLUME LITERS                 | AIRBORNE CONCENTRATION |
|                                                                                                 | <del>7743</del> |                | <del>1899</del>                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
|                                                                                                 | 1899            |                | 817                                               | 7:49                  | 11:05     | 196                                                                                                                                                                                                                                                              | 196/1.88   | 368.48                        |                        |
|                                                                                                 |                 |                | 800                                               | 11:29                 | 3:20      | 231                                                                                                                                                                                                                                                              |            | 434.28                        |                        |
|                                                                                                 |                 |                |                                                   |                       |           | 427                                                                                                                                                                                                                                                              |            |                               |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 |                | IF SOMETIMES WHEN                                 |                       |           | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |            |                               |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL           | START (TIME)                                      | STOP                  | TOTAL MIN | READ OUT RESULT                                                                                                                                                                                                                                                  | 8HR CORR % | CONVERTED DBA LEVEL           |                        |
| 055                                                                                             | 7743            |                | 7:49                                              | 3:23                  | 454       |                                                                                                                                                                                                                                                                  |            |                               |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                | IF SOMETIMES WHEN                                 |                       |           | MAKE & MODEL                                                                                                                                                                                                                                                     |            |                               |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |
| COMMENTS/SKETCHES                                                                               |                 |                |                                                   |                       |           |                                                                                                                                                                                                                                                                  |            |                               |                        |

*454*
**CTD021360**

ALBIONICS, INC.

db-301/37 9/20/74  
DYNAMIC RANGE: 70-130dB  
START TIME:  
01  
END TIME: 0: 7:15:4  
STOP TIME: 0: 0:17:00

5 dB EXCHANGE RATE  
Losses(80): 92.7 dB  
DOSE (80): 175.9 %  
PROJECTED DOSE: 145.8 %  
Losses(90): 91.2 dB  
DOSE (90): 107.5 %  
PROJECTED DOSE: 117.6 %

*Handwritten signature*

CTD021361

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**
*M*

|                                                    |  |                               |                              |                               |
|----------------------------------------------------|--|-------------------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                     |  | LOC NO.                       | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/2/86</i> |
| EMPLOYEE NAME<br><i>Pipe Handler #3</i>            |  | DEPARTMENT/LINE<br><i>Fin</i> |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Ralphie</i> |  | MANUFACTURING PRODUCT         |                              |                               |

| CONTAMINANT                                                   | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|---------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> FIBERGLASS                | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS                  | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                           | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                          | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                        | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)             | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                         | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                               | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                                  | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>Hexresonance</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|---------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP       |  | WIND DIRECTION |  | WIND VELOCITY |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |
| °F                 |  |                |  | MPH           |  |                                                                                                                                                                                                                                                                  |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T <sub>R</sub> | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|----------------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |                |            | START         | STOP |            |        |               |                 |                        |
|           | 7875            |                | 791        | 8:04          | 3:22 | 438        | 1.96   | 858.48        |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |

|                               |                             |                                    |  |                         |  |
|-------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | 8HR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 056      | 4745       |      | 8:04         | 3:22 | 438       |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

*438*

CTD021362

|                                                         |  |                               |                              |                               |
|---------------------------------------------------------|--|-------------------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                          |  | LOC NO.                       | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/7/86</i> |
| EMPLOYEE NAME<br><i>Garcia</i>                          |  | DEPARTMENT/LINE<br><i>Fin</i> |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Inspector #2</i> |  | MANUFACTURING PRODUCT         |                              |                               |

| CONTAMINANT                                                    | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|----------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                            | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS                   | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                            | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                           | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                         | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)              | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                          | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                                | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                                   | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>but in series</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |                      |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|----------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP<br>°F |  | WIND DIRECTION |  | WIND VELOCITY<br>MPH |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T <sub>R</sub> | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|----------------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |                |            | START         | STOP |            |        |               |                 |                        |
|           | 867             |                | 848        | 7:55          | 3:10 | 435        | 1.80   | 783.0         |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |
|           |                 |                |            |               |      |            |        |               |                 |                        |

|                                |                             |                                    |  |                         |  |
|--------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATORY? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES   | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | 8HR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 057      | 4733       |      | 7:55         | 3:14 | 439       |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021363

MS-001-0700      S-004707  
A-0010-0000F: 00-0000  
SUBJECT:  
TO:  
DATE TIME: 01 01 01 0  
STARTING TIME: 01 01 01 05  
STARTING PERIOD: 1 00  
END PERIOD LEVEL: 97 30  
LOOPS: 25 0 05  
DOSE: 0000 24 0 0  
PROJECTED DOSE: 36 0 0

CTD021365

**CertainTeed**

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

T

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------|-----------------|------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                   |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i>                                                                                                                                                                                                                                    |             |                 |                 |                        |
| EMPLOYEE NAME<br><i>Cooley</i>                                                                                                                                                                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Cply Saw</i>                                                                                                                                                                                                              |                                                   | MANUFACTURING PRODUCT                                                                        |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      | SAMPLING METHOD                                   |                                                                                              | SAMPLING MEDIA               |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input checked="" type="checkbox"/> ASBESTOS                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5µ PVC FILTER                                                       |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> SODIUM BISULFITE                                                    |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input checked="" type="checkbox"/> NOISE <i>Meters</i>                                                                                                                                                                                                          | <input type="checkbox"/> AUDIO DOSIMETER          | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| OUTSIDE TEMP<br>°F                                                                                                                                                                                                                                               |                                                   | WIND DIRECTION                                                                               | WIND VELOCITY<br>MPH         | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |             |                 |                 |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>1</sub>                                                                               | SAMPLE NO.                   | MILITARY TIME<br>START STOP TOTAL MINS                                                                                                                                                                                                                           | LPM/CC      | VOLUME LITERS   | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
| <i>1865</i>                                                                                                                                                                                                                                                      |                                                   |                                                                                              | <i>822</i>                   | <i>7:15 10:29 194</i>                                                                                                                                                                                                                                            | <i>1.84</i> | <i>356.96</i>   |                 |                        |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              | <i>815</i>                   | <i>10:29 10:46 17</i>                                                                                                                                                                                                                                            |             | <i>31.28</i>    |                 |                        |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              | <i>784</i>                   | <i>10:46 3:20 264</i>                                                                                                                                                                                                                                            |             | <i>485.76</i>   |                 |                        |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                              | <i>475</i>                                                                                                                                                                                                                                                       |             |                 |                 |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                                                                                                                                                                                   |                                                   | IF SOMETIMES WHEN?                                                                           |                              | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |             |                 |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                 | STOP                                                                                                                                                                                                                                                             | TOTAL MIN   | READ OUT RESULT | 8HR CORR %      | CONVERTED DBA LEVEL    |
| <i>058</i>                                                                                                                                                                                                                                                       | <i>4733</i>                                       |                                                                                              | <i>7:15</i>                  | <i>3:25</i>                                                                                                                                                                                                                                                      | <i>480</i>  |                 |                 |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                                                                                                                                                                                               |                                                   | IF SOMETIMES WHEN?                                                                           |                              | MAKE & MODEL                                                                                                                                                                                                                                                     |             |                 |                 |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |
| COMMENTS/SKETCHES                                                                                                                                                                                                                                                |                                                   |                                                                                              |                              |                                                                                                                                                                                                                                                                  |             |                 |                 |                        |

*No dust observed today  
have certain day pipe*

*10:29 11:11*

CTD021366

|                                                                                                 |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
|-------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------|------------|--------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------|---------------------|------------------------|
| PLANT NAME                                                                                      |                 |                                                   |            | LOG NO.                                    |                                                                                              | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  |                         | DATE OF TEST                                   |                     |                        |
| EMPLOYEE NAME<br><i>Nobles</i>                                                                  |                 |                                                   |            | DEPARTMENT/LINE                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Boiler #1</i>                                            |                 |                                                   |            | MANUFACTURING PRODUCT                      |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| CONTAMINANT                                                                                     |                 | SAMPLING METHOD                                   |            |                                            | SAMPLING MEDIA                                                                               |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> FIBERGLASS                                                             |                 | <input type="checkbox"/> OPEN FACE                |            |                                            | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> ASBESTOS                                                               |                 | <input type="checkbox"/> CLOSED FACE              |            |                                            | <input type="checkbox"/> 5µ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                             |                 | <input type="checkbox"/> CYCLONE                  |            |                                            | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                            |                 | <input type="checkbox"/> CLOSED FACE              |            |                                            | <input type="checkbox"/> 150 mg CHARCOAL                                                     |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 | <input type="checkbox"/> CHARCOAL TUBE            |            |                                            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |            |                                            | <input type="checkbox"/> 300 mg SILICA GEL                                                   |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 | <input type="checkbox"/> SILICAL GEL              |            |                                            | <input type="checkbox"/> 150 mg SKC FLORISIL TUBE                                            |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> PHENOL                                                                 |                 | <input type="checkbox"/> FLORISIL TUBE            |            |                                            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> PCB                                                                    |                 | <input type="checkbox"/> CLOSED FACE              |            |                                            | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> NOISE                                                                  |                 | <input type="checkbox"/> AUDIO DOSIMETER          |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/>                                                                        |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| EQUIPMENT                                                                                       |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 | <input type="checkbox"/> DUPONT P2500 PUMP        |            | <input type="checkbox"/> DUPONT P200A PUMP |                                                                                              | <input type="checkbox"/> MSA PUMP                                                                                                                                                                                                                                |                         | <input type="checkbox"/> DUPONT D376 DOSIMETER |                     |                        |
|                                                                                                 |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         | <input type="checkbox"/> DUPONT D381 DOSIMETER |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| WEATHER CONDITIONS                                                                              |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION                                    |            | WIND VELOCITY                              |                                                                                              | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                         |                                                |                     |                        |
| °F                                                                                              |                 |                                                   |            | MPH                                        |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T <sub>h</sub>                                    | SAMPLE NO. | MILITARY TIME                              |                                                                                              | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC                  | VOLUME LITERS                                  | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
|                                                                                                 | 1867            |                                                   | 801        | 7:14                                       | 3:20                                                                                         | 486                                                                                                                                                                                                                                                              | 1.70                    | 826.2                                          |                     |                        |
|                                                                                                 |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
|                                                                                                 |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
|                                                                                                 |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 |                                                   |            | IF SOMETIMES WHEN?                         |                                                                                              |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL |                                                |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL                                              | START      | (TIME)                                     | STOP                                                                                         | TOTAL MIN                                                                                                                                                                                                                                                        | READ OUT RESULT         | SHR CORR %                                     | CONVERTED DBA LEVEL |                        |
| 059                                                                                             | 4710            |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                                                   |            | IF SOMETIMES WHEN?                         |                                                                                              |                                                                                                                                                                                                                                                                  | MAKE & MODEL            |                                                |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |
| COMMENTS/SKETCHES                                                                               |                 |                                                   |            |                                            |                                                                                              |                                                                                                                                                                                                                                                                  |                         |                                                |                     |                        |

CTD021367

470  
\* 001:1700 0.00000  
DYNAMIC RANGE: 70- 1000  
CORRECT:  
T1  
RUN TIME: 0: 7:50:19  
STANDBY TIME: 0: 1: 1:32  
AVERAGING PERIOD: 1 min  
PMT PERIOD LEVEL: 100.00  
Count: 99.1 dB  
DOSE (90): 345.4 N  
PROJECTED DOSE: 352.9 N

CTD021368

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**

|                                                     |  |                       |                              |                               |
|-----------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                      |  | LOG NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>7/8/86</i> |
| EMPLOYEE NAME<br><i>J. James</i>                    |  | DEPARTMENT/LINE       |                              |                               |
| JOB/TITLE/ENVIRONMENTAL LOCATION<br><i>42" Mill</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                           | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|-------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                   | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS          | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                   | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                  | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)     | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                 | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                       | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                          | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>7/20</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |               |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|---------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP       |  | WIND DIRECTION |  | WIND VELOCITY |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |

| CNTRL NO. | PUMP SERIAL NO. | T <sub>h</sub> | SAMPLE NO. | MILITARY TIME |      | TOTAL MINS | LPM/CC | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-----------|-----------------|----------------|------------|---------------|------|------------|--------|---------------|-----------------|------------------------|
|           |                 |                |            | START         | STOP |            |        |               |                 |                        |
|           | 1867            |                | 799        | 7:20          | 3:12 | 472        | 2.05   | 244           |                 | 103                    |
|           |                 |                |            |               |      |            | 1.75   | 826.0         |                 |                        |

|                               |                             |                                    |  |                         |  |
|-------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO | DOS SERIAL | CELL | START (TIME) | STOP | TOTAL MIN | READ OUT RESULT | SHR CORR % | CONVERTED DBA LEVEL |
|----------|------------|------|--------------|------|-----------|-----------------|------------|---------------------|
| 060      | 4745       |      | 7:20         | 3:10 | 470       |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECT? |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

*.7 fiberfield*
*1.42*
*.7 x 555 = 0.0061*

CTD021369



R1

**COMMENTS/SKETCHES**

01-16-0056 12/81

W-101 1750 5-11-73  
DYNAMIC RANGE: 70-15700  
START TIME:  
T1  
RUN TIME: 0: 0: 0  
STANDBY TIME: 0: 0: 0:51  
AVERAGING PERIOD: 1.000  
AFC PERIOD LEVEL: 101.00  
COUNT: 80.000  
DOSE (RAD): 1.000  
PROJECTED DOSE: 144.000

CTD021372

|                                                        |  |                       |                              |                               |
|--------------------------------------------------------|--|-----------------------|------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                         |  | LOC NO.               | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i> |
| EMPLOYEE NAME<br><i>Pedrona</i>                        |  | DEPARTMENT/LINE       |                              |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>Cpl. Tester</i> |  | MANUFACTURING PRODUCT |                              |                               |

| CONTAMINANT                                            | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|--------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                    | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS           | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5µ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                    | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                   | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES                 | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)      | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                  | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                        | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                           | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>noted</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |                      |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|----------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP<br>°F |  | WIND DIRECTION |  | WIND VELOCITY<br>MPH |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |

| CNTRL NO.   | PUMP SERIAL NO. | T/R | SAMPLE NO. | MILITARY TIME |             | TOTAL MINS | LPM/CC      | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|-------------|-----------------|-----|------------|---------------|-------------|------------|-------------|---------------|-----------------|------------------------|
|             |                 |     |            | START         | STOP        |            |             |               |                 |                        |
| <i>1870</i> | <i>4734</i>     |     | <i>811</i> | <i>7:25</i>   | <i>3:15</i> | <i>467</i> | <i>1.86</i> | <i>868.62</i> |                 |                        |
|             |                 |     |            |               |             |            |             |               |                 |                        |
|             |                 |     |            |               |             |            |             |               |                 |                        |
|             |                 |     |            |               |             |            |             |               |                 |                        |
|             |                 |     |            |               |             |            |             |               |                 |                        |

|                               |                             |                                    |  |                         |  |
|-------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATOR? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES  | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO   | DOS SERIAL  | CELL | START (TIME) | STOP        | TOTAL MIN  | READ OUT RESULT | 8HR CORR % | CONVERTED DBA LEVEL |
|------------|-------------|------|--------------|-------------|------------|-----------------|------------|---------------------|
| <i>062</i> | <i>4734</i> |      | <i>7:25</i>  | <i>3:28</i> | <i>480</i> |                 |            |                     |

|                                    |                             |                                    |  |              |  |
|------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES       | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021373

db-001-2780      S/N: 4743  
DYNAMIC RANGE: 70- 133dB  
DATE:              T1  
RUN TIME:        0: 0: 0: 0  
STANDBY TIME: 0: 0: 3:26  
SPEAKING PERIOD: 1 min  
HOLD PERIOD LEVEL: 104 dB  
Losses:           95.6 dB  
DOSE (90):        249.3 %  
PROTECTED DOSE: 249.3 %

CTD021374

**CertainTeed**
**INDUSTRIAL HYGIENE MONITORING DATA SHEET**

|                                                      |  |                       |                               |                               |
|------------------------------------------------------|--|-----------------------|-------------------------------|-------------------------------|
| PLANT NAME<br><i>Riverside</i>                       |  | LOC NO.               | SAMPLE TAKEN BY<br><i>Jan</i> | DATE OF TEST<br><i>4/8/86</i> |
| EMPLOYEE NAME<br><i>Suarez</i>                       |  | DEPARTMENT/LINE       |                               |                               |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>1/4 Palke</i> |  | MANUFACTURING PRODUCT |                               |                               |

| CONTAMINANT                                          | SAMPLING METHOD                                   | SAMPLING MEDIA                                                                               |
|------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> FIBERGLASS                  | <input checked="" type="checkbox"/> OPEN FACE     | <input checked="" type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                              |
| <input checked="" type="checkbox"/> ASBESTOS         | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |
| <input type="checkbox"/> TOTAL DUST                  | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |
| <input type="checkbox"/> SILICA DUST                 | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |
| <input type="checkbox"/> ASPHALT FUMES               | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)    | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |
| <input type="checkbox"/> FORMALDEHYDE                | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |
| <input type="checkbox"/> PHENOL                      | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |
| <input type="checkbox"/> PCB                         | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| <input checked="" type="checkbox"/> NOISE <i>Mix</i> | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |

| EQUIPMENT                                  |                                            |                                            |                                   |                                                |                                                |
|--------------------------------------------|--------------------------------------------|--------------------------------------------|-----------------------------------|------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> DUPONT P4000 PUMP | <input type="checkbox"/> DUPONT P2500 PUMP | <input type="checkbox"/> DUPONT P200A PUMP | <input type="checkbox"/> MSA PUMP | <input type="checkbox"/> DUPONT D376 DOSIMETER | <input type="checkbox"/> DUPONT D381 DOSIMETER |

| EXHAUST SYSTEMS/REMARKS                       |                                                   |
|-----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |

| WEATHER CONDITIONS |  |                |  |                      |  |                                                                                                                                                                                                                                                                  |  |  |  |
|--------------------|--|----------------|--|----------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| OUTSIDE TEMP<br>°F |  | WIND DIRECTION |  | WIND VELOCITY<br>MPH |  | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |  |  |  |

| CNTRL NO.  | PUMP SERIAL NO. | T/R | SAMPLE NO. | MILITARY TIME |              | TOTAL MINS | LPM/CC      | VOLUME LITERS | ANALYSIS RESULT | AIRBORNE CONCENTRATION |
|------------|-----------------|-----|------------|---------------|--------------|------------|-------------|---------------|-----------------|------------------------|
|            |                 |     |            | START         | STOP         |            |             |               |                 |                        |
| <i>875</i> |                 |     | <i>824</i> | <i>7:30</i>   | <i>3:30</i>  | <i>130</i> | <i>2.01</i> | <i>261.3</i>  |                 |                        |
|            |                 |     | <i>818</i> | <i>8:50</i>   | <i>11:00</i> | <i>130</i> |             |               |                 |                        |
|            |                 |     | <i>777</i> | <i>11:27</i>  | <i>3:17</i>  | <i>230</i> |             | <i>462.3</i>  |                 |                        |
|            |                 |     |            |               |              | <i>360</i> |             |               |                 |                        |

|                                |                             |                                    |  |                         |  |
|--------------------------------|-----------------------------|------------------------------------|--|-------------------------|--|
| DID EMPLOYEE WEAR RESPIRATORY? |                             | IF SOMETIMES WHEN?                 |  | RESPIRATOR MAKE & MODEL |  |
| <input type="checkbox"/> YES   | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |                         |  |

| CNTRL NO   | DOS SERIAL  | CELL | START (TIME) | STOP        | TOTAL MIN  | READ OUT RESULT | 8HR CORR % | CONVERTED REA LEVEL |
|------------|-------------|------|--------------|-------------|------------|-----------------|------------|---------------------|
| <i>063</i> | <i>4743</i> |      | <i>7:30</i>  | <i>3:30</i> | <i>480</i> |                 |            |                     |

|                                     |                             |                                    |  |              |  |
|-------------------------------------|-----------------------------|------------------------------------|--|--------------|--|
| DID EMPLOYEE WEAR HEARING PROTECTN? |                             | IF SOMETIMES WHEN?                 |  | MAKE & MODEL |  |
| <input type="checkbox"/> YES        | <input type="checkbox"/> NO | <input type="checkbox"/> SOMETIMES |  |              |  |

COMMENTS/SKETCHES

CTD021375

NO. 01-2760      S-10000  
MECHANIC RANGE: 70- 10000  
SUBJECT:  
TI  
RUN TIME:      0: 7:59: 4  
STANDBY TIME: 0: 0:01:11  
AVERAGING PERIOD: 1 sec  
MAX PERIOD LEVEL: 34.45  
Losses:      86.5 00  
DOSE (90):      31.2 %  
PROJECTED DOSE: 31.4 %

CTD021376

|                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PLANT NAME<br><i>Riverside</i>                                                                                                                                                                                                                                                                                                                                                                                                            |                 | LOG NO.                                                                                                                                                                                                                                                                                                                                                                                                                                | SAMPLE TAKEN BY<br><i>JW</i> | DATE OF TEST<br><i>4/8/86</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| EMPLOYEE NAME<br><i>Meyer</i>                                                                                                                                                                                                                                                                                                                                                                                                             |                 | DEPARTMENT/LINE                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| JOB TITLE/ENVIRONMENTAL LOCATION<br><i>#1 Rewind Saw</i>                                                                                                                                                                                                                                                                                                                                                                                  |                 | MANUFACTURING PRODUCT                                                                                                                                                                                                                                                                                                                                                                                                                  |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                                        |                              | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/> FIBERGLASS<br><input checked="" type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB<br><input checked="" type="checkbox"/> NOISE <i>cutting</i> |                 | <input checked="" type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER |                              | <input checked="" type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER<br><input type="checkbox"/> 5µ PVC FILTER<br><input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| OUTSIDE TEMP                                                                                                                                                                                                                                                                                                                                                                                                                              |                 | WIND DIRECTION                                                                                                                                                                                                                                                                                                                                                                                                                         | WIND VELOCITY                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY                                                                                                                                                                                                                                                  |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                 | PUMP SERIAL NO. | T <sub>R</sub>                                                                                                                                                                                                                                                                                                                                                                                                                         | SAMPLE NO.                   | MILITARY TIME<br>START    STOP    TOTAL MINS<br>7:10    9:30    140<br>9:30    9:46    16<br>9:46    3:10    324<br><del>3:10</del> <del>4:50</del>                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1899            |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 758                          | 1.89                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 814                          | 30.24                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 809                          | 612.36                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| DID EMPLOYEE WEAR RESPIRATORY?    IF SOMETIMES WHEN?    RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                           |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| CNTRL NO                                                                                                                                                                                                                                                                                                                                                                                                                                  | DOS SERIAL      | CELL                                                                                                                                                                                                                                                                                                                                                                                                                                   | START (TIME)                 | STOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 064                                                                                                                                                                                                                                                                                                                                                                                                                                       | 4739            |                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7:10                         | 3:09                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| DID EMPLOYEE WEAR HEARING PROTECTN?    IF SOMETIMES WHEN?    MAKE & MODEL                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                                                                                               |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

COMMENTS/SKETCHES

814 - 9:30 12" ~~11~~ 9:38

9:38 changed each pipe (8)

Measured  
Adjusted Blade

9:41 1111 9:46

9:46 large Saw 1 Stacking

db-301-2786 S/N:4709  
DYNAMIC RANGE: 70- 133dB  
SUBJECT:  
R1  
RUN TIME: 0: 7:15:52  
STANDBY TIME: 0: 0:46: 0  
AVERAGING PERIOD: 1 min  
MAX PERIOD LEVEL: 123 dB  
Losses: 93.4 dB  
DOSE (90): 144.5 %  
PROJECTED DOSE: 139.9 %

CTD021378

|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------|---------------|---------------------|------------------------|
| PLANT NAME                                                                                                                                                                                                                                                                                                                                                         |                 | LOC NO.                                                                                                                                                                                                                                                                                                                                                                                                                     | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  | DATE OF TEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                         |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  | 4/10/86                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |                         |               |                     |                        |
| EMPLOYEE NAME                                                                                                                                                                                                                                                                                                                                                      |                 | DEPARTMENT/LINE                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| J Silva                                                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                                                                                                                                                                                                                                                                                   |                 | MANUFACTURING PRODUCT                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| Crusher                                                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| CONTAMINANT                                                                                                                                                                                                                                                                                                                                                        |                 | SAMPLING METHOD                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  | SAMPLING MEDIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                         |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS<br><input type="checkbox"/> ASBESTOS<br><input type="checkbox"/> TOTAL DUST<br><input type="checkbox"/> SILICA DUST<br><input type="checkbox"/> ASPHALT FUMES<br><input type="checkbox"/> VINYL CHLORIDE (MONOMER)<br><input type="checkbox"/> FORMALDEHYDE<br><input type="checkbox"/> PHENOL<br><input type="checkbox"/> PCB |                 | <input type="checkbox"/> OPEN FACE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CYCLONE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> CHARCOAL TUBE<br><input type="checkbox"/> IMPINGERS, TWO IN SERIES<br><input type="checkbox"/> SILICAL GEL<br><input type="checkbox"/> FLORISIL TUBE<br><input type="checkbox"/> CLOSED FACE<br><input type="checkbox"/> AUDIO DOSIMETER |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> 0.8µ MCEF, MILLIPORE FILTER<br><input type="checkbox"/> 5µ PVC FILTER<br><input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER<br><input type="checkbox"/> 150 mg. CHARCOAL<br><input type="checkbox"/> SODIUM BISULFITE<br><input type="checkbox"/> 300 mg. SILICA GEL<br><input type="checkbox"/> 150 mg. SKC FLORISIL TUBE<br><input type="checkbox"/> GLASS FIBER FILTER<br><input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |            |                         |               |                     |                        |
| EQUIPMENT                                                                                                                                                                                                                                                                                                                                                          |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MSA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                                                                                                                            |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| OUTSIDE TEMP                                                                                                                                                                                                                                                                                                                                                       | WIND DIRECTION  | WIND VELOCITY                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                          | PUMP SERIAL NO. | T <sub>h</sub>                                                                                                                                                                                                                                                                                                                                                                                                              | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TOTAL MINS | LPM/CC                  | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
|                                                                                                                                                                                                                                                                                                                                                                    | 1825            |                                                                                                                                                                                                                                                                                                                                                                                                                             | 772                                                                                                                                                                                                                                                              | 8:03 3:19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 436        | 1.79                    | 780.44        |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                                                                                                                                                                                                                                                                                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             | IF SOMETIMES WHEN                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            | RESPIRATOR MAKE & MODEL |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                                                                                                                          | DOS SERIAL      | CELL                                                                                                                                                                                                                                                                                                                                                                                                                        | START (TIME)                                                                                                                                                                                                                                                     | STOP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TOTAL MIN  | READ OUT REEV. T        | SHR CORR %    | CONVERTED DBA LEVEL |                        |
| 065                                                                                                                                                                                                                                                                                                                                                                | 7739            |                                                                                                                                                                                                                                                                                                                                                                                                                             | 8:03                                                                                                                                                                                                                                                             | 3:18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 436        |                         |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECT                                                                                                                                                                                                                                                                                                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             | IF SOMETIMES WHEN                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            | MAKE & MODEL            |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                                                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                         |               |                     |                        |

COMMENTS/SKETCHES

*hose off*

420  
15  
435

|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
|-------------------------------------------------------------------------------------------------|-----------------|----------------|---------------------------------------------------|---------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------|
| PLANT NAME                                                                                      |                 |                | LOG NO.                                           |               | SAMPLE TAKEN BY                            |                                                                                                                                                                                                                                                                  | DATE OF TEST                                   |                     |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  | 4/10/86                                        |                     |
| EMPLOYEE NAME                                                                                   |                 |                | DEPARTMENT/LINE                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| Wilson                                                                                          |                 |                | Fin                                               |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                 |                | MANUFACTURING PRODUCT                             |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| Inspector                                                                                       |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| CONTAMINANT                                                                                     |                 |                | SAMPLING METHOD                                   |               |                                            | SAMPLING MEDIA                                                                                                                                                                                                                                                   |                                                |                     |
| <input type="checkbox"/> FIBERGLASS                                                             |                 |                | <input type="checkbox"/> OPEN FACE                |               |                                            | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                                                                                                                                                                                             |                                                |                     |
| <input type="checkbox"/> ASBESTOS                                                               |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                            | <input type="checkbox"/> 5μ PVC FILTER                                                                                                                                                                                                                           |                                                |                     |
| <input type="checkbox"/> TOTAL DUST                                                             |                 |                | <input type="checkbox"/> CYCLONE                  |               |                                            | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                                                                                                                                                                                           |                                                |                     |
| <input type="checkbox"/> SILICA DUST                                                            |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                            | <input type="checkbox"/> 150 mg. CHARCOAL                                                                                                                                                                                                                        |                                                |                     |
| <input type="checkbox"/> ASPHALT FUMES                                                          |                 |                | <input type="checkbox"/> CHARCOAL TUBE            |               |                                            | <input type="checkbox"/> SODIUM BISULFITE                                                                                                                                                                                                                        |                                                |                     |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               |                 |                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES |               |                                            | <input type="checkbox"/> 300 mg. SILICA GEL                                                                                                                                                                                                                      |                                                |                     |
| <input type="checkbox"/> FORMALDEHYDE                                                           |                 |                | <input type="checkbox"/> SILICAL GEL              |               |                                            | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                                                                                                                                                                                               |                                                |                     |
| <input type="checkbox"/> PHENOL                                                                 |                 |                | <input type="checkbox"/> FLORISIL TUBE            |               |                                            | <input type="checkbox"/> GLASS FIBER FILTER                                                                                                                                                                                                                      |                                                |                     |
| <input type="checkbox"/> PCB                                                                    |                 |                | <input type="checkbox"/> CLOSED FACE              |               |                                            | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba                                                                                                                                                                     |                                                |                     |
| <input type="checkbox"/> NOISE                                                                  |                 |                | <input type="checkbox"/> AUDIO DOSIMETER          |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| <input type="checkbox"/>                                                                        |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| EQUIPMENT                                                                                       |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      |                 |                | <input type="checkbox"/> DUPONT P2500 PUMP        |               | <input type="checkbox"/> DUPONT P200A PUMP |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> MSA PUMP              |                     |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> DUPONT D376 DOSIMETER |                     |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  | <input type="checkbox"/> DUPONT D381 DOSIMETER |                     |
| EXHAUST SYSTEMS/REMARKS                                                                         |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| WEATHER CONDITIONS                                                                              |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| OUTSIDE TEMP                                                                                    |                 | WIND DIRECTION |                                                   | WIND VELOCITY |                                            | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                |                     |
| °F                                                                                              |                 |                |                                                   | MPH           |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| CNTRL NO.                                                                                       | PUMP SERIAL NO. | T/R            | SAMPLE NO.                                        | MILITARY TIME |                                            | TOTAL MINS                                                                                                                                                                                                                                                       | LPM/CC                                         | VOLUME LITERS       |
|                                                                                                 |                 |                |                                                   | START         | STOP                                       |                                                                                                                                                                                                                                                                  |                                                |                     |
|                                                                                                 | 1899            |                | 779                                               | 7:20          | 3:24                                       | 481                                                                                                                                                                                                                                                              | 1.92                                           | 42362               |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
|                                                                                                 |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| DID EMPLOYEE WEAR RESPIRATORY?                                                                  |                 |                | IF SOMETIMES WHEN?                                |               |                                            | RESPIRATOR MAKE & MODEL                                                                                                                                                                                                                                          |                                                |                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| CNTRL NO                                                                                        | DOS SERIAL      | CELL           | START (TIME)                                      | STOP          | TOTAL MIN                                  | READ OUT RESULT                                                                                                                                                                                                                                                  | 8HR CORR %                                     | CONVERTED DBA LEVEL |
| 066                                                                                             | 4746            |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                 |                | IF SOMETIMES WHEN?                                |               |                                            | MAKE & MODEL                                                                                                                                                                                                                                                     |                                                |                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |
| COMMENTS/SKETCHES                                                                               |                 |                |                                                   |               |                                            |                                                                                                                                                                                                                                                                  |                                                |                     |

CTD021380

db-301/2780 S/H:4745  
DYNAMIC RANGE: 70- 133dB  
SUBJECT:  
R1  
RUN TIME: 0: 7:25: 1  
STANDBY TIME: 0: 1:22:46  
AVERAGING PERIOD: 1 min  
MAX PERIOD LEVEL: 104 dB  
Lossa: 85.6 dB  
DOSE (90): 58.1 %  
PROJECTED DOSE: 54.1 %

CTD021381

# CertainTeed

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

AT

|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| PLANT NAME                                                                                      |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  | DATE OF TEST                                                |
| EMPLOYEE NAME                                                                                   |                                                   | DEPARTMENT/LINE                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                |                                                   | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |                                                             |
| CONTAMINANT                                                                                     |                                                   | SAMPLING METHOD                                                                              |                                                                                                                                                                                                                                                                  | SAMPLING MEDIA                                              |
| <input type="checkbox"/> FIBERGLASS                                                             | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> ASBESTOS                                                               | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> TOTAL DUST                                                             | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> SILICA DUST                                                            | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> ASPHALT FUMES                                                          | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                               | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> FORMALDEHYDE                                                           | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> PHENOL                                                                 | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> PCB                                                                    | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> NOISE                                                                  | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| EQUIPMENT                                                                                       |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> DUPONT P4000 PUMP                                                      | <input type="checkbox"/> DUPONT P2500 PUMP        | <input type="checkbox"/> DUPONT P200A PUMP                                                   | <input type="checkbox"/> MEA PUMP                                                                                                                                                                                                                                | <input type="checkbox"/> DUPONT D376 DOSIMETER              |
| EXHAUST SYSTEMS/REMARKS                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| WEATHER CONDITIONS                                                                              |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| OUTSIDE TEMP                                                                                    | WIND DIRECTION                                    | WIND VELOCITY                                                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |                                                             |
| CNTRL NO.                                                                                       | PUMP SERIAL NO.                                   | T <sub>1</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME                                               |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | START STOP TOTAL MINS                                       |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | LPM/CC VOLUME LITERS ANALYSIS RESULT AIRBORNE CONCENTRATION |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
|                                                                                                 |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| DID EMPLOYEE WEAR RESPIRATOR?                                                                   |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | RESPIRATOR MAKE & MODEL                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| CNTRL NO                                                                                        | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP                                                        |
| 067                                                                                             | 4745                                              |                                                                                              | 7:00a                                                                                                                                                                                                                                                            | 2:25                                                        |
| DID EMPLOYEE WEAR HEARING PROTECTN                                                              |                                                   | IF SOMETIMES WHEN?                                                                           |                                                                                                                                                                                                                                                                  | MAKE & MODEL                                                |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES     |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |
| COMMENTS/SKETCHES                                                                               |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |                                                             |

4745

CTD021382

db-301/2780 S/N: 4738  
DYNAMIC RANGE: 70-133dB  
SUBJECT:

R1

RUN TIME: 0: 0: 0: 0  
STANDBY TIME: 0: 0: 6:59  
AVERAGING PERIOD: 1 min  
MAX PERIOD LEVEL: 97 dB  
Lsda: 82.4 dB  
DOSE (P0): 34.7 %  
PROJECTED DOSE: 74.7 %

CTD021383

# CertainTeed

## INDUSTRIAL HYGIENE MONITORING DATA SHEET

RI

|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------|----------------|---------------|---------------------|------------------------|
| PLANT NAME                                                                                                                                                                                                                                                       |                                                   | LOC NO.                                                                                      | SAMPLE TAKEN BY                                                                                                                                                                                                                                                  | DATE OF TEST  |            |                |               |                     |                        |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  | 4/10/86       |            |                |               |                     |                        |
| EMPLOYEE NAME                                                                                                                                                                                                                                                    |                                                   | DEPARTMENT/LINE                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| George                                                                                                                                                                                                                                                           |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| JOB TITLE/ENVIRONMENTAL LOCATION                                                                                                                                                                                                                                 |                                                   | MANUFACTURING PRODUCT                                                                        |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| Mechanic                                                                                                                                                                                                                                                         |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| CONTAMINANT                                                                                                                                                                                                                                                      |                                                   | SAMPLING METHOD                                                                              | SAMPLING MEDIA                                                                                                                                                                                                                                                   |               |            |                |               |                     |                        |
| <input type="checkbox"/> FIBERGLASS                                                                                                                                                                                                                              | <input type="checkbox"/> OPEN FACE                | <input type="checkbox"/> 0.8μ MCEF, MILLIPORE FILTER                                         |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> ASBESTOS                                                                                                                                                                                                                                | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 5μ PVC FILTER                                                       |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> TOTAL DUST                                                                                                                                                                                                                              | <input type="checkbox"/> CYCLONE                  | <input type="checkbox"/> GLASS FIBER-SILVER MEM FILTER                                       |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> SILICA DUST                                                                                                                                                                                                                             | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 150 mg. CHARCOAL                                                    |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> ASPHALT FUMES                                                                                                                                                                                                                           | <input type="checkbox"/> CHARCOAL TUBE            | <input type="checkbox"/> SODIUM BISULFITE                                                    |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> VINYL CHLORIDE (MONOMER)                                                                                                                                                                                                                | <input type="checkbox"/> IMPINGERS, TWO IN SERIES | <input type="checkbox"/> 300 mg. SILICA GEL                                                  |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> FORMALDEHYDE                                                                                                                                                                                                                            | <input type="checkbox"/> SILICAL GEL              | <input type="checkbox"/> 150 mg. SKC FLORISIL TUBE                                           |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> PHENOL                                                                                                                                                                                                                                  | <input type="checkbox"/> FLORISIL TUBE            | <input type="checkbox"/> GLASS FIBER FILTER                                                  |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> PCB                                                                                                                                                                                                                                     | <input type="checkbox"/> CLOSED FACE              | <input type="checkbox"/> 80dba <input type="checkbox"/> 85dba <input type="checkbox"/> 90dba |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> NOISE                                                                                                                                                                                                                                   | <input type="checkbox"/> AUDIO DOSIMETER          |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| EQUIPMENT                                                                                                                                                                                                                                                        |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> DUPONT P4000 PUMP <input type="checkbox"/> DUPONT P2500 PUMP <input type="checkbox"/> DUPONT P200A PUMP <input type="checkbox"/> MEA PUMP <input type="checkbox"/> DUPONT D376 DOSIMETER <input type="checkbox"/> DUPONT D381 DOSIMETER |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| EXHAUST SYSTEMS/REMARKS                                                                                                                                                                                                                                          |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY                                                                                                                                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| WEATHER CONDITIONS                                                                                                                                                                                                                                               |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| OUTSIDE TEMP                                                                                                                                                                                                                                                     | WIND DIRECTION                                    | WIND VELOCITY                                                                                | <input type="checkbox"/> SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN<br><input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> PTLY. CLOUDY |               |            |                |               |                     |                        |
|                                                                                                                                                                                                                                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| CNTRL NO.                                                                                                                                                                                                                                                        | PUMP SERIAL NO.                                   | T <sub>h</sub>                                                                               | SAMPLE NO.                                                                                                                                                                                                                                                       | MILITARY TIME | TOTAL MINS | LPM/CC         | VOLUME LITERS | ANALYSIS RESULT     | AIRBORNE CONCENTRATION |
|                                                                                                                                                                                                                                                                  | 1875                                              |                                                                                              | 798                                                                                                                                                                                                                                                              | 7:56 4:10     | 494        | 1.94           | 968.36        |                     |                        |
| DID EMPLOYEE WEAR RESPIRATORY?    IF SOMETIMES WHEN?    RESPIRATOR MAKE & MODEL                                                                                                                                                                                  |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| CNTRL NO                                                                                                                                                                                                                                                         | DOS SERIAL                                        | CELL                                                                                         | START (TIME)                                                                                                                                                                                                                                                     | STOP          | TOTAL MIN  | READ OUT REPLY | SHR CORR %    | CONVERTED DBA LEVEL |                        |
| 068                                                                                                                                                                                                                                                              | 4738                                              |                                                                                              | 7:56                                                                                                                                                                                                                                                             | 3:56          | 480        |                |               |                     |                        |
| DID EMPLOYEE WEAR HEARING PROTECTN?    IF SOMETIMES WHEN?    MAKE & MODEL                                                                                                                                                                                        |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES                                                                                                                                                                      |                                                   |                                                                                              |                                                                                                                                                                                                                                                                  |               |            |                |               |                     |                        |

COMMENTS/SKETCHES

CTD021384

CERTAINTEED CORP.  
RIVERSIDE A/C PIPE  
APRIL 7-10, 1986

Criterion level: 90 dB  
n 1 - 1.0 %  
n 2 - 10.0 %  
n 3 - 25.0 %  
n 4 - 33.3 %  
n 5 - 50.0 %  
n 6 - 66.6 %  
n 7 - 85.0 %  
n 8 - 99.9 %  
Threshold 1: 80 dB  
Threshold 2: 90 dB  
Exchange Rate(s): 5 dB

CERTAINTEED CORP.  
RIVERSIDE A/C PIPE  
APRIL 7-10, 1986

Criterion level: 90 dB  
n 1 - 1.0 %  
n 2 - 10.0 %  
n 3 - 25.0 %  
n 4 - 33.3 %  
n 5 - 50.0 %  
n 6 - 66.6 %  
n 7 - 85.0 %  
n 8 - 99.9 %  
Threshold 1: 80 dB  
Threshold 2: 90 dB  
Exchange Rate(s): 5 dB

CTD021385

## CERTAINTED INDUSTRIAL HYGIENE

## PUMP CALIBRATION

## PRE-CALIBRATION

SURVEY DATE - M

## POST-CALIBRATION

LOCATION - U7LOCATION - RiversideDATE - 4/4 TIME -       DATE - 4/7 TIME - 3:30STOPWATCH - ☐ 60 SEC ☒ 100STOPWATCH - ☐ 60 SEC ☒ 100INITIALS - [Signature]INITIALS -       

| COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE | COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE |
|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|
|            |                  |                      | PRE                           | POST | PRE          | POST |              |            |                  |                      | PRE                           | POST | PRE          | POST |              |
|            | D-B590           | 500                  | .27                           |      |              |      |              |            | M-0236           |                      |                               |      |              |      |              |
|            | D-B591           |                      |                               |      |              |      |              |            | M-0237           |                      |                               |      |              |      |              |
|            | D-B592           |                      |                               |      |              |      |              |            | M-1851           |                      |                               |      |              |      |              |
|            | D-B593           | 500                  | .249                          |      |              |      | MTOP         |            | M-1866           |                      |                               |      |              |      |              |
|            | D-4973           |                      |                               |      |              |      |              |            | M-2330           |                      |                               |      |              |      |              |
|            | D-4974           |                      |                               |      |              |      |              |            | M-3712           |                      |                               |      |              |      |              |
|            | D-4975           | 500                  | .270                          |      |              |      | MTOP         |            | M-5554           |                      |                               |      |              |      |              |
|            | D-4978           |                      |                               |      |              |      |              |            | M-5791           |                      |                               |      |              |      |              |
|            | D-4979           |                      |                               |      |              |      |              |            | L-2874           |                      |                               |      |              |      |              |
|            | D-5554           | 500                  |                               |      |              |      |              |            | L-3093           |                      |                               |      |              |      |              |
|            | D-5807           |                      |                               |      |              |      |              |            | B-2322           |                      |                               |      |              |      |              |
|            | D-5828           | 500                  | .265                          |      |              |      |              |            | B-251            |                      |                               |      |              |      |              |
|            | D-5851           | 500                  | .262                          |      |              |      |              |            | B-325            |                      |                               |      |              |      |              |
|            | D-6595           |                      |                               |      |              |      |              |            | S-16169          |                      |                               |      |              |      |              |
|            | P-4155           |                      |                               |      |              |      |              |            | D-1867           | 500                  | .27                           | .285 | 1.85         | 1.75 | 1.8 ✓        |
|            | P-6105           |                      |                               |      |              |      |              |            | D-1899           | 500                  | .26                           | .27  | 1.92         | 1.85 | 1.88 ✓       |
|            | P-6121           |                      |                               |      |              |      |              |            | D-1864           | 500                  | .29                           |      |              |      |              |
|            | P-6133           |                      |                               |      |              |      |              |            | D-1858           | 500                  | .285                          | .282 | 1.75         | 1.77 | 1.76 ✓       |
|            | P-6519           |                      |                               |      |              |      |              |            | D-1861           |                      |                               |      |              |      |              |
|            | P-7038           |                      |                               |      |              |      |              |            | D-1875           | 500                  | .258                          | .252 | 1.94         | 1.98 | 1.96 ✓       |
|            | P-331            |                      |                               |      |              |      |              |            | D-1880           | 500                  | .28                           |      |              |      |              |
|            | P-332            |                      |                               |      |              |      |              |            | D-1865           | 500                  | .29                           |      |              |      |              |
|            | P-335            |                      |                               |      |              |      |              |            | D-1876           | 500                  | .265                          |      |              |      |              |
|            | P-336            |                      |                               |      |              |      |              |            | D-1870           | 500                  | .27                           | .272 | 1.85         | 1.94 | 1.85 ✓       |

CTD021386

## CERTAINTED INDUSTRIAL HYGIENE

## PUMP CALIBRATION

## PRE-CALIBRATION

SURVEY DATE- 7

## POST-CALIBRATION

LOCATION- RiversideLOCATION- RivDATE- 4/7TIME- 3:30DATE- 4/8TIME- 4:00STOPWATCH- ☐ 60 SEC☒ 100STOPWATCH- ☐ 60 SEC☒ 100INITIALS- [Signature]INITIALS- [Signature]

| COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE | COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE |
|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|
|            |                  |                      | PRE                           | POST | PRE          | POST |              |            |                  |                      | PRE                           | POST | PRE          | POST |              |
|            | D-B590           |                      |                               |      |              |      |              |            | M-0236           |                      |                               |      |              |      |              |
|            | D-B591           |                      |                               |      |              |      |              |            | M-0237           |                      |                               |      |              |      |              |
|            | D-B592           |                      |                               |      |              |      |              |            | M-1851           |                      |                               |      |              |      |              |
|            | D-B593           |                      |                               |      |              |      |              |            | M-1866           |                      |                               |      |              |      |              |
|            | D-4973           |                      |                               |      |              |      |              |            | M-2330           |                      |                               |      |              |      |              |
|            | D-4974           |                      |                               |      |              |      |              |            | M-3712           |                      |                               |      |              |      |              |
|            | D-4976           |                      |                               |      |              |      |              |            | M-5554           |                      |                               |      |              |      |              |
|            | D-4978           |                      |                               |      |              |      |              |            | M-5791           |                      |                               |      |              |      |              |
|            | D-4979           |                      |                               |      |              |      |              |            | L-2874           |                      |                               |      |              |      |              |
|            | D-5554           |                      |                               |      |              |      |              |            | L-3093           |                      |                               |      |              |      |              |
|            | D-5807           |                      |                               |      |              |      |              |            | B-2322           |                      |                               |      |              |      |              |
|            | D-5828           |                      |                               |      |              |      |              |            | B-251            |                      |                               |      |              |      |              |
|            | D-5851           |                      |                               |      |              |      |              |            | B-325            |                      |                               |      |              |      |              |
|            | D-6595           |                      |                               |      |              |      |              |            | S-16162          |                      |                               |      |              |      |              |
|            | P-4155           |                      |                               |      |              |      |              |            | D-1867           |                      | .286                          | .285 | .285         | .285 | 1.75✓        |
|            | P-6105           |                      |                               |      |              |      |              |            | D-1899           |                      | .27                           | .26  | 2.03         | 1.92 | 1.89✓        |
|            | P-6121           |                      |                               |      |              |      |              |            | D-1864           |                      | .29                           | .275 | 1.72         | 1.82 | 1.87✓        |
|            | P-6133           |                      |                               |      |              |      |              |            | D-1858           |                      | .282                          |      |              |      |              |
|            | P-6519           |                      |                               |      |              |      |              |            | D-1861           |                      |                               |      |              |      |              |
|            | P-7036           |                      |                               |      |              |      |              |            | D-1875           |                      | .252                          | .245 | 1.98         | 2.04 | 2.01✓        |
|            | P-331            |                      |                               |      |              |      |              |            | D-1880           |                      | .28                           | .20  | 1.79         | 2.5  | 2.14✓        |
|            | P-332            |                      |                               |      |              |      |              |            | D-1865           |                      | .265                          | .278 | 1.89         | 1.80 | 1.84✓        |
|            | P-335            |                      |                               |      |              |      |              |            | D-1876           |                      |                               |      |              |      |              |
|            | P-336            |                      |                               |      |              |      |              |            | D-1870           |                      | .272                          | .265 | 1.84         | 1.89 | 1.86✓        |

CTD021387

## CERTAINTED INDUSTRIAL HYGIENE

## PUMP CALIBRATION

## PRE-CALIBRATION

SURVEY DATE- W

## POST-CALIBRATION

LOCATION- lv

LOCATION- \_\_\_\_\_

DATE- 4/8TIME- 4:00

DATE- \_\_\_\_\_

TIME- \_\_\_\_\_

STOPWATCH- ☐ 60 SEC ☒ 100STOPWATCH- ☐ 60 SEC ☐ 100INITIALS- [Signature]

INITIALS- \_\_\_\_\_

| COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE | COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE |
|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|
|            |                  |                      | PRE                           | POST | PRE          | POST |              |            |                  |                      | PRE                           | POST | PRE          | POST |              |
|            | D-B590           |                      | .27                           |      |              |      |              |            | M-0236           |                      |                               |      |              |      |              |
|            | D-B591           |                      |                               |      |              |      |              |            | M-0237           |                      |                               |      |              |      |              |
|            | D-B592           |                      |                               |      |              |      |              |            | M-1851           |                      |                               |      |              |      |              |
|            | D-B593           |                      |                               |      |              |      |              |            | M-1866           |                      |                               |      |              |      |              |
|            | D-4973           |                      |                               |      |              |      |              |            | M-2330           |                      |                               |      |              |      |              |
|            | D-4974           |                      |                               |      |              |      |              |            | M-3712           |                      |                               |      |              |      |              |
|            | D-4976           |                      |                               |      |              |      |              |            | M-5554           |                      |                               |      |              |      |              |
|            | D-4978           |                      |                               |      |              |      |              |            | M-5791           |                      |                               |      |              |      |              |
|            | D-4979           |                      |                               |      |              |      |              |            | L-2874           |                      |                               |      |              |      |              |
|            | D-5554           |                      |                               |      |              |      |              |            | L-3093           |                      |                               |      |              |      |              |
|            | D-5807           |                      |                               |      |              |      |              |            | B-2322           |                      |                               |      |              |      |              |
|            | D-5828           |                      | .265                          |      |              |      |              |            | B-251            |                      |                               |      |              |      |              |
|            | D-5831           |                      | .262                          |      |              |      |              |            | B-325            |                      |                               |      |              |      |              |
|            | D-6395           |                      |                               |      |              |      |              |            | S-16168          |                      |                               |      |              |      |              |
|            | P-4155           |                      |                               |      |              |      |              |            | D-1867           |                      | .285                          | .292 | 1.75         | 1.71 | 1.73✓        |
|            | P-6103           |                      |                               |      |              |      |              |            | D-1899           |                      | .27                           | .26  | 1.85         | 1.92 | 1.89✓        |
|            | P-6121           |                      |                               |      |              |      |              |            | 1880<br>D-1864   |                      | .29                           | .28  | 1.72         | 1.78 | 1.75✓        |
|            | P-6133           |                      |                               |      |              |      |              |            | D-1858           |                      | .282                          | .278 | 1.77         | 1.80 | 1.78✓        |
|            | P-6519           |                      |                               |      |              |      |              |            | D-1861           |                      |                               |      |              |      |              |
|            | P-7036           |                      |                               |      |              |      |              |            | D-1875           |                      | .252                          | .253 | 1.98         | 1.89 | 1.93✓        |
|            | P-331            |                      |                               |      |              |      |              |            | D-1880           |                      | .26                           |      |              |      |              |
|            | P-332            |                      |                               |      |              |      |              |            | D-1865           |                      | .29                           | .265 | 1.72         | 1.79 | 1.76✓        |
|            | P-335            |                      |                               |      |              |      |              |            | D-1876           |                      | .265                          | .28  |              |      |              |
|            | P-336            |                      |                               |      |              |      |              |            | D-1870           |                      | .272                          | .262 | 1.84         | 1.91 | 1.88✓        |

CTD021388

## CERTAINTED INDUSTRIAL HYGIENE

## PUMP CALIBRATION

PRE-CALIBRATION

SURVEY DATE - R

POST-CALIBRATION

LOCATION - \_\_\_\_\_

LOCATION - \_\_\_\_\_

DATE - \_\_\_\_\_ TIME - \_\_\_\_\_

DATE - \_\_\_\_\_ TIME - \_\_\_\_\_

STOPWATCH - ☐ 60 SEC ☐ 100STOPWATCH - ☐ 60 SEC ☐ 100

INITIALS - \_\_\_\_\_

INITIALS - \_\_\_\_\_

| COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE | COL<br>MED | PUMP<br>ID<br>NO | DISP<br>(CC)<br>FLOW | TIME TO<br>DISPLACE<br>BUBBLE |      | FLOW<br>RATE |      | SMPL<br>RATE |
|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|------------|------------------|----------------------|-------------------------------|------|--------------|------|--------------|
|            |                  |                      | PRE                           | POST | PRE          | POST |              |            |                  |                      | PRE                           | POST | PRE          | POST |              |
|            | D-B590           |                      | .27                           | .268 | 1.85         | 1.87 | 1.86✓        |            | M-0236           |                      |                               |      |              |      |              |
|            | D-B591           |                      |                               |      |              |      |              |            | M-0237           |                      |                               |      |              |      |              |
|            | D-B592           |                      |                               |      |              |      |              |            | M-1851           |                      |                               |      |              |      |              |
|            | D-B593           |                      |                               |      |              |      |              |            | M-1866           |                      |                               |      |              |      |              |
|            | D-4973           |                      |                               |      |              |      |              |            | M-2330           |                      |                               |      |              |      |              |
|            | D-4974           |                      |                               |      |              |      |              |            | M-3712           |                      |                               |      |              |      |              |
|            | D-4976           |                      |                               |      |              |      |              |            | M-5554           |                      |                               |      |              |      |              |
|            | D-4978           |                      |                               |      |              |      |              |            | M-5791           |                      |                               |      |              |      |              |
|            | D-4979           |                      |                               |      |              |      |              |            | L-2874           |                      |                               |      |              |      |              |
|            | D-5554           |                      |                               |      |              |      |              |            | L-3093           |                      |                               |      |              |      |              |
|            | D-5807           |                      |                               |      |              |      |              |            | B-2322           |                      |                               |      |              |      |              |
|            | D-5828           |                      | .265                          |      |              |      |              |            | B-251            |                      |                               |      |              |      |              |
|            | D-5851           |                      | .262                          | .262 | 1.91         | 1.91 | 1.91✓        |            | B-325            |                      |                               |      |              |      |              |
|            | D-6595           |                      |                               |      |              |      |              |            | B-1616           |                      |                               |      |              |      |              |
|            | P-4155           |                      |                               |      |              |      |              |            | D-1867           |                      | .242                          | .248 | 1.71         | 1.68 | 1.70✓        |
|            | P-6105           |                      |                               |      |              |      |              |            | D-1899           |                      | .26                           | .262 | 1.92         | 1.92 | 1.92✓        |
|            | P-6121           |                      |                               |      |              |      |              |            | D-1864           |                      | .28                           | .28  | 1.79         | 1.79 | 1.79✓        |
|            | P-6133           |                      |                               |      |              |      |              |            | D-1858           |                      | .218                          | .28  | 1.80         | 1.79 | 1.80✓        |
|            | P-6519           |                      |                               |      |              |      |              |            | D-1861           |                      |                               |      |              |      |              |
|            | P-7036           |                      |                               |      |              |      |              |            | D-1875           |                      | .265                          | .25  | 1.89         | 2.0  | 1.94✓        |
|            | P-331            |                      |                               |      |              |      |              |            | D-1880           |                      | .28                           | .28  | 1.79         | 1.79 | 1.79✓        |
|            | P-332            |                      |                               |      |              |      |              |            | D-1865           |                      | .28                           | .28  | 1.79         | 1.79 | 1.79✓        |
|            | P-335            |                      |                               |      |              |      |              |            | D-1876           |                      | .265                          | .272 | 1.89         | 1.84 | 1.86✓        |
|            | P-336            |                      |                               |      |              |      |              |            | D-1870           |                      | .262                          | .26  | 1.92         | 1.92 | 1.92✓        |

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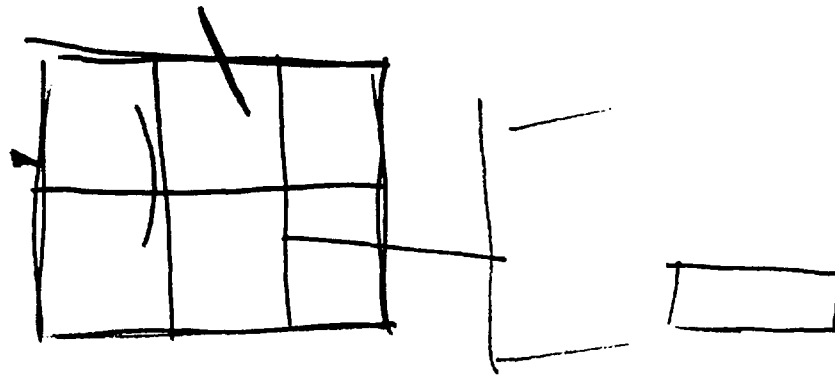
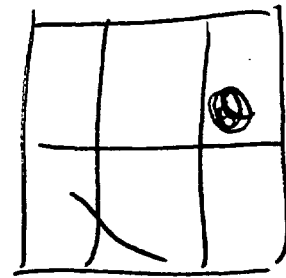
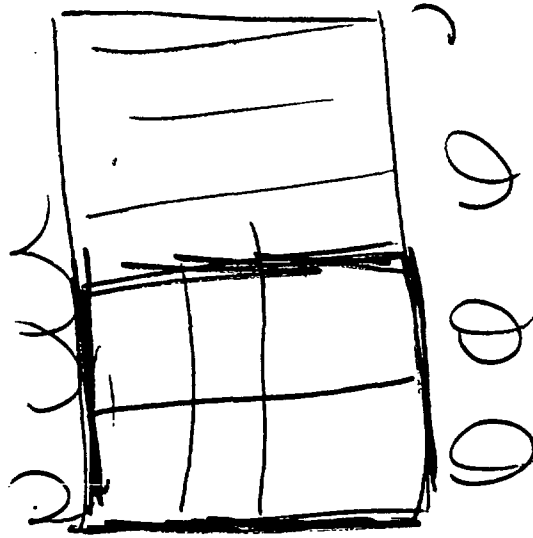
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| SAMPLER NO.                                                                                        | DATE        |
|----------------------------------------------------------------------------------------------------|-------------|
| FLOW                                                                                               | TIME        |
| VOLUME                                                                                             | BLANK CNT   |
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| NOTES                                                                                              |             |
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| SAMPLER NO.                                                                                        | DATE        |
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| FLOW                                                                                               | TIME        |
| VOLUME                                                                                             | BLANK CNT   |
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| NOTES                                                                                              |             |
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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |               | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|----------------------|---------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME | NO.   | START | STOP | MIN  | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
|      | P    | 04/20/ 82 | GENERAL HELPER       | BRYANT, B     | 0662  | 0826  | 1432 | 366  | .14  | 0826  | 1432 | 366 | .14  | S     | PLANT     |
|      | P    | 10/26/ 83 | GENERAL HELPER       | MEIER, S.     | 83073 | 0758  | 1640 | 492  | .03  | 0758  | 1640 | 492 | .03  | N     | CORPORATE |
|      | P    | 01/13/ 82 | INDUSTRIAL ENGR.     | MEGARGEE, L   | 0627  | 0845  | 1455 | 370  | .04  | 0845  | 1455 | 370 | .04  | N     | PLANT     |
|      | A    | 02/22/ 84 | SHIPPING YARD WEST   |               | A03   | 1058  | 1524 | 266  | .07  |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/06/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 0304  | 0830  | 1600 | 450  | .42  | 0830  | 1600 | 450 | .42  | N     | PLANT     |
| FIN  | P    | 03/26/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 0324  | 0808  | 1135 | 207  | .39  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 03/26/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 0325  | 1135  | 1500 | 205  | .44  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 03/26/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     |       |       |      |      |      | 0808  | 1500 | 412 | .41  | N     | PLANT     |
| FIN  | P    | 11/24/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 0587  | 0823  | 1141 | 198  | .12  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/24/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 0591  | 1141  | 1520 | 219  | .19  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/24/ 81 | 1/4 LATHE OPERATOR   | DOBBS, J.     |       |       |      |      |      | 0823  | 1520 | 417 | .16  | N     | PLANT     |
| FIN  | P    | 05/26/ 82 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 82017 | 0812  | 1503 | 411  | .14  | 0812  | 1503 | 411 | .14  | N     | CORPORATE |
| FIN  | P    | 03/29/ 83 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 8339  | 0830  | 1530 | 420  | .10  | 0830  | 1530 | 420 | .10  | S     | PLANT     |
| FIN  | P    | 10/12/ 83 | 1/4 LATHE OPERATOR   | DOBBS, J.     | 8398  | 0922  | 1501 | 339  | .08  | 0922  | 1501 | 339 | .08  | N     | PLANT     |
| FIN  | P    | 10/24/ 83 | 1/4 LATHE OPERATOR   | PASILLAS, D.  | 80348 | 0845  | 1139 | 174  | ---  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | 1/4 LATHE OPERATOR   | PASILLAS, D.  | 83049 | 1139  | 1527 | 228  | .06  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 05/03/ 84 | 1/4 LATHE OPERATOR   | DOBBS, J.     |       | 0804  | 1508 | 424  | .05  | 0804  | 1508 | 424 | .05  | N     | PLANT     |
| FIN  | P    | 06/29/ 84 | 1/4 LATHE OPERATOR   | PALOMERA, G.  | 0725  | 0822  | 1507 | 375  | .06  | 0822  | 1507 | 375 | .06  | N     | PLANT     |
| FIN  | P    | 10/30/ 84 | 1/4 LATHE OPERATOR   | PALOMERA, G.  | 84052 | 0725  | 1031 | 186  | .02  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | 1/4 LATHE OPERATOR   | PALOMERA, G.  | 85053 | 1031  | 1510 | 279  | .03  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | 1/4 LATHE OPERATOR   | PALOMERA, G.  |       |       |      |      |      | 0725  | 1510 | 465 | .03  | N     | CORPORATE |
| FIN  | P    | 06/13/ 85 | 1/4 LATHE OPERATOR   | SUAREZ, A.    | 027   | 0832  | 1447 | 374  | .11  | 0832  | 1447 | 374 | .11  | N     | PLANT     |
| FIN  |      | 07/19/ 77 | 1/4 LINE             |               |       |       |      |      | .22  |       |      |     |      |       | PLANT     |
| FIN  | P    | 12/16/ 81 | ACCESSORIES INSP.    | WILSON, C.    | 0623  | 0810  | 1510 | 420  | .07  | 0810  | 1510 | 420 | .07  |       | PLANT     |
| FIN  | P    | 04/07/ 82 | ASST. LATHE #1 OPERA | HAMPTON, C.   | 0647  | 0750  | 1506 | 436  | .09  | 0750  | 1506 | 436 | .09  | N     | PLANT     |
| FIN  | P    | 03/22/ 83 | ASST. LATHE #1 OPERA | HAMPTON, C.   | 8313  | 0820  | 1530 | 400  | .05  | 0820  | 1530 | 400 | .05  | N     | PLANT     |
| FIN  | P    | 10/24/ 83 | ASST. LATHE #1 OPERA | HAMPTON, C.   | 83038 | 0851  | 1100 | 129  | ---  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | ASST. LATHE #1 OPERA | HAMPTON, C.   | 83039 | 1125  | 1525 | 240  | .03  | 1125  | 1525 | 240 | .03  | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | ASST. LATHE #1 OPERA | HAMPTON, T.   | 84044 | 0726  | 1135 | 249  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | ASST. LATHE #1 OPERA | HAMPTON, T.   | 84045 | 1135  | 1516 | 222  | .02  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | ASST. LATHE #1 OPERA | HAMPTON, T.   |       |       |      |      |      | 0726  | 1516 | 471 | .01  | N     | CORPORATE |
| FIN  | P    | 05/24/ 85 | ASST. LATHE #1 OPERA | EVANS, G.     | 011   | 0848  | 1415 | 327  | .05  | 0848  | 1415 | 327 | .05  | Y     | PLANT     |
| FIN  | P    | 06/06/ 85 | ASST. LATHE #1 OPERA | HAMPTON, P.   | 016   | 0830  | 1436 | 366  | .06  | 0830  | 1436 | 366 | .06  | N     | PLANT     |
| FIN  | P    | 05/06/ 82 | ASST. LATHE #2 OPERA | COOPER, H.    | 0668  | 0814  | 1428 | 374  | .15  | 0814  | 1428 | 374 | .15  | S     | PLANT     |
| FIN  | P    | 03/31/ 83 | ASST. LATHE #2 OPERA | COOPER, H.    | 8346  | 0823  | 1507 | 404  | .14  | 0823  | 1507 | 404 | .14  | N     | PLANT     |
| FIN  | P    | 04/24/ 81 | ASST. LATHE OPERATOR | LESIEUR, R.   | 0554  | 0803  | 1200 | 237  | .14  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/24/ 81 | ASST. LATHE OPERATOR | LESIEUR, R.   | 0555  | 1200  | 1501 | 181  | .10  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/24/ 81 | ASST. LATHE OPERATOR | LESIEUR, R.   |       |       |      |      |      | 0803  | 1501 | 418 | .12  | N     | PLANT     |
| FIN  | P    | 11/24/ 81 | ASST. LATHE OPERATOR | HAMPTON, C.   | 0592  | 0820  | 1059 | 139  | ---  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/24/ 81 | ASST. LATHE OPERATOR | HAMPTON, C.   | 0586  | 1132  | 1525 | 233  | .17  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 05/26/ 82 | ASST. LATHE OPERATOR |               | 82012 | 0818  | 1506 | 408  | .03  | 0818  | 1506 | 408 | .03  | N     | CORPORATE |
| FIN  | P    | 10/17/ 83 | ASST. LATHE OPERATOR | COOPER, H.    | 3116  | 0830  | 1438 | 368  | .07  | 0830  | 1438 | 368 | .07  | Y     | PLANT     |
| FIN  | P    | 05/03/ 84 | ASST. LATHE OPERATOR | BROOKS, E.    |       | 0800  | 1505 | 425  | .04  | 0800  | 1505 | 425 | .04  | N     | PLANT     |
| FIN  | A    | 05/27/ 82 | BETWEEN LATHES 1 & 2 |               | 82043 | 0740  | 1455 | 435  | .01  |       |      |     |      |       | CORPORATE |
| FIN  | A    | 08/15/ 73 | BORING MILL          |               |       |       |      |      | .09  |       |      |     |      |       | TRAVELERS |
| FIN  | A    | 11/ / 72  | BORING MILL #1       |               |       |       |      |      | .05  |       |      |     |      |       | TRAVELERS |
| FIN  | A    | 11/ / 72  | BORING MILL #1       |               |       |       |      |      | .03  |       |      |     |      |       | TRAVELERS |
| FIN  |      | 03/19/ 77 | BORING MILL #1       |               |       |       |      |      | .20  |       |      |     |      |       | PLANT     |
| FIN  |      | 10/27/ 78 | BORING MILL #1       |               |       |       |      |      | .30  |       |      |     |      |       | PLANT     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |                 | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|----------------------|-----------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME   | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| FIN  | P    | 06/11/ 81 | BORING MILL #1 OPERA | PUTNAM, W.      | 0566  | 0723  | 1131 | 248  | .20  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 06/11/ 81 | BORING MILL #1 OPERA | PUTNAM, W.      | 0565  | 1132  | 1402 | 150  | .36  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 06/11/ 81 | BORING MILL #1 OPERA | PUTNAM, W.      |       |       |      |      |      | 0723  | 1402 | 398 | .26  | N     | PLANT     |
| FIN  | P    | 03/25/ 83 | BORING MILL #1 OPERA | VILLALPANDO, A. | 8328  | 0820  | 1506 | 406  | .17  | 0820  | 1506 | 406 | .17  | N     | PLANT     |
| FIN  | P    | 10/13/ 83 | BORING MILL #1 OPERA | PALOMERA, G.    | 3104  | 0823  | 1519 | 416  | .06  | 0823  | 1519 | 416 | .06  | N     | PLANT     |
| FIN  | P    | 10/26/ 83 | BORING MILL #1 OPERA | JAMES, J.       | 83057 | 0730  | 1237 | 307  | .09  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/26/ 83 | BORING MILL #1 OPERA | JAMES, J.       | 83058 | 1237  | 1520 | 163  | .12  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/26/ 83 | BORING MILL #1 OPERA | JAMES, J.       |       |       |      |      |      | 0730  | 1520 | 470 | .10  | N     | CORPORATE |
| FIN  | A    | 11/ / 72  | BORING MILL #2       |                 |       |       |      |      | .11  |       |      |     |      |       | TRAVELERS |
| FIN  | A    | 11/ / 72  | BORING MILL #2       |                 |       |       |      |      | .06  |       |      |     |      |       | TRAVELERS |
| FIN  |      | 05/27/ 77 | BORING MILL #2       |                 |       |       |      |      | .29  |       |      |     |      |       | PLANT     |
| FIN  |      | 08/24/ 77 | BORING MILL #2       |                 |       |       |      |      | .56  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/25/ 78 | BORING MILL #2       |                 |       |       |      |      | .16  |       |      |     |      |       | PLANT     |
| FIN  |      | 02/28/ 78 | BORING MILL #2       |                 |       |       |      |      | .16  |       |      |     |      |       | PLANT     |
| FIN  |      | 06/08/ 78 | BORING MILL #2       |                 |       |       |      |      | .24  |       |      |     |      |       | PLANT     |
| FIN  |      | 10/27/ 78 | BORING MILL #2       |                 |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| FIN  | P    | 11/18/ 81 | BORING MILL #2 OPERA | BEY, GEORGE     | 0587  | 0920  | 1242 | 202  | .14  |       |      |     |      | S     | PLANT     |
| FIN  | P    | 11/18/ 81 | BORING MILL #2 OPERA | BEY, GEORGE     | 0581  | 1242  | 1507 | 145  | .10  |       |      |     |      | S     | PLANT     |
| FIN  | P    | 11/18/ 81 | BORING MILL #2 OPERA | BEY, GEORGE     |       |       |      |      |      | 0920  | 1507 | 347 | .13  | S     | PLANT     |
| FIN  | P    | 05/27/ 82 | BORING MILL #2 OPERA | DOBBS, P.       | 82018 | 0720  | 1501 | 461  | .06  | 0720  | 1501 | 461 | .06  | N     | CORPORATE |
| FIN  | P    | 03/25/ 83 | BORING MILL #2 OPERA | BRYANT, B.      | 8325  | 0810  | 1508 | 418  | .07  | 0810  | 1508 | 418 | .07  | S     | PLANT     |
| FIN  | P    | 03/28/ 83 | BORING MILL #2 OPERA | DOBBS, P.       | 8330  | 0818  | 1520 | 422  | .07  | 0818  | 1520 | 422 | .07  | S     | PLANT     |
| FIN  | P    | 10/13/ 83 | BORING MILL #2 OPERA | DOBBS, PHIL     | 3103  | 0824  | 1519 | 415  | .06  | 0824  | 1519 | 415 | .06  | S     | PLANT     |
| FIN  | P    | 10/26/ 83 | BORING MILL #2 OPERA | DOBBS, P.       | 83059 | 0743  | 1238 | 295  | .10  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/26/ 83 | BORING MILL #2 OPERA | DOBBS, P.       | 83060 | 1238  | 1519 | 161  | .10  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/26/ 83 | BORING MILL #2 OPERA | DOBBS, P.       |       |       |      |      |      | 0743  | 1519 | 456 | .10  | N     | CORPORATE |
| FIN  | P    | 04/23/ 84 | BORING MILL #2 OPERA | DOBBS, P.       |       |       |      |      |      | 0800  | 1503 | 423 | .07  | N     | PLANT     |
| FIN  | P    | 04/23/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 4291  | 0800  | 1148 | 228  | .07  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/23/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 4292  | 1148  | 1503 | 195  | .06  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/23/ 84 | BORING MILL #2 OPERA | DOBBS, P.       |       |       |      |      |      | 0800  | 1503 | 423 | .07  | N     | PLANT     |
| FIN  | P    | 04/30/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 4441  |       | 280  | .09  |      |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/30/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 4442  |       | 141  | .15  |      |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/30/ 84 | BORING MILL #2 OPERA | DOBBS, P.       |       |       |      |      |      |       | 421  | .11 | N    | PLANT |           |
| FIN  | P    | 10/31/ 84 | BORING MILL #2 OPERA | ATENCIO, S      | 84057 | 0952  | 1501 | 309  | .01  | 0952  | 1501 | 309 | .01  | N     | CORPORATE |
| FIN  | P    | 11/01/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 84058 | 0748  | 1333 | 345  | .08  | 0748  | 1333 | 345 | .08  | N     | CORPORATE |
| FIN  | P    | 11/01/ 84 | BORING MILL #2 OPERA | DOBBS, P.       | 84059 | 1333  | 1507 | 94   | .05  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 11/01/ 84 | BORING MILL #2 OPERA | DOBBS, P.       |       |       |      |      |      | 0748  | 1507 | 439 | 0.07 | N     | CORPORATE |
| FIN  |      | 04/ / 74  | BORING MILL #2       |                 |       |       |      |      | .57  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/ / 75  | BORING MILL #2       |                 |       |       |      |      | .48  |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/29/ 75 | BORING MILL #2       | DOBBES, R.      |       |       |      | 60   | .48  |       |      |     |      |       | PLANT     |
| FIN  |      | 08/06/ 75 | BORING MILL #2       |                 |       |       |      |      | .39  |       |      |     |      |       | PLANT     |
| FIN  |      | 08/08/ 75 | BORING MILL #2       |                 |       |       |      |      | .29  |       |      |     |      |       | PLANT     |
| FIN  | P    | 04/07/ 76 | BORING MILL #2       |                 |       |       |      |      | .64  |       |      |     |      |       | PLANT     |
| FIN  |      | 04/ / 74  | BORING MILL #2       |                 |       |       |      |      | .49  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/ / 75  | BORING MILL #2       |                 |       |       |      |      | .63  |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/30/ 75 | BORING MILL #2       |                 |       |       |      | 65   | .63  |       |      |     |      |       | PLANT     |
| FIN  |      | 02/ / 75  | BORING MILL #2       |                 |       |       |      |      | .33  |       |      |     |      |       | PLANT     |
| FIN  |      | 02/ / 75  | BORING MILL #2       |                 |       |       |      |      | .39  |       |      |     |      |       | PLANT     |
| FIN  |      | 04/ / 75  | BORING MILL #2       |                 |       |       |      |      | .97  |       |      |     |      |       | PLANT     |
| FIN  |      | 07/ / 75  | BORING MILL #2       |                 |       |       |      |      | .70  |       |      |     |      |       | PLANT     |
| FIN  |      | 11/14/ 75 | BORING MILL #2       |                 |       |       |      |      | .46  |       |      |     |      |       | PLANT     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| DEPT | PER/ AREA | TEST DATE | JOB TITLE/AREA              | EMPLOYEE NAME | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START | TWA STOP | TWA MIN | TWA F/CC | RESP. | SAMPLED BY |
|------|-----------|-----------|-----------------------------|---------------|----------|------------|-----------|-----------|-----------|-----------|----------|---------|----------|-------|------------|
| FIN  | P         | 01/27/ 76 | BORING MILL 42" <i>oper</i> | LOPEZ         |          |            |           |           | .74       |           |          |         |          |       | PLANT      |
| FIN  | A         | 01/27/ 76 | BORING MILL 42"             |               |          |            |           |           | .68       |           |          |         |          |       | PLANT      |
| FIN  | A         | 01/28/ 76 | BORING MILL 42"             |               |          |            |           |           | 1.25      |           |          |         |          |       | PLANT      |
| FIN  | A         | 02/03/ 76 | BORING MILL 42"             |               |          |            |           |           | .50       |           |          |         |          |       | PLANT      |
| FIN  | A         | 04/01/ 76 | BORING MILL 42"             |               |          |            |           |           | .12       |           |          |         |          |       | PLANT      |
| FIN  |           | 05/27/ 77 | BORING MILL 42"             |               |          |            |           |           | .51       |           |          |         |          |       | PLANT      |
| FIN  |           | 01/26/ 78 | BORING MILL 42"             |               |          |            |           |           | .10       |           |          |         |          |       | PLANT      |
| FIN  |           | 07/19/ 79 | BORING MILL 42"             |               |          |            |           |           | .25       |           |          |         |          |       | PLANT      |
| FIN  | A         | 05/01/ 81 | BORING MILL 42"             |               | 0557     | 0900       | 1451      | 351       | .08       |           |          |         |          |       | PLANT      |
| FIN  | P         | 03/24/ 80 | BORING MILL 42" OPER        | GARCIA, E.    |          |            |           |           | .53       |           |          |         |          |       | PLANT      |
| FIN  | P         | 03/24/ 80 | BORING MILL 42" OPER        | GARCIA, E.    |          |            |           |           | .31       |           |          |         |          |       | PLANT      |
| FIN  | P         | 04/03/ 80 | BORING MILL 42" OPER        | GARCIA, E.    |          |            |           |           | .50       |           |          |         |          |       | PLANT      |
| FIN  | P         | 03/20/ 81 | BORING MILL 42" OPER        | JAMES, JIMMY  | 0320     | 0730       | 1034      | 184       | .13       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 03/20/ 81 | BORING MILL 42" OPER        | JAMES, JIMMY  | 0321     | 1034       | 1348      | 194       | .12       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 03/20/ 81 | BORING MILL 42" OPER        | JAMES, JIMMY  |          | 0730       | 1348      | 378       |           | .12       |          |         |          | N     | PLANT      |
| FIN  | P         | 11/25/ 81 | BORING MILL 42" OPER        | JAMES, J.     | 0596     | 0805       | 1238      | 273       | .08       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 11/25/ 81 | BORING MILL 42" OPER        | JAMES, J.     | 0598     | 1238       | 1518      | 160       | .13       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 11/25/ 81 | BORING MILL 42" OPER        | JAMES, J.     |          | 0805       | 1518      | 433       |           | .10       |          |         |          | N     | PLANT      |
| FIN  | P         | 03/28/ 83 | BORING MILL 42" OPER        | JAMES, J.     | 8331     | 0820       | 1520      | 420       | .12       | 0820      | 1520     | 420     | .12      | S     | PLANT      |
| FIN  | P         | 10/30/ 84 | BORING MILL 42" OPER        | ATENCIO, S    | 84060    | 0710       | 1025      | 195       |           |           |          |         |          | N     | CORPORATE  |
| FIN  | P         | 10/30/ 84 | BORING MILL 42" OPER        | ATENCIO, S    | 84061    | 1025       | 1502      | 277       |           |           |          |         |          | N     | CORPORATE  |
| FIN  | P         | 10/30/ 84 | BORING MILL 42" OPER        | ATENCIO, S    |          | 0710       | 1502      | 472       |           | .10       |          |         |          | N     | CORPORATE  |
| FIN  | P         | 05/22/ 85 | BORING MILL 42" OPER        | JAMES, J.     | 014      | 0844       | 1400      | 316       | .07       | 0844      | 1400     | 316     | .07      | N     | PLANT      |
| FIN  | P         | 08/15/ 73 | BORING MILL OPERATOR        |               |          |            |           |           | .40       |           |          |         |          |       | TRAVELERS  |
| FIN  | P         | 04/16/ 81 | BORING MILL OPERATOR        | PUTNAM, W     | 9356     | 0755       | 1234      | 279       | .40       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 04/16/ 81 | BORING MILL OPERATOR        | PUTNAM, W     | 9357     | 1234       | 1441      | 127       | .54       |           |          |         |          | N     | PLANT      |
| FIN  | P         | 04/16/ 81 | BORING MILL OPERATOR        | PUTNAM, W     |          | 0755       | 1441      | 406       |           | .45       |          |         |          | N     | PLANT      |
| FIN  | P         | 10/20/ 83 | BORING MILL OPERATOR        | JAMES, J      | 3127     | 0814       | 1325      | 311       | .05       | 0814      | 1325     | 311     | .05      | S     | PLANT      |
| FIN  | P         | 05/04/ 84 | BORING MILL OPERATOR        | JAMES, J      |          | 0830       | 1230      | 240       | .05       | 0830      | 1230     | 240     | .05      | N     | PLANT      |
| FIN  | P         | 06/07/ 85 | BORING MILL OPERATOR        | DOBBS, P.     | 020      | 0822       | 1523      | 421       | .10       | 0822      | 1523     | 421     | .10      | N     | PLANT      |
| FIN  | A         | 11/ / 72  | CORE DRILL #2               |               |          |            |           |           | .20       |           |          |         |          |       | TRAVELERS  |
| FIN  | A         | 11/ / 72  | CPLG CUT OFF                |               |          |            |           |           | .06       |           |          |         |          |       | TRAVELERS  |
| FIN  | A         | 11/ / 72  | CPLG CUT OFF                |               |          |            |           |           | .22       |           |          |         |          |       | TRAVELERS  |
| FIN  |           | 04/ / 74  | CPLG CUT OFF                |               |          |            |           |           | .75       |           |          |         |          |       | PLANT      |
| FIN  |           | 01/ / 75  | CPLG CUT OFF                |               |          |            |           |           | .48       |           |          |         |          |       | PLANT      |
| FIN  | P         | 01/30/ 75 | CPLG CUT OFF                |               |          |            |           | 60        | .48       |           |          |         |          |       | PLANT      |
| FIN  |           | 08/08/ 75 | CPLG CUT OFF                |               |          |            |           |           | .07       |           |          |         |          |       | PLANT      |
| FIN  | A         | 03/28/ 76 | CPLG CUT OFF                |               |          |            |           |           | 1.37      |           |          |         |          |       | PLANT      |
| FIN  |           | 08/07/ 76 | CPLG CUT OFF                |               |          |            |           |           | .06       |           |          |         |          |       | PLANT      |
| FIN  |           | 01/16/ 77 | CPLG CUT OFF                |               |          |            |           |           | .33       |           |          |         |          |       | PLANT      |
| FIN  | A         | 01/16/ 77 | CPLG CUT OFF                |               |          |            |           |           | .17       |           |          |         |          |       | PLANT      |
| FIN  |           | 05/09/ 77 | CPLG CUT OFF                |               |          |            |           |           | .34       |           |          |         |          |       | PLANT      |
| FIN  | A         | 11/16/ 77 | CPLG CUT OFF                |               |          |            |           |           | .24       |           |          |         |          |       | PLANT      |
| FIN  |           | 02/07/ 78 | CPLG CUT OFF                |               |          |            |           |           | .44       |           |          |         |          |       | PLANT      |
| FIN  |           | 02/13/ 78 | CPLG CUT OFF                |               |          |            |           |           | .43       |           |          |         |          |       | PLANT      |
| FIN  |           | 02/14/ 78 | CPLG CUT OFF                |               |          |            |           |           | .49       |           |          |         |          |       | PLANT      |
| FIN  |           | 07/17/ 79 | CPLG CUT OFF                |               |          |            |           |           | .17       |           |          |         |          |       | PLANT      |
| FIN  | P         | 03/28/ 80 | CPLG CUT OFF                |               |          |            |           |           | .40       |           |          |         |          |       | PLANT      |
| FIN  | A         | 03/13/ 84 | CPLG CUT OFF                |               | 534      | 0804       | 1526      | 442       | .03       |           |          |         |          |       | PLANT      |
| FIN  | A         | 03/14/ 84 | CPLG CUT OFF                |               | 600      | 0803       | 1523      | 440       | .05       |           |          |         |          |       | PLANT      |
| FIN  | A         | 03/15/ 84 | CPLG CUT OFF                |               | 616      | 0831       | 1651      | 500       | .03       |           |          |         |          |       | PLANT      |

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RIVERSIDE A/C PIPE PLANT  
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| PER/ | TEST |           |                      |               | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA             | TWA             | TWA            | TWA            |              | SAMPLED          |
|------|------|-----------|----------------------|---------------|-------|-------|------|------|------|-----------------|-----------------|----------------|----------------|--------------|------------------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME | NO.   | START | STOP | MINS | F/CC | START           | STOP            | MIN            | F/CC           | RESP.        | BY               |
| FIN  | A    | 03/16/ 84 | CPLG CUT OFF         |               | 624   | 0810  | 1512 | 422  | .04  |                 |                 |                |                |              | PLANT            |
| FIN  | A    | 03/22/ 84 | CPLG CUT OFF         |               | 711   |       |      | 425  | .10  |                 |                 |                |                |              | PLANT            |
| FIN  | A    | 08/02/ 84 | CPLG CUT OFF         |               | 732   | 0900  | 1534 | 394  | .12  |                 |                 |                |                |              | PLANT            |
| FIN  | A    | 08/26/ 85 | CPLG CUT OFF         |               | 0627  | 0945  | 1525 | 340  | .07  | 0945            | 1525            | 340            | .07            | N            | PLANT            |
| FIN  | A    | 09/13/ 85 | CPLG CUT OFF         |               | 0633  | 0840  | 1338 | 298  | .10  | 0840            | 1338            | 298            | .10            | N            | PLANT            |
| FIN  | P    | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    | 0563  | 0736  | 1100 | 204  | .28  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    | 0564  | 1134  | 1458 | 204  | .33  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    |       |       |      |      |      | 0736            | 1458            | 408            | .30            | S            | PLANT            |
| FIN  | P    | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    | 00589 | 0854  | 1233 | 219  | .16  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    | 00590 | 1233  | 1414 | 101  | .34  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.    |       |       |      |      |      | 0854            | 1414            | 320            | .22            | S            | PLANT            |
| FIN  | P    | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.  | 82019 | 0732  | 1048 | 196  | .05  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.  | 82020 | 1145  | 1452 | 187  | .04  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.  |       |       |      |      |      | 0732            | 1452            | 383            | .05            | N            | CORPORATE        |
| FIN  | P    | 03/23/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    | 8314  | 0824  | 1100 | 156  | .29  | <del>0824</del> | <del>1100</del> | <del>156</del> | <del>.29</del> | <del>Y</del> | <del>PLANT</del> |
| FIN  | P    | 03/24/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    | 8320  | 0750  | 1133 | 223  | .28  | <del>0750</del> | <del>1133</del> | <del>223</del> | <del>.28</del> | <del>Y</del> | <del>PLANT</del> |
| FIN  | P    | 04/05/ 83 | CPLG CUT OFF OPERATO | ATENCIO, S.   | 8351  | 0805  | 1521 | 436  | .05  | 0805            | 1521            | 436            | .05            | Y            | PLANT            |
| FIN  | P    | 10/13/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    | 8392  | 0910  | 1501 | 351  | .21  | 0910            | 1501            | 351            | .21            | S            | PLANT            |
| FIN  | P    | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    | 83055 | 0730  | 1235 | 305  | .16  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    | 83056 | 1235  | 1520 | 165  | .16  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.    |       |       |      |      |      | 0730            | 1520            | 470            | .16            | N            | CORPORATE        |
| FIN  | P    | 03/12/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 528   | 0816  | 1512 | 425  | .20  | 0816            | 1521            | 425            | .20            | Y            | PLANT            |
| FIN  | P    | 03/13/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 536   | 0803  | 1526 | 443  | .21  | 0803            | 1526            | 443            | .21            | S            | PLANT            |
| FIN  | P    | 03/14/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 608   | 0759  | 1515 | 436  | .14  | 0759            | 1515            | 436            | .14            | S            | PLANT            |
| FIN  | P    | 03/15/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 603   | 0821  | 1521 | 420  | .23  | 0821            | 1521            | 420            | .23            | S            | PLANT            |
| FIN  | P    | 03/16/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 621   | 0759  | 1503 | 424  | .15  | 0759            | 1503            | 424            | .15            | S            | PLANT            |
| FIN  | P    | 03/22/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 708   | 0750  | 1456 | 426  | .16  | 0750            | 1456            | 426            | .16            | S            | PLANT            |
| FIN  | P    | 03/23/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 714   | 0750  | 1450 | 420  | .32  | 0750            | 1450            | 420            | .32            | S            | PLANT            |
| FIN  | P    | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 84062 | 0714  | 1027 | 194  | .29  |                 |                 |                |                | Y            | CORPORATE        |
| FIN  | P    | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    | 85063 | 1027  | 1502 | 275  | .32  |                 |                 |                |                | Y            | CORPORATE        |
| FIN  | P    | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.    |       |       |      |      |      | 0714            | 1502            | 469            | .31            | Y            | CORPORATE        |
| FIN  | P    | 02/06/ 85 | CPLG CUT OFF OPERATO | COOLEY, D.    | 002   | 0814  | 1516 | 422  | .26  | 0814            | 1516            | 422            | .26            | Y            | PLANT            |
| FIN  | P    | 09/13/ 85 | CPLG CUT OFF OPERATO | GOODWIN, J.   | 0628  | 0835  | 1338 | 303  | .11  | 0835            | 1338            | 303            | .11            | N            | PLANT            |
| FIN  | A    | 11/ / 72  | CPLG TEST AREA TEST  |               |       |       |      |      | .21  |                 |                 |                |                |              | TRAVELERS        |
| FIN  |      | 04/ / 74  | CRUSHER              |               |       |       |      |      | .24  |                 |                 |                |                |              | PLANT            |
| FIN  |      | 05/09/ 77 | CRUSHER              |               |       |       |      |      | .55  |                 |                 |                |                |              | PLANT            |
| FIN  | P    | 04/09/ 81 | CRUSHER OPERATOR     | SILVA, T.     | 0350  | 0805  | 1210 | 245  | .14  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 04/09/ 81 | CRUSHER OPERATOR     | SILVA, T.     | 9351  | 1210  | 1450 | 160  | .15  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 04/09/ 81 | CRUSHER OPERATOR     | SILVA, T.     |       |       |      |      |      | 0805            | 1450            | 405            | .14            | S            | PLANT            |
| FIN  | P    | 04/19/ 82 | CRUSHER OPERATOR     | TAYLOR, B.    | 0660  | 0819  | 1154 | 215  | .30  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 04/19/ 82 | CRUSHER OPERATOR     | TAYLOR, B.    |       | 1154  | 1441 | 215  | .29  |                 |                 |                |                | S            | PLANT            |
| FIN  | P    | 04/19/ 82 | CRUSHER OPERATOR     | TAYLOR, B.    |       |       |      |      |      | 0819            | 1441            | 430            | .29            | S            | PLANT            |
| FIN  | P    | 04/19/ 82 | CRUSHER OPERATOR     | SILVA, T.G.   | 0659  | 0825  | 1440 | 375  | .15  | 0825            | 1440            | 375            | .15            | S            | PLANT            |
| FIN  | P    | 05/27/ 82 | CRUSHER OPERATOR     | SILVA, T.     | 82031 | 1225  | 1513 | 168  |      |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 04/07/ 83 | CRUSHER OPERATOR     | SILVA, T.     | 8365  | 0930  | 1440 | 310  | .06  | 0930            | 1440            | 310            | .06            | Y            | PLANT            |
| FIN  | P    | 10/13/ 83 | CRUSHER OPERATOR     | JOHNSON, J.   | 8399  | 0820  | 1451 | 391  | .06  | 0820            | 1451            | 391            | .06            | Y            | PLANT            |
| FIN  | P    | 10/17/ 83 | CRUSHER OPERATOR     | SILVA, T.     | 3115  | 0835  | 1445 | 375  | .09  | 0835            | 1445            | 375            | .09            | S            | PLANT            |
| FIN  | P    | 10/26/ 83 | CRUSHER OPERATOR     | SILVA, T.     | 83071 | 0757  | 1245 | 288  | .14  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 10/26/ 83 | CRUSHER OPERATOR     | SILVA, T.     | 83072 | 1245  | 1526 | 161  | .16  |                 |                 |                |                | N            | CORPORATE        |
| FIN  | P    | 10/26/ 83 | CRUSHER OPERATOR     | SILVA, T.     |       |       |      |      |      | 0757            | 1526            | 449            | .15            | N            | CORPORATE        |
| FIN  | P    | 06/29/ 84 | CRUSHER OPERATOR     | SILVA, T.     | 0728  | 0828  | 1518 | 410  |      |                 |                 |                |                |              | PLANT            |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| DEPT | PER/ AREA | TEST DATE | JOB TITLE/AREA       | EMPLOYEE NAME | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START | TWA STOP | TWA MIN | TWA F/CC | RESP.     | SAMPLED BY |
|------|-----------|-----------|----------------------|---------------|----------|------------|-----------|-----------|-----------|-----------|----------|---------|----------|-----------|------------|
| FIN  | P         | 08/03/ 84 | CRUSHER OPERATOR     | SILVA, T.     | 728A     | 0805       | 1055      | 170       | .15       |           |          |         |          | S         | PLANT      |
| FIN  | P         | 10/31/ 84 | CRUSHER OPERATOR     | BEVINS, J     | 84074    | 0958       | 1509      | 311       | .17       | 0958      | 1509     | 311     | .17      | Y         | CORPORATE  |
| FIN  | P         | 06/19/ 85 | CRUSHER OPERATOR     | SILVA, T.     | 034      | 0829       | 1510      | 401       | .17       | 0829      | 1510     | 401     | .17      | S         | PLANT      |
| FIN  | A         | 11/ / 72  | FITTINGS ASSEM BENCH |               |          |            |           |           | .11       |           |          |         |          |           | TRAVELERS  |
| FIN  | P         | 09/21/ 76 | FITTINGS GLUER       |               |          |            |           |           | .23       |           |          |         |          |           | PLANT      |
| FIN  | P         | 03/24/ 81 | FITTINGS GLUER       | TAYLOR, B.    | 0314     | 0744       | 1055      | 191       | .12       |           |          |         |          | N         | PLANT      |
| FIN  | P         | 03/24/ 81 | FITTINGS GLUER       | TAYLOR, B.    | 0315     | 1132       | 1431      | 179       | .20       |           |          |         |          | N         | PLANT      |
| FIN  | P         | 03/24/ 81 | FITTINGS GLUER       | TAYLOR, B.    |          | 0744       | 1431      | 370       |           | .15       |          |         | N        | PLANT     |            |
| FIN  | P         | 05/26/ 82 | FITTINGS GLUER       | TAYLOR, B.    | 82022    | 0750       | 1155      | 245       | .05       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 05/26/ 82 | FITTINGS GLUER       | TAYLOR, B.    | 82023    | 1155       | 1457      | 182       | .04       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 05/26/ 82 | FITTINGS GLUER       | TAYLOR, B.    |          | 0750       | 1457      | 427       |           | .05       |          |         | N        | CORPORATE |            |
| FIN  | P         | 05/04/ 84 | FITTINGS GLUER       | ATENCIO, S.   |          | 0831       | 1507      | 414       | .03       | 0831      | 1507     | 414     | .03      | N         | PLANT      |
| FIN  | A         | 05/27/ 82 | FITTINGS GLUER BENCH |               | 82041    | 0738       | 1457      | 439       | .03       |           |          |         |          |           | CORPORATE  |
| FIN  | P         | 06/25/ 81 | FITTINGS MAKER       | HAMILTON, C.  | 0575     | 0950       | 1100      | 170       | .27       |           |          |         |          | Y         | PLANT      |
| FIN  | P         | 06/25/ 81 | FITTINGS MAKER       | HAMILTON, C   | 0567     | 1131       | 1441      | 190       | .12       |           |          |         |          | Y         | PLANT      |
| FIN  | P         | 06/25/ 81 | FITTINGS MAKER       | HAMILTON, C   |          | 0950       | 1441      | 260       |           | .16       |          |         | Y        | PLANT     |            |
| FIN  | P         | 12/15/ 81 | FITTINGS MAKER       | HAMILTON, C.  | 0620     | 0820       | 1515      | 415       | .04       | 0820      | 1515     | 415     | .04      | N         | PLANT      |
| FIN  | P         | 05/26/ 82 | FITTINGS MAKER       | HAMILTON, C.  | 82024    | 0829       | 1048      | 139       | .06       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 05/26/ 82 | FITTINGS MAKER       | HAMILTON, C.  | 82025    | 1155       | 1458      | 183       | .07       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 05/26/ 82 | FITTINGS MAKER       | HAMILTON, C.  |          | 0829       | 1458      | 322       |           | .07       |          |         | N        | CORPORATE |            |
| FIN  | P         | 04/06/ 83 | FITTINGS MAKER       | HAMILTON, C.  | 8361     | 0836       | 1503      | 387       | .02       | 0836      | 1503     | 387     | .02      | N         | PLANT      |
| FIN  | P         | 10/24/ 83 | FITTINGS MAKER       | HAMILTON, C   | 83061    | 0926       | 1141      | 135       | --        |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 10/24/ 83 | FITTINGS MAKER       | HAMILTON, C   | 83062    | 1141       | 1530      | 229       | --        |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 05/03/ 84 | FITTINGS MAKER       | HAMILTON, C.  |          | 0814       | 1507      | 413       | .07       | 0814      | 1507     | 413     | .07      | N         | PLANT      |
| FIN  | P         | 10/30/ 84 | FITTINGS MAKER       | HAMILTON, C   | 84066    | 0745       | 1028      | 163       | .09       |           |          |         |          | Y         | CORPORATE  |
| FIN  | P         | 10/30/ 84 | FITTINGS MAKER       | HAMILTON, C   | 84067    | 1028       | 1500      | 272       | .09       |           |          |         |          | Y         | CORPORATE  |
| FIN  | P         | 10/30/ 84 | FITTINGS MAKER       | HAMILTON, C   |          | 0745       | 1500      | 435       |           | .15       |          |         | Y        | CORPORATE |            |
| FIN  | P         | 12/20/ 85 | FITTINGS MAKER       | HAMILTON, C.  | 0640     | 0840       | 1440      | 360       | .09       | 0840      | 1440     | 360     | .09      | N         | PLANT      |
| FIN  | A         | 11/ / 72  | FM LATHE             |               |          |            |           |           | .06       |           |          |         |          |           | TRAVELERS  |
| FIN  | P         | 11/ / 72  | FM LATHE             |               |          |            |           |           | .11       |           |          |         |          |           | TRAVELERS  |
| FIN  | A         | 11/ / 72  | FM LATHE             |               |          |            |           |           | .00       |           |          |         |          |           | TRAVELERS  |
| FIN  |           | 04/ / 74  | FM LATHE             |               |          |            |           |           | .59       |           |          |         |          |           | PLANT      |
| FIN  |           | 01/ / 75  | FM LATHE             |               |          |            |           |           | .21       |           |          |         |          |           | PLANT      |
| FIN  |           | 11/12/ 75 | FM LATHE             |               |          |            |           |           | .30       |           |          |         |          |           | PLANT      |
| FIN  |           | 09/17/ 76 | FM LATHE #2          |               |          |            |           |           | .06       |           |          |         |          |           | PLANT      |
| FIN  | P         | 09/18/ 84 | FM LATHE OPERATOR    | GILBERT, A.   | 761      | 0849       | 1512      | 383       | .04       | 0849      | 1512     | 383     | .04      | N         | PLANT      |
| FIN  | P         | 05/26/ 82 | HYDROTESTER #1 OPERA | ALBERT, A.    | 82013    | 0802       | 1501      | 419       | .06       | 0802      | 1501     | 419     | .06      | N         | CORPORATE  |
| FIN  | P         | 03/25/ 83 | HYDROTESTER #1 OPERA | BEY, G.       | 8327     | 0816       | 1513      | 417       | .06       | 0816      | 1513     | 417     | .06      | N         | PLANT      |
| FIN  | P         | 10/17/ 83 | HYDROTESTER #1 OPERA | STEWART, R.   | 3113     | 0832       | 1440      | 368       | .04       | 0832      | 1440     | 368     | .04      | S         | PLANT      |
| FIN  | P         | 10/24/ 83 | HYDROTESTER #1 OPERA | BEY, G.       | 83042    | 0849       | 1100      | 131       | --        |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 10/24/ 83 | HYDROTESTER #1 OPERA | BEY, G.       | 83043    | 1125       | 1530      | 245       | .05       | 1125      | 1530     | 245     | .05      | N         | CORPORATE  |
| FIN  | P         | 10/30/ 84 | HYDROTESTER #1 OPERA | BEY, G        | 84046    | 0738       | 1033      | 175       | .04       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 10/30/ 84 | HYDROTESTER #1 OPERA | BEY, G        | 84047    | 1033       | 1507      | 274       | .04       |           |          |         |          | N         | CORPORATE  |
| FIN  | P         | 10/30/ 84 | HYDROTESTER #1 OPERA | BEY, G        |          | 0738       | 1507      | 449       |           | .07       |          |         | N        | CORPORATE |            |
| FIN  | P         | 07/02/ 85 | HYDROTESTER #1 OPERA | BEY, G.       | 043      | 0825       | 1437      | 372       | .07       | 0825      | 1437     | 372     | .07      | N         | PLANT      |
| FIN  |           | 06/01/ 77 | HYDROTESTER #2       |               |          |            |           |           | .32       |           |          |         |          |           | PLANT      |
| FIN  | P         | 03/31/ 83 | HYDROTESTER #2 OPERA | STEWART, R.   | 8347     | 0824       | 1510      | 406       | .09       | 0824      | 1510     | 406     | .09      | N         | PLANT      |
| FIN  | P         | 06/13/ 85 | HYDROTESTER #2 OPERA | STEWART, R.   | 029      | 0829       | 1445      | 376       | .07       | 0829      | 1445     | 376     | .07      | N         | PLANT      |
| FIN  |           | 06/29/ 76 | HYDROTESTER #3       |               |          |            |           |           | .50       |           |          |         |          |           | PLANT      |
| FIN  | P         | 03/25/ 81 | HYDROTESTER OPERATOR | CAMPBELL, J.  | 0316     | 0732       | 1032      | 180       | .21       |           |          |         |          | N         | PLANT      |
| FIN  | P         | 03/25/ 81 | HYDROTESTER OPERATOR | CAMPBELL, J.  | 0317     | 1032       | 1330      | 178       | .16       |           |          |         |          | N         | PLANT      |

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| PER/ | TEST |           |                      |               | SAMP  | SAMP  | SAMP | SAMP | TWA  | TWA   | TWA  | TWA |      |       | SAMPLED   |
|------|------|-----------|----------------------|---------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| FIN  | P    | 03/25/ 81 | HYDROTESTER OPERATOR | CAMPBELL, J.  |       |       |      |      |      | 0732  | 1330 | 268 | .18  | N     | PLANT     |
| FIN  | P    | 11/25/ 81 | HYDROTESTER OPERATOR | GILLELAND, M. | 0597  | 0807  | 1246 | 279  | .10  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/25/ 81 | HYDROTESTER OPERATOR | GILLELAND, M. | 0593  | 1216  | 1520 | 154  | .30  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/25/ 81 | HYDROTESTER OPERATOR | GILLELAND, M. |       |       |      |      |      | 0807  | 1520 | 433 | .17  | N     | PLANT     |
| FIN  | P    | 04/14/ 82 | HYDROTESTER OPERATOR | STEWART, R.   | 0653  | 0817  | 1441 | 384  | .09  | 0817  | 1441 | 384 | .09  | N     | PLANT     |
| FIN  | P    | 05/03/ 84 | HYDROTESTER OPERATOR | STEWART, R.   |       | 0802  | 1507 | 425  | .04  | 0802  | 1507 | 425 | .04  | N     | PLANT     |
| FIN  | P    | 07/02/ 85 | INSPECTOR            | GARCIA, M.    | 0621  | 0759  | 1429 | 390  | .08  | 0759  | 1429 | 390 | .08  | N     | PLANT     |
| FIN  | P    | 03/24/ 81 | INSPECTOR            | GRANILLO, B.  | 0312  | 0734  | 1056 | 202  | .09  |       |      |     |      | S     | PLANT     |
| FIN  | P    | 03/24/ 81 | INSPECTOR            | GRANILLO, B.  | 0313  | 1137  | 1432 | 175  | .07  |       |      |     |      | S     | PLANT     |
| FIN  | P    | 03/24/ 81 | INSPECTOR            | GRANILLO, B.  |       |       |      |      |      | 0734  | 1432 | 377 | .08  | S     | PLANT     |
| FIN  | P    | 12/03/ 81 | INSPECTOR            | GRANILLO, B.  | 0608  | 0840  | 1507 | 387  | .06  | 0840  | 1507 | 387 | .06  | S     | PLANT     |
| FIN  | P    | 04/02/ 82 | INSPECTOR            | GARCIA, M.    | 0646  | 0755  | 1434 | 399  | .11  | 0755  | 1434 | 399 | .11  | N     | PLANT     |
| FIN  | P    | 05/27/ 82 | INSPECTOR            | GRANILLO, B.  | 82015 | 0729  | 1500 | 451  | .17  | 0729  | 1500 | 451 | .17  | N     | CORPORATE |
| FIN  | P    | 03/24/ 83 | INSPECTOR            | WILSON, C.    | 8321  | 0800  | 1506 | 426  | .12  | 0800  | 1506 | 426 | .12  | N     | PLANT     |
| FIN  | P    | 03/25/ 83 | INSPECTOR            | GOODWIN, L.   | 8329  | 0824  | 1505 | 401  | .06  | 0824  | 1505 | 401 | .06  | N     | PLANT     |
| FIN  | P    | 03/31/ 83 | INSPECTOR            | GARCIA, M.    | 8349  | 0818  | 1500 | 402  | .07  | 0818  | 1500 | 402 | .07  | N     | PLANT     |
| FIN  | P    | 04/06/ 83 | INSPECTOR            | GRANILLO, B.  | 8360  | 0830  | 1506 | 396  | .05  | 0830  | 1506 | 396 | .05  | N     | PLANT     |
| FIN  | P    | 10/13/ 83 | INSPECTOR            | WILSON, C.    | 3100  | 0827  | 1516 | 409  | .04  | 0827  | 1516 | 409 | .04  | N     | PLANT     |
| FIN  | P    | 10/14/ 83 | INSPECTOR            | GOODWIN, L.   | 3108  | 0814  | 1514 | 420  | .04  | 0814  | 1514 | 420 | .04  | N     | PLANT     |
| FIN  | P    | 10/21/ 83 | INSPECTOR            | GRANILLO, B.  | 3132  | 0835  | 1531 | 416  | .03  | 0835  | 1531 | 416 | .03  | S     | PLANT     |
| FIN  | P    | 06/29/ 84 | INSPECTOR            | GARCIA, M.    | 0729  | 0825  | 1506 | 441  | .04  | 0825  | 1506 | 441 | .04  | N     | PLANT     |
| FIN  | P    | 10/30/ 84 | INSPECTOR            | WILSON, C.    | 84050 | 0721  | 1040 | 191  | .06  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | INSPECTOR            | WILSON, C.    | 84051 | 1040  | 1505 | 265  | .07  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | INSPECTOR            | WILSON, C.    |       |       |      |      |      | 0721  | 1505 | 456 | .07  | N     | CORPORATE |
| FIN  | P    | 10/17/ 83 | INSPECTOR #1         | CORRAL, R.    | 3112  | 0831  | 1439 | 368  | .07  | 0831  | 1439 | 368 | .07  | N     | PLANT     |
| FIN  | P    | 11/20/ 81 | INSPECTOR #3         | GOODWIN, L.   | 0585  | 0805  | 1522 | 417  | .07  | 0805  | 1522 | 417 | .07  | N     | PLANT     |
| FIN  | P    | 11/13/ 75 | KING MILL OPERATOR   | GRANILLO, B.  |       |       |      |      | .45  |       |      |     |      |       | PLANT     |
| FIN  |      | 11/13/ 75 | KING MILL            |               |       |       |      |      | .45  |       |      |     |      |       | PLANT     |
| FIN  | A    | 01/23/ 76 | KING MILL            |               |       |       |      |      | 2.09 |       |      |     |      |       | PLANT     |
| FIN  | A    | 01/23/ 76 | KING MILL            |               |       |       |      |      | 2.01 |       |      |     |      |       | PLANT     |
| FIN  | A    | 04/01/ 76 | KING MILL            |               |       |       |      |      | .00  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/17/ 77 | KING MILL</          |               |       |       |      |      |      |       |      |     |      |       |           |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST        | JOB TITLE/AREA           | EMPLOYEE NAME | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START | TWA STOP | TWA MIN | TWA F/CC | RESP. | SAMPLED BY  |
|------|-------------|--------------------------|---------------|----------|------------|-----------|-----------|-----------|-----------|----------|---------|----------|-------|-------------|
| FIN  | 02/ / 75    | LATHE #1                 |               |          |            |           |           | .52       |           |          |         |          |       | PLANT       |
| FIN  | 02/ / 75    | LATHE #1                 |               |          |            |           |           | .34       |           |          |         |          |       | PLANT       |
| FIN  | P 02/13/ 75 | LATHE #1 <i>operator</i> | LESIEUR, R.   |          |            |           | 65        | .52       |           |          |         |          |       | PLANT       |
| FIN  | 05/26/ 77   | LATHE #1                 |               |          |            |           |           | .19       |           |          |         |          |       | PLANT       |
| FIN  | P 03/30/ 81 | LATHE #1 OPERATOR        | THOMPkins, E. | 0326     | 0942       | 1344      | 242       | .05       |           |          |         |          | N     | PLANT       |
| FIN  | P 03/30/ 81 | LATHE #1 OPERATOR        | THOMPkins, E. | 0327     | 1344       | 1523      | 159       | .08       |           |          |         |          | N     | PLANT       |
| FIN  | P 03/30/ 81 | LATHE #1 OPERATOR        | THOMPkins, E. |          | 0942       | 1523      | 401       |           | .06       |          |         |          | N     | PLANT       |
| FIN  | P 12/07/ 81 | LATHE #1 OPERATOR        | ALLEN, M      | 0613     | 0758       | 1203      | 245       | .05       |           |          |         |          | N     | PLANT       |
| FIN  | P 12/07/ 81 | LATHE #1 OPERATOR        | ALLEN, M      | 0615     | 1203       | 1503      | 180       | .05       |           |          |         |          | N     | PLANT       |
| FIN  | P 12/07/ 81 | LATHE #1 OPERATOR        | ALLEN, M      |          | 0758       | 1503      | 425       |           | .05       |          |         |          | N     | PLANT       |
| FIN  | P 05/26/ 82 | LATHE #1 OPERATOR        | PASILLAS, D.  | 82011    | 0807       | 1506      | 419       | .07       | 0807      | 1506     | 419     |          | .07   | N CORPORATE |
| FIN  | P 03/25/ 83 | LATHE #1 OPERATOR        | PASILLAS, D.  | 8326     | 0814       | 1512      | 418       | .00       | 0814      | 1512     | 418     |          | .00   | N PLANT     |
| FIN  | P 10/17/ 83 | LATHE #1 OPERATOR        | EVANS, G.     | 3117     | 0828       | 1437      | 369       | .05       | 0828      | 1437     | 369     |          | .05   | Y PLANT     |
| FIN  | P 10/24/ 83 | LATHE #1 OPERATOR        | ATENCIO, S.   | 83040    | 0840       | 1132      | 172       | --        |           |          |         |          |       | N CORPORATE |
| FIN  | P 10/24/ 83 | LATHE #1 OPERATOR        | ATENCIO, S.   | 83041    | 1123       | 1528      | 236       | .06       |           |          |         |          |       | N CORPORATE |
| FIN  | P 05/03/ 84 | LATHE #1 OPERATOR        | EVANS, G.     |          | 0806       | 1507      | 421       | .04       | 0806      | 1507     | 421     |          | .04   | N PLANT     |
| FIN  | P 10/30/ 84 | LATHE #1 OPERATOR        | COOPER, H     | 84042    | 0734       | 1134      | 240       | .01       |           |          |         |          |       | N CORPORATE |
| FIN  | P 10/30/ 84 | LATHE #1 OPERATOR        | COOPER, H     | 84043    | 1134       | 1507      | 213       | .06       |           |          |         |          |       | N CORPORATE |
| FIN  | P 10/30/ 84 | LATHE #1 OPERATOR        | COOPER, H     |          | 0734       | 1507      | 453       |           |           |          |         |          |       | N CORPORATE |
| FIN  | P 06/06/ 85 | LATHE #1 OPERATOR        | GOODER, H.    | 017      | 0831       | 1437      | 366       | .12       | 0831      | 1437     | 366     |          | .12   | Y PLANT     |
| FIN  | A 11/ / 72  | LATHE #2                 |               |          |            |           |           | .08       |           |          |         |          |       | TRAVELERS   |
| FIN  | A 11/ / 72  | LATHE #2                 |               |          |            |           |           | .05       |           |          |         |          |       | TRAVELERS   |
| FIN  | A 11/ / 72  | LATHE #2                 |               |          |            |           |           | .13       |           |          |         |          |       | TRAVELERS   |
| FIN  | A 11/ / 72  | LATHE #2                 |               |          |            |           |           | .00       |           |          |         |          |       | TRAVELERS   |
| FIN  | 04/07/ 76   | LATHE #2                 |               |          |            |           |           | .42       |           |          |         |          |       | PLANT       |
| FIN  | P 03/25/ 80 | LATHE #2 <i>operator</i> | PASILLAS      |          |            |           |           | .17       |           |          |         |          |       | PLANT       |
| FIN  | P 11/ / 72  | LATHE #2 OPERATOR        |               |          |            |           |           | .03       |           |          |         |          |       | TRAVELERS   |
| FIN  | P 05/06/ 82 | LATHE #2 OPERATOR        | EVANS, G.     | 0669     | 0810       | 1430      | 380       | .18       | 0810      | 1430     | 380     |          | .18   | S PLANT     |
| FIN  | P 03/31/ 83 | LATHE #2 OPERATOR        | EVANS, G.     | 8345     | 0820       | 1505      | 405       | .10       | 0820      | 1505     | 405     |          | .10   | N PLANT     |
| FIN  | P 06/13/ 85 | LATHE #2 OPERATOR        | AMARO, R.     | 028      | 0831       | 1446      | 375       | .08       | 0831      | 1446     | 375     |          | .08   | N PLANT     |
| FIN  | 04/ / 74    | LATHE #3                 |               |          |            |           |           | .34       |           |          |         |          |       | PLANT       |
| FIN  | 09/09/ 76   | LATHE #3                 |               |          |            |           |           | .31       |           |          |         |          |       | PLANT       |
| FIN  | 07/18/ 79   | LATHE #3                 |               |          |            |           |           | .24       |           |          |         |          |       | PLANT       |
| FIN  | P 04/06/ 81 | LATHE #3 OPERATOR        | PASILLAS, D.  | 0342     | 0750       | 1100      | 190       | .12       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/06/ 81 | LATHE #3 OPERATOR        | PASILLAS, D.  | 0343     | 1130       | 1450      | 200       | .15       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/06/ 81 | LATHE #3 OPERATOR        | PASILLAS, D.  |          | 0750       | 1450      | 390       |           | .14       |          |         |          |       | N PLANT     |
| FIN  | P 04/24/ 81 | LATHE #3 OPERATOR        | ALLEN, M.     | 0558     | 0805       | 1158      | 233       | .15       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/24/ 81 | LATHE #3 OPERATOR        | ALLEN, M.     | 0556     | 1158       | 1502      | 180       | .12       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/24/ 81 | LATHE #3 OPERATOR        | ALLEN, M.     |          | 0805       | 1502      | 413       |           | .14       |          |         |          |       | N PLANT     |
| FIN  | P 04/14/ 82 | LATHE #3 OPERATOR        | PASILLAS, D.  | 0651     | 0819       | 1442      | 383       | .11       | 0819      | 1442     | 383     |          | .11   | N PLANT     |
| FIN  | A 08/15/ 73 | <del>REMOVED</del>       |               |          |            |           |           | .35       |           |          |         |          |       | TRAVELERS   |
| FIN  | P 04/02/ 81 | PIPE HANDLER             | ALLEN, M.     | 0334     | 0741       | 1048      | 187       | .40       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/02/ 81 | PIPE HANDLER             | ALLEN, M.     | 0335     | 1048       | 1448      | 240       | .20       |           |          |         |          |       | N PLANT     |
| FIN  | P 04/02/ 81 | PIPE HANDLER             | ALLEN, M.     |          | 0741       | 1448      | 427       |           | .29       |          |         |          |       | N PLANT     |
| FIN  | P 11/19/ 81 | PIPE HANDLER             | DOBBS, P      | 00584    | 0812       | 1520      | 428       | .07       | 0812      | 1520     | 428     |          | .07   | N PLANT     |
| FIN  | P 11/19/ 81 | PIPE HANDLER             | IVERT, ALBERT | 0583     | 0805       | 1520      | 435       | .11       | 0805      | 1520     | 435     |          | .11   | N PLANT     |
| FIN  | P 04/14/ 82 | PIPE HANDLER             | ASKEN, W.     | 0652     | 0821       | 1443      | 382       | .11       | 0821      | 1443     | 382     |          | .11   | N PLANT     |
| FIN  | P 04/20/ 82 | PIPE HANDLER             | SUAREZ, A.L.  | 0665     | 0822       | 1446      | 384       | .13       | 0822      | 1446     | 384     |          | .13   | N PLANT     |
| FIN  | P 03/30/ 83 | PIPE HANDLER             | ALLEN, M.     | 8342     | 0825       | 1520      | 415       | .10       | 0825      | 1520     | 415     |          | .10   | N PLANT     |
| FIN  | P 03/30/ 83 | PIPE HANDLER             | BROOKS, E.    | 8341     | 0834       | 1512      | 398       | .07       | 0834      | 1512     | 398     |          | .07   | N PLANT     |
| FIN  | P 04/05/ 83 | PIPE HANDLER             | ASKEN, W.     | 8352     | 0808       | 1520      | 432       | .06       | 0808      | 1520     | 432     |          | .06   | N PLANT     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                    |                 | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|--------------------|-----------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA     | EMPLOYEE NAME   | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| FIN  | P    | 04/12/ 83 | PIPE HANDLER       | PALOMERA, G.    | 8375  | 0810  | 1511 | 421  | .08  | 0810  | 1511 | 421 | .08  | N     | PLANT     |
| FIN  | P    | 10/12/ 83 | PIPE HANDLER       | AVERY, ALBERT   | 8397  | 0920  | 1500 | 340  | .09  | 0920  | 1500 | 340 | .09  | N     | PLANT     |
| FIN  | P    | 10/13/ 83 | PIPE HANDLER       | GILMORE, R.     | 3101  | 0826  | 1528 | 422  | .06  | 0826  | 1528 | 422 | .06  | N     | PLANT     |
| FIN  | P    | 10/20/ 83 | PIPE HANDLER       | ZARAGOZA, R.    | 3128  | 0812  | 1525 | 433  | .05  | 0812  | 1525 | 433 | .05  | N     | PLANT     |
| FIN  | P    | 04/25/ 84 | PIPE HANDLER #12   | SUAREZ, A.      |       | 0806  | 1456 | 410  | .07  | 0806  | 1456 | 410 | .07  | N     | PLANT     |
| FIN  | P    | 04/25/ 84 | PIPE HANDLER #12   | AMARO, R.       |       | 0807  | 1456 | 409  | .04  | 0807  | 1456 | 409 | .04  | N     | PLANT     |
| FIN  | P    | 06/27/ 84 | PIPE HANDLER #2    | AVERY, A.       | 0724  | 0820  | 1451 | 391  | .09  | 0820  | 1451 | 391 | .09  | N     | PLANT     |
| FIN  | P    | 05/26/ 82 | PIPE HANDLER #1    | AMARO, R.       | 82014 | 0805  | 1500 | 415  | .04  | 0805  | 1500 | 415 | .04  | N     | CORPORATE |
| FIN  | P    | 03/22/ 83 | PIPE HANDLER #1    | BUTTS, J.       | 8312  | 0810  | 1515 | 425  | .11  | 0810  | 1515 | 425 | .11  | N     | PLANT     |
| FIN  | P    | 10/17/ 83 | PIPE HANDLER #1    | ASKEW, W.       | 3114  | 0833  | 1441 | 368  | .09  | 0833  | 1441 | 368 | .09  | N     | PLANT     |
| FIN  | P    | 10/24/ 83 | PIPE HANDLER #1    | SUAREZ, A.      | 83044 | 0854  | 1100 | 126  | --   |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | PIPE HANDLER #1    | SUAREZ, A.      | 83045 | 1136  | 1530 | 234  | .05  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | PIPE HANDLER #1    | AMARO, R.       | 83046 | 0856  | 1133 | 157  | --   |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | PIPE HANDLER #1    | AMARO, R.       | 83047 | 1133  | 1522 | 229  | .06  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | PIPE HANDLER #1    | ZARAGOZA, R.    | 84048 | 0718  | 1029 | 191  | .09  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | PIPE HANDLER #1    | ZARAGOZA, R.    | 84049 | 1029  | 1509 | 280  | .09  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | PIPE HANDLER #1    | ZARAGOZA, R.    |       |       |      |      |      | 0718  | 1509 | 471 | .09  | N     | CORPORATE |
| FIN  | P    | 03/31/ 82 | PIPE HANDLER #2    | VILLALPANDO, A. | 0642  | 0753  | 1422 | 389  | .11  | 0753  | 1422 | 389 | .11  | N     | PLANT     |
| FIN  | P    | 06/27/ 84 | PIPE HANDLER #2    | ASKEW, W.       | 0720  | 0818  | 1448 | 390  | .07  | 0818  | 1448 | 390 | .07  |       | PLANT     |
| FIN  | P    | 06/07/ 85 | PIPE HANDLER #2    | ZARAGOZA, P.    | 018   | 0824  | 1525 | 421  | .06  | 0824  | 1525 | 421 | .06  | N     | PLANT     |
| FIN  | P    | 06/12/ 85 | PIPE HANDLER #2    | ASKEW, W.       | 021   | 0846  | 1500 | 374  | .05  | 0846  | 1500 | 374 | .05  | N     | PLANT     |
| FIN  | P    | 06/13/ 85 | PIPE HANDLER #2    | AVERY, A.       | 026   | 0834  | 1449 | 375  | .07  | 0834  | 1449 | 375 | .07  | N     | PLANT     |
| FIN  | P    | 04/06/ 81 | PIPE HANDLER #3    | DOBBS, P.       | 0340  | 0756  | 1143 | 227  | .24  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/06/ 81 | PIPE HANDLER #3    | DOBBS, P.       | 0341  | 1143  | 1455 | 192  | .21  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/06/ 81 | PIPE HANDLER #3    | DOBBS, P.       |       | 0756  | 1455 | 419  | .23  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 03/23/ 83 | PIPE HANDLER #3    | BIVENS, J.      | 8316  | 0815  | 1518 | 423  | .11  | 0815  | 1518 | 423 | .11  | N     | PLANT     |
| FIN  | P    | 03/24/ 83 | PIPE HANDLER #3    | SUAREZ, A.      | 8322  | 0807  | 1507 | 420  | .08  | 0807  | 1507 | 420 | .08  | N     | PLANT     |
| FIN  | P    | 04/11/ 83 | PIPE HANDLER #3    | AMARO, R.       | 8373  | 0813  | 1445 | 392  | .09  | 0813  | 1445 | 392 | .09  | N     | PLANT     |
| FIN  | A    | 11/ / 72  | PIPE HANDLER AREA  |                 |       |       |      |      | .10  |       |      |     |      |       | TRAVELERS |
| FIN  | P    | 03/23/ 83 | PLASTIC CPLG MAKER | BOYD, D.        | 8317  | 0820  | 1515 | 415  | .05  | 0820  | 1515 | 415 | .05  | N     | PLANT     |
| FIN  | P    | 10/12/ 83 | PLASTIC CPLG MAKER | BOYD, D.        | 8395  | 0912  | 1459 | 347  | .03  | 0912  | 1459 | 347 | .03  | N     | PLANT     |
| FIN  | P    | 10/24/ 83 | PLASTIC CPLG MAKER | GIL, L.         | 83067 | 0924  | 1123 | 128  | --   |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/24/ 83 | PLASTIC CPLG MAKER | GIL, L.         | 83068 | 1132  | 1532 | 240  | .03  | 1132  | 1532 | 240 | .03  | N     | CORPORATE |
| FIN  | P    | 10/31/ 84 | PLASTIC CPLG MAKER | MORGAN, J       | 84070 | 0706  | 1033 | 207  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/31/ 84 | PLASTIC CPLG MAKER | MORGAN, J       | 84071 | 1033  | 1503 | 270  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/31/ 84 | PLASTIC CPLG MAKER | MORGAN, J       |       | 0706  | 1503 | 477  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 06/12/ 85 | PRESS OPERATOR     | CASAS, J.       | 023   | 0837  | 1445 | 368  | .05  | 0837  | 1445 | 368 | .05  | N     | PLANT     |
| FIN  | A    | 11/ / 72  | REWORK SAW         |                 |       |       |      |      | .18  |       |      |     |      |       | TRAVELERS |
| FIN  |      | 04/ / 74  | REWORK SAW         |                 |       |       |      |      | 1.27 |       |      |     |      |       | PLANT     |
| FIN  |      | 01/ / 75  | REWORK SAW         |                 |       |       |      |      | .46  |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/29/ 75 | REWORK SAW         |                 |       |       | 60   |      | .46  |       |      |     |      | Y     | PLANT     |
| FIN  |      | 08/01/ 75 | REWORK SAW         |                 |       |       |      |      | .57  |       |      |     |      |       | PLANT     |
| FIN  |      | 11/13/ 75 | REWORK SAW         |                 |       |       |      |      | .76  |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/23/ 76 | REWORK SAW         | ATENCIO, S.     |       |       |      |      | 1.09 |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/23/ 76 | REWORK SAW         | ATENCIO         |       |       |      |      | 1.08 |       |      |     |      |       | PLANT     |
| FIN  | P    | 01/29/ 76 | REWORK SAW         | ATENCIO         |       |       |      |      | 1.06 |       |      |     |      |       | PLANT     |
| FIN  |      | 07/09/ 76 | REWORK SAW         |                 |       |       |      |      | .38  |       |      |     |      |       | PLANT     |
| FIN  |      | 07/19/ 76 | REWORK SAW         |                 |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/24/ 78 | REWORK SAW         |                 |       |       |      |      | .21  |       |      |     |      |       | PLANT     |
| FIN  |      | 01/24/ 78 | REWORK SAW         |                 |       |       |      |      | .22  |       |      |     |      |       | PLANT     |
| FIN  |      | 02/02/ 78 | REWORK SAW         |                 |       |       |      |      | .15  |       |      |     |      |       | PLANT     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                            |                | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|----------------------------|----------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA             | EMPLOYEE NAME  | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| FIN  |      | 02/03/ 78 | REWORK SAW                 |                |       |       |      |      | .32  |       |      |     |      |       | PLANT     |
| FIN  |      | 02/06/ 78 | REWORK SAW                 |                |       |       |      |      | .14  |       |      |     |      |       | PLANT     |
| FIN  |      | 06/27/ 78 | REWORK SAW                 |                |       |       |      |      | .29  |       |      |     |      |       | PLANT     |
| FIN  |      | 10/26/ 78 | REWORK SAW                 |                |       |       |      |      | .23  |       |      |     |      |       | PLANT     |
| FIN  |      | 10/26/ 78 | REWORK SAW                 |                |       |       |      |      | .24  |       |      |     |      |       | PLANT     |
| FIN  |      | 03/20/ 79 | REWORK SAW                 |                |       |       |      |      | .17  |       |      |     |      |       | PLANT     |
| FIN  | P    | 07/18/ 79 | REWORK SAW <i>operator</i> |                |       |       |      |      | .22  |       |      |     |      |       | PLANT     |
| FIN  |      | 07/09/ 76 | REWORK SAW #1              |                |       |       |      |      | .38  |       |      |     |      |       | PLANT     |
| FIN  |      | 07/19/ 76 | REWORK SAW #1              |                |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| FIN  |      | 05/24/ 77 | REWORK SAW #1              |                |       |       |      |      | .45  |       |      |     |      |       | PLANT     |
| FIN  |      | 06/08/ 77 | REWORK SAW #2              |                |       |       |      |      | .97  |       |      |     |      |       | PLANT     |
| FIN  | A    | 05/27/ 82 | REWORK SAW #2 AREA         |                | 82042 | 0716  | 1434 | 438  | .01  |       |      |     |      |       | CORPORATE |
| FIN  | A    | 11/ / 72  | REWORK SAW AREA            |                |       |       |      |      | .07  |       |      |     |      |       | TRAVELERS |
| FIN  | P    | 11/ / 72  | REWORK SAW OPERATOR        |                |       |       |      |      | .02  |       |      |     |      |       | TRAVELERS |
| FIN  | P    | 11/18/ 81 | SAW #1 OPERATOR            | AMARO, RICHARD | 0576  | 0836  | 1236 | 240  | .20  |       |      |     |      | Y     | PLANT     |
| FIN  | P    | 11/18/ 81 | SAW #1 OPERATOR            | AMARO, RICHARD | 0579  | 1236  | 1508 | 152  | .20  |       |      |     |      | Y     | PLANT     |
| FIN  | P    | 11/18/ 81 | SAW #1 OPERATOR            | AMARO, RICHARD |       |       |      |      |      | 0836  | 1508 | 392 | .20  | Y     | PLANT     |
| FIN  | P    | 10/24/ 83 | SAW #1 OPERATOR            | CLAUSON, J.    | 83052 | 0915  | 1100 | 105  | ---  |       |      |     |      | Y     | CORPORATE |
| FIN  | P    | 10/24/ 83 | SAW #1 OPERATOR            | CLAUSON, J.    | 83053 | 1135  | 1525 | 230  | .08  |       |      |     |      | Y     | CORPORATE |
| FIN  | P    | 04/26/ 84 | SAW #1 OPERATOR            | CLAUSON, J.    |       | 0758  | 1456 | 418  | .08  | 0758  | 1456 | 418 | .08  | N     | PLANT     |
| FIN  | P    | 10/30/ 84 | SAW #1 OPERATOR            | CLAUSAN, J.    | 84054 | 0700  | 1024 | 204  | .16  |       |      |     |      | Y     | CORPORATE |
| FIN  | P    | 10/30/ 84 | SAW #1 OPERATOR            | CLAUSAN, J.    | 84055 | 1024  | 1501 | 277  | .15  |       |      |     |      | Y     | CORPORATE |
| FIN  | P    | 10/30/ 84 | SAW #1 OPERATOR            | CLAUSAN, J.    |       |       |      |      |      | 0700  | 1501 | 481 | .15  | Y     | CORPORATE |
| FIN  | P    | 06/06/ 85 | SAW #1 OPERATOR            | CLAUSON, J.    | 015   | 0836  | 1445 | 369  | .05  | 0836  | 1445 | 369 | .05  | Y     | PLANT     |
| FIN  | P    | 06/20/ 85 | SAW #1 OPERATOR            | DIMAGGIO, G.   | 037   | 0833  | 1515 | 442  | .08  | 0833  | 1515 | 442 | .08  | Y     | PLANT     |
| FIN  | P    | 10/27/ 85 | SAW #2 OPERATOR            | CLAUSON, J.    | 83054 | 1347  | 1452 | 185  | .15  | 1347  | 1452 | 185 | .15  | Y     | CORPORATE |
| FIN  | P    | 04/01/ 81 | SAW OPERATOR               | SUAREZ, A.     | 0330  | 0845  | 1132 | 167  | .15  |       |      |     |      | Y     | PLANT     |
| FIN  | P    | 04/01/ 81 | SAW OPERATOR               | SUAREZ, A.     | 0331  | 1132  | 1500 | 208  | .18  |       |      |     |      | Y     | PLANT     |
| FIN  | P    | 04/01/ 81 | SAW OPERATOR               | SUAREZ, A.     |       |       |      |      |      | 0845  | 1500 | 375 | .16  | Y     | PLANT     |
| FIN  | P    | 03/22/ 83 | SAW OPERATOR               | CLAUSEN, J.    | 8311  | 0805  | 1514 | 429  | .12  | 0805  | 1514 | 429 | .12  | Y     | PLANT     |
| FIN  | P    | 10/14/ 83 | SAW OPERATOR               | BRYANT, B.     | 3106  | 0812  | 1511 | 410  | .12  | 0812  | 1511 | 410 | .12  | Y     | PLANT     |
| FIN  | P    | 06/27/ 84 | SAW OPERATOR               | BRYANT, B.     | 0721  | 0824  | 1451 | 387  | .10  | 0824  | 1451 | 387 | .10  | Y     | PLANT     |
| FIN  | P    | 08/28/ 84 | SAW OPERATOR               | LOLIE, K.U.    | 763   | 0812  | 1448 | 396  | .07  | 0812  | 1448 | 396 | .07  | Y     | PLANT     |
| FIN  | P    | 06/12/ 85 | SAW OPERATOR               | ATENCIO, S.    | 022   | 0844  | 1502 | 378  | .06  | 0844  | 1502 | 378 | .06  | Y     | PLANT     |
| FIN  | P    | 12/17/ 81 | SUPERVISOR                 | [REDACTED]     | 0624  | 0819  | 1451 | 393  | .02  | 0819  | 1451 | 393 | .02  | N     | PLANT     |
| FIN  | P    | 05/27/ 82 | SUPERVISOR                 | SCHIELKE, R.   | 82016 | 0725  | 1500 | 455  | .004 | 0725  | 1500 | 455 | .004 | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | SUPERVISOR                 | PRICE, L       | 84075 | 0708  | 1038 | 210  | .02  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | SUPERVISOR                 | PRICE, L       | 84076 | 1038  | 1346 | 188  | .03  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 10/30/ 84 | SUPERVISOR                 | PRICE, L       |       |       |      |      |      | 0708  | 1346 | 398 | .02  | N     | CORPORATE |
| FIN  | P    | 07/02/ 85 | TRUCK OPERATOR - FIT       | SANDERS        | 041   | 0831  | 1441 | 370  | .04  | 0831  | 1441 | 370 | .04  | N     | PLANT     |
| FIN  | P    | 04/07/ 81 | TRUCK OPERATOR             | STANFIELD, R.  | 0346  | 0724  | 1139 | 255  | .08  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/07/ 81 | TRUCK OPERATOR             | STANFIELD, R.  | 0347  | 1139  | 1452 | 193  | .08  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 04/07/ 81 | TRUCK OPERATOR             | STANFIELD, R.  |       |       |      |      |      | 0724  | 1452 | 448 | .08  | N     | PLANT     |
| FIN  | P    | 11/18/ 81 | TRUCK OPERATOR             | SANDERS, ANZY  | 0577  | 0845  | 1240 | 235  | .07  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/18/ 81 | TRUCK OPERATOR             | SANDERS, ANZY  | 0580  | 1240  | 1510 | 150  | .10  |       |      |     |      | N     | PLANT     |
| FIN  | P    | 11/18/ 81 | TRUCK OPERATOR             | SANDERS, ANZY  |       |       |      |      |      | 0845  | 1510 | 385 | .08  | N     | PLANT     |
| FIN  | P    | 11/19/ 81 | TRUCK OPERATOR             | STANFIELD, R.  | 0582  | 0800  | 1100 | 180  | .09  | 0800  | 1100 | 180 | .09  | N     | PLANT     |
| FIN  | P    | 04/07/ 82 | TRUCK OPERATOR             | STANFIELD, R.  | 0648  | 0800  | 1457 | 417  | .13  | 0800  | 1457 | 417 | .13  | N     | PLANT     |
| FIN  | P    | 05/26/ 82 | TRUCK OPERATOR             | SANDERS, A.    | 82029 | 0738  | 1152 | 252  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 05/26/ 82 | TRUCK OPERATOR             | SANDERS, A.    | 82030 | 1152  | 1456 | 184  | .01  |       |      |     |      | N     | CORPORATE |
| FIN  | P    | 05/26/ 82 | TRUCK OPERATOR             | SANDERS, A.    |       |       |      |      |      | 0738  | 1456 | 436 | .01  | N     | CORPORATE |

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RIVERSIDE A/C PIPE PLANT  
 1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                 |                 |          |            |           |           |           |           |          |         |          |       |            |
|------|------|-----------|-----------------|-----------------|----------|------------|-----------|-----------|-----------|-----------|----------|---------|----------|-------|------------|
| DEPT | AREA | DATE      | JOB TITLE/AREA  | EMPLOYEE NAME   | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START | TWA STOP | TWA MIN | TWA F/CC | RESP. | SAMPLED BY |
| FIN  | P    | 03/30/ 83 | TRUCK OPERATOR  | GALVIN, D.      | 8343     | 0832       | 1520      | 408       | .10       | 0832      | 1520     | 408     | .10      | N     | PLANT      |
| FIN  | P    | 04/05/ 83 | TRUCK OPERATOR  | SANDERS, A.     | 8353     | 0810       | 1522      | 432       | .01       | 0810      | 1522     | 432     | .01      | N     | PLANT      |
| FIN  | P    | 04/11/ 83 | TRUCK OPERATOR  | STANFIELD, R.   | 8372     | 0810       | 1210      | 240       | .04       | 0810      | 1210     | 240     | .04      | N     | PLANT      |
| FIN  | P    | 04/20/ 83 | TRUCK OPERATOR  | STANFIELD, R.   | 8378     | 0819       | 1454      | 395       | .03       | 0819      | 1454     | 395     | .03      | N     | PLANT      |
| FIN  | P    | 10/14/ 83 | TRUCK OPERATOR  | GALVIN, D.      | 3118     | 0815       | 1522      | 427       | .06       | 0815      | 1522     | 427     | .06      | N     | PLANT      |
| FIN  | P    | 10/20/ 83 | TRUCK OPERATOR  | SANDERS, O.     | 3129     | 0815       | 1526      | 431       | .03       | 0815      | 1526     | 431     | .03      | N     | PLANT      |
| FIN  | P    | 10/24/ 83 | TRUCK OPERATOR  | STANFIELD, R.   | 83069    | 0931       | 1135      | 124       | .14       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/24/ 83 | TRUCK OPERATOR  | STANFIELD, R.   | 83070    | 1135       | 1530      | 235       | .14       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/24/ 83 | TRUCK OPERATOR  | STANFIELD, R.   |          |            |           |           |           | 0931      | 1530     | 359     | .14      | N     | CORPORATE  |
| FIN  | P    | 05/04/ 84 | TRUCK OPERATOR  | GALVIN, D.      |          | 0831       | 1505      | 394       | .02       | 0831      | 1505     | 394     | .02      | N     | PLANT      |
| FIN  | P    | 06/29/ 84 | TRUCK OPERATOR  | SANDERS, O.     | 0727     | 0831       | 1515      | 444       | .02       | 0831      | 1515     | 444     | .02      | N     | PLANT      |
| FIN  | P    | 10/30/ 84 | TRUCK OPERATOR  | STANFIELD, R.   | 84072    | 0740       | 1040      | 180       | .03       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/30/ 84 | TRUCK OPERATOR  | STANFIELD, R.   | 84073    | 1040       | 1506      | 266       | .01       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/30/ 84 | TRUCK OPERATOR  | STANFIELD, R.   |          |            |           |           |           | 0740      | 1506     | 446     | .02      | N     | CORPORATE  |
| FIN  | P    | 06/07/ 85 | TRUCK OPERATOR  | STANFIELD, R.   | 0119     | 0827       | 1526      | 419       | .04       | 0827      | 1526     | 419     | .04      | N     | PLANT      |
| FIN  | P    | 04/10/ 81 | WET TESTER      | LEDFORD, J.     | 9354     | 0830       | 1136      | 186       | .17       |           |          |         |          | N     | PLANT      |
| FIN  | P    | 04/10/ 81 | WET TESTER      | LEDFORD, J.     | 9355     | 1136       | 1446      | 190       | .14       |           |          |         |          | N     | PLANT      |
| FIN  | P    | 04/10/ 81 | WET TESTER      | LEDFORD, J.     |          |            |           |           |           | 0830      | 1446     | 376     | .16      | N     | PLANT      |
| FIN  | P    | 04/22/ 81 | WET TESTER      | BOYD, D.        | 0553     | 0726       | 1222      | 296       | .24       |           |          |         |          | N     | PLANT      |
| FIN  | P    | 04/22/ 81 | WET TESTER      | BOYD, D.        | 0552     | 1222       | 1440      | 138       | .18       |           |          |         |          | N     | PLANT      |
| FIN  | P    | 04/22/ 81 | WET TESTER      | BOYD, D.        |          |            |           |           |           | 0726      | 1440     | 434     | .22      | N     | PLANT      |
| FIN  | P    | 11/20/ 81 | WET TESTER      | BIVENS, J       | 0599     | 0750       | 1521      | 451       | .07       | 0750      | 1521     | 451     | .07      | N     | PLANT      |
| FIN  | P    | 11/20/ 81 | WET TESTER      | BOYD, DOUGLAS   | 0594     | 0753       | 1153      | 240       | .07       | 0753      | 1153     | 240     | .07      | N     | PLANT      |
| FIN  | P    | 05/26/ 82 | WET TESTER      | BIVENS, J.      | 82026    | 0757       | 1247      | 290       | .14       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 05/26/ 82 | WET TESTER      | BIVENS, J.      | 82027    | 1247       | 1504      | 137       | .16       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 05/26/ 82 | WET TESTER      | BIVENS, J.      |          |            |           |           |           | 0757      | 1504     | 427     | .15      | N     | CORPORATE  |
| FIN  | P    | 05/27/ 82 | WET TESTER      | BIVENS, J.      | 82028    | 0735       | 1458      | 443       | .25       | 0735      | 1458     | 443     | .25      | N     | CORPORATE  |
| FIN  | P    | 04/08/ 83 | WET TESTER      | BIVENS, J.      | 8371     | 0815       | 1434      | 379       | .05       | 0815      | 1434     | 379     | .05      | N     | PLANT      |
| FIN  | P    | 10/13/ 83 | WET TESTER      | FEASTER, W.     | 3105     | 0829       | 1526      | 417       | .09       | 0829      | 1526     | 417     | .09      | N     | PLANT      |
| FIN  | P    | 10/14/ 83 | WET TESTER      | BROOKS, E.      | 3119     | 0813       | 1517      | 424       | .04       | 0813      | 1517     | 424     | .04      | N     | PLANT      |
| FIN  | P    | 10/26/ 83 | WET TESTER      | MORGAN, J.      | 83063    | 0748       | 1100      | 192       | .32       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/26/ 83 | WET TESTER      | MORGAN, J.      | 83064    | 1234       | 1527      | 173       | .38       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/26/ 83 | WET TESTER      | MORGAN, J.      |          |            |           |           |           | 0748      | 1527     | 365     | .35      | N     | CORPORATE  |
| FIN  | P    | 10/26/ 83 | WET TESTER      | BROOKS, E.      | 83065    | 0755       | 1234      | 279       | .31       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/26/ 83 | WET TESTER      | BROOKS, E.      | 83066    | 1234       | 1523      | 169       | .21       |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/26/ 83 | WET TESTER      | BROOKS, E.      |          |            |           |           |           | 0755      | 1523     | 448     | .27      | N     | CORPORATE  |
| FIN  | P    | 06/27/ 84 | WET TESTER      | BIVENS, J       | 0723     | 0816       | 1438      | 382       | .09       | 0816      | 1438     | 382     | .09      | N     | PLANT      |
| FIN  | P    | 06/27/ 84 | WET TESTER      | BOYD, D.        | 722      | 0828       | 1450      | 382       | .07       | 0828      | 1450     | 382     | .07      | N     | PLANT      |
| FIN  | P    | 10/30/ 84 | WET TESTER      | DOBBS, P        | 84064    | 0705       | 0930      | 145       |           |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/30/ 84 | WET TESTER      | DOBBS, P        | 84065    | 0930       | 1504      | 334       |           |           |          |         |          | N     | CORPORATE  |
| FIN  | P    | 10/30/ 84 | WET TESTER      | DOBBS, P        |          |            |           |           |           | 0705      | 1504     | 479     | .15      | N     | CORPORATE  |
| FIN  | P    | 05/24/ 85 | WET TESTER      | BROOKS, E.      | 0113     | 0842       | 1444      | 362       | .12       | 0842      | 1444     | 362     | .12      | N     | PLANT      |
| FIN  | P    | 05/24/ 85 | WET TESTER      | BIVENS, J.      | 0112     | 0842       | 1445      | 363       | .15       | 0842      | 1445     | 363     | .15      | N     | PLANT      |
| MAI  | P    | 03/24/ 82 | BOILER OPERATOR | HEUTON, D.      | 0629     | 0750       | 1420      | 389       | .08       | 0750      | 1420     | 389     | .08      | N     | PLANT      |
| MAI  | P    | 04/07/ 82 | BOILER OPERATOR | VANDERTWEEL, R. | 0649     | 0809       | 1500      | 411       | .07       | 0809      | 1500     | 411     | .07      | N     | PLANT      |
| MAI  | P    | 04/20/ 82 | BOILER OPERATOR | BOLTER, R.      | 0664     | 0818       | 1400      | 342       | .12       | 0818      | 1400     | 342     | .12      | N     | PLANT      |
| MAI  | P    | 05/25/ 82 | BOILER OPERATOR | HEUTON, D.      | 82034    | 0735       | 1446      | 431       | .004      | 0735      | 1446     | 431     | .004     | N     | CORPORATE  |
| MAI  | P    | 04/05/ 83 | BOILER OPERATOR | VANDERTWEEL, R. | 8356     | 0835       | 1500      | 385       | .06       | 0835      | 1500     | 385     | .06      | N     | PLANT      |
| MAI  | P    | 04/11/ 83 | BOILER OPERATOR | BOLTER, R.      | 8374     | 0825       | 1442      | 377       | .02       | 0825      | 1442     | 377     | .02      | N     | PLANT      |
| MAI  | P    | 04/27/ 83 | BOILER OPERATOR | HEUTON, D.      | 8382     | 0830       | 1457      | 377       | .00       | 0830      | 1457     | 377     | .00      | N     | PLANT      |
| MAI  | P    | 10/21/ 83 | BOILER OPERATOR | HEUTON, D.      | 3133     | 0821       | 1428      | 367       | .02       | 0821      | 1428     | 367     | .02      | N     | PLANT      |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| DEPT | PER/ AREA | TEST DATE | JOB TITLE/AREA      | EMPLOYEE NAME   | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START       | TWA STOP        | TWA MIN        | TWA F/CC | RESP. | SAMPLED BY |
|------|-----------|-----------|---------------------|-----------------|----------|------------|-----------|-----------|-----------|-----------------|-----------------|----------------|----------|-------|------------|
| MAI  | P         | 10/24/ 83 | BOILER OPERATOR     | BOLTEC, R.      | 83083    | 1636       | 2249      | 373       | .01       | 1636            | 2249            | 373            | .01      | N     | CORPORATE  |
| MAI  | P         | 10/25/ 83 | BOILER OPERATOR     | VANDERTWEEL, R. | 83084    | 0755       | 1453      | 418       | .02       | 0755            | 1453            | 418            | .02      | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | BOILER OPERATOR     | WILLIAMS, E     | 84084    | 0755       | 1140      | 225       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | BOILER OPERATOR     | WILLIAMS, E     | 84085    | 1140       | 1505      | 205       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | BOILER OPERATOR     | WILLIAMS, E     |          |            |           |           |           | 0755            | 1505            | 430            | .01      | N     | CORPORATE  |
| MAI  | P         | 03/24/ 82 | ELECTRICIAN         | CARON, A.       | 0630     | 0800       | 1419      | 379       | ---       | <del>0800</del> | <del>1419</del> | <del>379</del> |          | N     | PLANT      |
| MAI  | P         | 03/25/ 82 | ELECTRICIAN         | SWANK, K.       | 0631     | 0748       | 1404      | 376       | .04       | 0748            | 1404            | 376            | .04      | N     | PLANT      |
| MAI  | P         | 05/25/ 82 | ELECTRICIAN         | SWANK, K.       | 82032    | 0740       | 1500      | 440       | .01       | 0740            | 1500            | 440            | .01      | N     | CORPORATE  |
| MAI  | P         | 03/30/ 83 | ELECTRICIAN         | CARON, A.       | 8344     | 1000       | 1620      | 375       | .04       | 1000            | 1620            | 375            | .04      | N     | PLANT      |
| MAI  | P         | 04/06/ 83 | ELECTRICIAN         | SWANK, K.       | 8359     | 0825       | 1500      | 395       | .02       | 0825            | 1500            | 395            | .02      | N     | PLANT      |
| MAI  | P         | 10/26/ 83 | ELECTRICIAN         | CARON, A.       | 83080    | 0806       | 1617      | 419       | .07       | 0806            | 1617            | 419            | .07      | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | ELECTRICIAN         | CARON, A.       | 84080    | 0752       | 1043      | 171       | .02       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | ELECTRICIAN         | CARON, A.       | 84081    | 1043       | 1511      | 268       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | ELECTRICIAN         | CARON, A.       |          |            |           |           |           | 0752            | 1511            | 439            | .01      | N     | CORPORATE  |
| MAI  | P         | 12/20/ 85 | ELECTRICIAN         | SWANK, K.       | 0634     | 0854       | 1447      | 353       | .08       | 0854            | 1447            | 353            | .08      | N     | PLANT      |
| MAI  | P         | 10/26/ 83 | ELECTRICIAN (SHIFT) | SWANK, K.       | 83079    | 0840       | 1529      | 409       | .02       | 0840            | 1529            | 409            | .02      | N     | CORPORATE  |
| MAI  | P         | 03/26/ 82 | MACHINIST           | MCFANN, J.      | 0635     | 0807       | 1435      | 388       | .01       | 0807            | 1435            | 388            | .01      | N     | PLANT      |
| MAI  | P         | 05/25/ 82 | MACHINIST           | MCFANN, J.      | 82033    | 0730       | 1501      | 451       | .01       | 0730            | 1501            | 451            | .01      | N     | CORPORATE  |
| MAI  | P         | 04/08/ 83 | MACHINIST           | MCFANN, J.      | 8370     | 0800       | 1252      | 292       | .01       | 0800            | 1252            | 292            | .01      | N     | PLANT      |
| MAI  | P         | 10/21/ 83 | MACHINIST           | MCFANN, J.      | 3131     | 0816       | 1429      | 373       | .02       | 0816            | 1429            | 373            | .02      | N     | PLANT      |
| MAI  | P         | 10/30/ 84 | MACHINIST           | MCFANN, J.      | 84077    | 0748       | 1159      | 251       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | MACHINIST           | MCFANN, J.      | 84078    | 1200       | 1510      | 190       | .02       |                 |                 |                |          | N     | CORPORATE  |
| MAI  | P         | 10/30/ 84 | MACHINIST           | MCFANN, J.      |          |            |           |           |           | 0748            | 1510            | 441            | .01      | N     | CORPORATE  |
| MAI  | A         | 05/25/ 82 | MAINT FORKLIFT SHOP |                 | 82047    | 0755       | 1509      | 434       | .001      |                 |                 |                |          |       | CORPORATE  |
| MAI  | A         | 05/25/ 82 | MAINT. FORKLIFT PIT |                 | 82046    | 0752       | 1509      | 437       | .003      |                 |                 |                |          |       | CORPORATE  |
| MAI  | A         | 05/25/ 82 | MAINT. TOOL CAGE    |                 | 82044    | 0735       | 1459      | 444       | .002      |                 |                 |                |          |       | CORPORATE  |
| MAI  | P         | 04/01/ 81 | MECHANIC            | GEORGE, A.      | 0332     | 0921       | 1251      | 210       | .08       |                 |                 |                |          | N     | PLANT      |
| MAI  | P         | 04/01/ 81 | MECHANIC            | GEORGE, A.      | 0333     | 1251       | 1621      | 210       | .06       |                 |                 |                |          | N     | PLANT      |
| MAI  | P         | 04/01/ 81 | MECHANIC            | GEORGE, A.      |          |            |           |           |           | 0921            | 1621            | 420            | .07      | N     | PLANT      |
| MAI  | P         | 03/24/ 82 | MECHANIC            | BASTIAANS, H.   | 0628     | 0744       | 1419      | 395       | .03       | 0744            | 1419            | 395            | .03      | N     | PLANT      |
| MAI  | P         | 03/25/ 82 | MECHANIC            | WHITTAKER, W.   | 0633     | 0803       | 1430      | 387       | .09       | 0803            | 1430            | 387            | .09      | N     | PLANT      |
| MAI  | P         | 03/25/ 82 | MECHANIC            | DARNELL, W.     | 0632     | 0800       | 1426      | 386       | .03       | 0800            | 1426            | 386            | .03      | N     | PLANT      |
| MAI  | P         | 03/26/ 82 | MECHANIC            | STEEN, T.       | 0636     | 0804       | 1435      | 392       | .06       | 0804            | 1435            | 392            | .06      | N     | PLANT      |
| MAI  | P         | 03/26/ 82 | MECHANIC            | JENNY, R.       | 0634     | 0803       | 1422      | 379       | .04       | 0803            | 1422            | 379            | .04      | N     | PLANT      |
| MAI  | P         | 03/31/ 82 | MECHANIC            | BARAY, R.       | 0643     | 0811       | 1523      | 432       | .04       | 0811            | 1523            | 432            | .04      | N     | PLANT      |
| MAI  | P         | 04/20/ 82 | MECHANIC            | KING, C.D.      | 0663     | 0839       | 1430      | 351       | .15       | 0839            | 1430            | 351            | .15      | S     | PLANT      |
| MAI  | P         | 04/21/ 82 | MECHANIC            | GEORGE, A.      | 0666     | 0815       | 1449      | 394       | .04       | 0815            | 1449            | 394            | .04      | N     | PLANT      |
| MAI  | P         | 05/07/ 82 | MECHANIC            | MCGREGOR, P.    | 0670     | 0807       | 1440      | 393       | .09       | 0807            | 1440            | 393            | .09      | N     | PLANT      |
| MAI  | P         | 03/29/ 83 | MECHANIC            | GEORGE, A.      | 8338     | 0810       | 0945      | 95        |           |                 |                 |                |          | N     | PLANT      |
| MAI  | P         | 03/29/ 83 | MECHANIC            | DARNELL, W.     | 8337     | 0830       | 1510      | 400       |           |                 |                 |                |          | N     | PLANT      |
| MAI  | P         | 03/29/ 83 | MECHANIC            | ROJESKE, J.     | 8336     | 0830       | 1515      | 405       | .04       | 0830            | 1515            | 405            | .04      | N     | PLANT      |
| MAI  | P         | 03/29/ 83 | MECHANIC            | STEEN, T.       | 8335     | 0840       | 1520      | 400       | .04       | 0840            | 1520            | 400            | .04      | N     | PLANT      |
| MAI  | P         | 03/30/ 83 | MECHANIC            | GEORGE, A.      | 8340     | 0800       | 1302      | 302       | .00       | 0808            | 1302            | 302            | .00      | N     | PLANT      |
| MAI  | P         | 03/31/ 83 | MECHANIC            | BASTIAANS, H.   | 8348     | 0835       | 1500      | 385       | .04       | 0835            | 1500            | 385            | .04      | N     | PLANT      |
| MAI  | P         | 04/06/ 83 | MECHANIC            | JENNY, R.       | 8362     | 0845       | 1510      | 385       | .02       | 0845            | 1510            | 385            | .02      | N     | PLANT      |
| MAI  | P         | 04/27/ 83 | MECHANIC            | WHITTAKER, W.   | 8379     | 0820       | 1615      | 470       | .03       | 0820            | 1615            | 470            | .03      | N     | PLANT      |
| MAI  | P         | 10/14/ 83 | MECHANIC            | DARNELL, W.     | 3111     | 0842       | 1505      | 383       | .02       | 0842            | 1505            | 383            | .02      | N     | PLANT      |
| MAI  | P         | 10/14/ 83 | MECHANIC            | STEEN, T.       | 3110     | 0823       | 1520      | 417       | .02       | 0823            | 1520            | 417            | .02      | N     | PLANT      |
| MAI  | P         | 10/14/ 83 | MECHANIC            | GEORGE, A.      | 3107     | 0829       | 1503      | 394       | .02       | 0829            | 1503            | 394            | .02      | S     | PLANT      |
| MAI  | P         | 10/21/ 83 | MECHANIC            | KING, C.        | 3134     | 0818       | 1429      | 371       | ---       |                 |                 |                |          |       |            |
| MAI  | P         | 10/26/ 83 | MECHANIC            | WHITTAKER, W.   | 83078    | 0833       | 1515      | 462       | ---       |                 |                 |                |          | N     | CORPORATE  |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |                 | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       |           |  |
|------|------|-----------|----------------------|-----------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|--|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME   | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |  |
| MAI  | P    | 06/29/ 84 | MECHANIC             | MOJESKE, J.     | 0726  | 0829  | 1431 | 362  | .03  | 0829  | 1431 | 362 | .03  | N     | PLANT     |  |
| MAI  | P    | 08/26/ 84 | MECHANIC             | MCGREGOR, P.    | 764   | 0800  | 1245 | 285  | .14  | 0800  | 1245 | 285 | .14  | Y     | PLANT     |  |
| MAI  | P    | 07/02/ 85 | MECHANIC             | MOVESKE, J.     | 044   | 0828  | 1445 | 373  | ---  |       |      |     |      | N     | PLANT     |  |
| MAI  | P    | 10/22/ 85 | MECHANIC             | SATHORNKICH, J. | 0632  | 0830  | 1401 | 331  | ---  |       |      |     |      | N     | PLANT     |  |
| MAI  | P    | 12/03/ 81 | MECHANIC (SHIFT)     | MOJESKE, JOHN   | 0603  | 0815  | 1205 | 230  | .06  | 0815  | 1205 | 230 | .06  | N     | PLANT     |  |
| MAI  | P    | 04/13/ 83 | MECHANIC (SHIFT)     | KING, C.        | 8376  | 0758  | 1422 | 384  | .02  | 0758  | 1422 | 384 | .02  | N     | PLANT     |  |
| MAI  | P    | 04/27/ 83 | MECHANIC (SHIFT)     | BARAY, R.       | 8383  | 0811  | 1451 | 400  | .04  | 0811  | 1451 | 400 | .04  | N     | PLANT     |  |
| MAI  | P    | 10/24/ 83 | MECHANIC (SHIFT)     | JENNY, R.       | 83074 | 1626  | 1947 | 201  | .001 |       |      |     |      | N     | CORPORATE |  |
| MAI  | P    | 10/24/ 83 | MECHANIC (SHIFT)     | JENNY, R.       | 83075 | 1947  | 2250 | 183  | ---  |       |      |     |      | N     | CORPORATE |  |
| MAI  | P    | 10/25/ 83 | MECHANIC (SHIFT)     | BASTIAANS, H.   | 83076 | 0725  | 1030 | 185  | ---  |       |      |     |      | N     | CORPORATE |  |
| MAI  | P    | 10/25/ 83 | MECHANIC (SHIFT)     | BASTIAANS, H.   | 83077 | 1030  | 1450 | 260  | .04  | 10.30 | 1450 | 260 | .04  | N     | CORPORATE |  |
| MAI  | P    | 10/29/ 84 | MECHANIC (SHIFT)     | BASTIAANS, H.   | 84079 | 0917  | 1445 | 328  | .03  | 0917  | 1445 | 328 | .03  | N     | CORPORATE |  |
| MAI  | P    | 04/02/ 81 | OILER                | PERRY, D.       | 0336  | 0814  | 1150 | 216  | .19  |       |      |     |      | N     | PLANT     |  |
| MAI  | P    | 04/02/ 81 | OILER                | PERRY, D.       | 0337  | 1150  | 1530 | 220  | .18  |       |      |     |      | N     | PLANT     |  |
| MAI  | P    | 04/02/ 81 | OILER                | PERRY, D.       |       |       |      |      |      | 0814  | 1530 | 436 | .18  | N     | PLANT     |  |
| MAI  | P    | 04/21/ 82 | OILER                | PERRY, D.       | 0667  | 0821  | 1509 | 408  | .11  | 0821  | 1509 | 408 | .11  | N     | PLANT     |  |
| MAI  | P    | 04/06/ 83 | OILER                | PERRY, D.       | 8358  | 0823  | 1023 | 120  | .04  | 0823  | 1023 | 120 | .04  | N     | PLANT     |  |
| MAI  | P    | 04/07/ 83 | OILER                | PERRY, D.       | 8363  | 0808  | 1130 | 202  | .04  | 0808  | 1130 | 202 | .04  | N     | PLANT     |  |
| MAI  | P    | 10/26/ 83 | OILER                | PERRY, D.       | 83081 | 0807  | 1620 | 493  | .12  | 0807  | 1620 | 493 | .12  | N     | CORPORATE |  |
| MAI  | P    | 10/31/ 84 | OILER                | PERRY, D.       | 84082 | 0800  | 1130 | 210  | .06  |       |      |     |      | N     | CORPORATE |  |
| MAI  | P    | 10/31/ 84 | OILER                | PERRY, D.       | 84083 | 1130  | 1516 | 216  | .01  |       |      |     |      | N     | CORPORATE |  |
| MAI  | P    | 10/31/ 84 | OILER                | PERRY, D.       |       |       |      |      |      | 0800  | 1516 | 426 | .03  | N     | CORPORATE |  |
| MAI  | A    | 06/03/ 77 | SHEET METAL SHOP 2ND |                 |       |       |      |      | .00  |       |      |     |      |       | PLANT     |  |
| MAI  | P    | 12/17/ 81 | STOREKEEPER          | WALL, F.        | 0625  | 0810  | 1443 | 393  | .04  | 0810  | 1443 | 393 | .04  | N     | PLANT     |  |
| MAI  | P    | 03/28/ 83 | STOREKEEPER          | WALL, F.        | 8333  | 0835  | 1541 | 426  | .04  | 0835  | 1541 | 426 | .04  | N     | PLANT     |  |
| MAI  | P    | 10/14/ 83 | STOREKEEPER          | WALL, F.        | 3109  | 0808  | 1509 | 421  | .03  | 0808  | 1509 | 421 | .03  | N     | PLANT     |  |
| MAI  | P    | 10/26/ 83 | WELDER               | MCGREGOR, P.    | 83082 | 0810  | 1330 | 320  | ---  |       |      |     |      | N     | CORPORATE |  |
| MFG  | A    | 04/25/ 84 | MUNSON MIXER         |                 | 4361  | 0817  | 1040 | 143  | .07  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 04/25/ 84 | MUNSON MIXER         |                 | 4361  | 1040  | 1528 | 288  | .08  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 04/30/ 84 | MUNSON MIXER         |                 | 4451  | 0815  | 1241 | 266  | .14  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 06/20/ 84 | MUNSON MIXER         |                 | 760   | 0919  | 1501 | 760  | .08  | 0919  | 1501 | 760 | .08  |       | PLANT     |  |
| MFG  | A    | 06/26/ 85 | MUNSON MIXER         |                 | 040   | 0833  | 1439 | 369  | .31  | 0833  | 1439 | 369 | .31  |       | PLANT     |  |
| MFG  | A    | 11/06/ 75 | BAG HOUSE EXHAUSTER  |                 |       |       |      |      | .004 |       |      |     |      |       | PLANT     |  |
| MFG  | E    | 02/02/ 81 | BAG OPENER           |                 | ENG5  | 0808  | 1329 | 321  | .17  |       |      |     |      |       | PLANT     |  |
| MFG  | E    | 02/02/ 81 | BAG OPENER           |                 | ENG6  | 1329  | 1615 | 166  | .14  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 05/24/ 82 | BAG OPENER           |                 | 82037 | 1115  | 1444 | 209  | .05  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/25/ 83 | BAG OPENER           |                 | 83009 | 1354  | 1430 | 26   | .18  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/25/ 83 | BAG OPENER           |                 | 83010 | 1430  | 1457 | 27   | .02  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 03/12/ 84 | BAG OPENER           |                 | 533   | 0902  | 1608 | 426  | .12  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 03/13/ 84 | BAG OPENER           |                 | 530   | 0815  | 1534 | 439  | .09  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 03/14/ 84 | BAG OPENER           |                 | 602   | 0830  | 1549 | 439  | .08  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 03/15/ 84 | BAG OPENER           |                 | 614   | 0826  | 1647 | 501  | .07  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 03/16/ 84 | BAG OPENER           |                 | 623   | 0806  | 1508 | 422  | .07  | 0806  | 1508 | 422 | .07  |       | PLANT     |  |
| MFG  | A    | 03/22/ 84 | BAG OPENER           |                 | 710   | 0730  | 1436 | 426  | .07  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 03/23/ 84 | BAG OPENER           |                 | 716   | 0730  | 1432 | 422  | .15  |       |      |     |      |       | PLANT     |  |
| MFG  | A    | 10/29/ 84 | BAG OPENER           |                 | 84004 | 0921  | 1447 | 326  |      |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/29/ 84 | BAG OPENER           |                 | 84007 | 0938  | 1448 | 310  | .06  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/31/ 84 | BAG OPENER           |                 | 84005 | 0658  | 1030 | 212  | .03  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/31/ 84 | BAG OPENER           |                 | 84006 | 1030  | 1515 | 285  | .04  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/31/ 84 | BAG OPENER           |                 | 84008 | 0700  | 1031 | 211  | .03  |       |      |     |      |       | CORPORATE |  |
| MFG  | A    | 10/31/ 84 | BAG OPENER           |                 | 84009 | 1031  | 1515 | 284  | .17  |       |      |     |      |       | CORPORATE |  |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |                  |  | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|----------------------|------------------|--|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME    |  | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| MFG  | A    | 11/21/ 78 | BAG OPENER BAILER    |                  |  |       |       |      |      | .05  |       |      |     |      |       | PLANT     |
| MFG  |      | 08/10/ 77 | CEMENT SCALE PLATFOR |                  |  |       |       |      |      | .04  |       |      |     |      |       | PLANT     |
| MFG  | A    | 09/19/ 84 | CONTROL PANEL        |                  |  | 765   | 1009  | 1426 | 257  | .05  |       |      |     |      |       | PLANT     |
| MFG  | A    | 07/24/ 79 | CYCLONE              |                  |  |       |       |      |      | .76  |       |      |     |      |       | PLANT     |
| MFG  | A    | 05/27/ 81 | DRY FEED             |                  |  | 0568  | 1129  | 1455 | 206  | .39  |       |      |     |      |       | PLANT     |
| MFG  | A    | 04/ / 74  | DRY FEED SCREW       |                  |  |       |       |      |      | .42  |       |      |     |      |       | PLANT     |
| MFG  | A    | 03/08/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .29  |       |      |     |      |       | PLANT     |
| MFG  | A    | 03/19/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .29  |       |      |     |      |       | PLANT     |
| MFG  | A    | 06/09/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| MFG  | A    | 06/09/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .38  |       |      |     |      |       | PLANT     |
| MFG  | A    | 07/07/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .32  |       |      |     |      |       | PLANT     |
| MFG  | A    | 07/08/ 76 | DRY FEED SCREW       |                  |  |       |       |      |      | .41  |       |      |     |      |       | PLANT     |
| MFG  | A    | 08/14/ 84 | DRY FEED SCREW       |                  |  | 766   | 1017  | 1429 | 252  | .15  |       |      |     |      |       | PLANT     |
| MFG  |      | 06/27/ 77 | DRY MIXING SYSTEM    |                  |  |       |       |      |      | .09  |       |      |     |      |       | PLANT     |
| MFG  |      | 08/03/ 77 | DRY MIXING SYSTEM    |                  |  |       |       |      |      | .11  |       |      |     |      |       | PLANT     |
| MFG  | A    | 06/14/ 78 | DRY MIXING SYSTEM    |                  |  |       |       |      |      | .31  |       |      |     |      |       | PLANT     |
| MFG  | A    | 11/ / 72  | DUMP STATION         |                  |  |       |       |      |      | .06  |       |      |     |      |       | TRAVELERS |
| MFG  |      | 07/14/ 76 | FIBER DUMP STATION   |                  |  |       |       |      |      | .22  |       |      |     |      |       | PLANT     |
| MFG  |      | 09/10/ 76 | FIBER DUMP STATION   |                  |  |       |       |      |      | .66  |       |      |     |      |       | PLANT     |
| MFG  |      | 10/04/ 76 | FIBER DUMP STATION   |                  |  |       |       |      |      | .31  |       |      |     |      |       | PLANT     |
| MFG  |      | 08/25/ 77 | FIBER DUMP STATION   |                  |  |       |       |      |      | .25  |       |      |     |      |       | PLANT     |
| MFG  |      | 01/27/ 78 | FIBER DUMP STATION   |                  |  |       |       |      |      | .19  |       |      |     |      |       | PLANT     |
| MFG  |      | 01/30/ 78 | FIBER DUMP STATION   |                  |  |       |       |      |      | .38  |       |      |     |      |       | PLANT     |
| MFG  |      | 01/31/ 78 | FIBER DUMP STATION   |                  |  |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| MFG  |      | 02/28/ 78 | FIBER DUMP STATION   |                  |  |       |       |      |      | .19  |       |      |     |      |       | PLANT     |
| MFG  |      | 10/27/ 78 | FIBER DUMP STATION   |                  |  |       |       |      |      | .32  |       |      |     |      |       | PLANT     |
| MFG  |      | 02/15/ 79 | FIBER DUMP STATION   |                  |  |       |       |      |      | .11  |       |      |     |      | Y     | PLANT     |
| MFG  |      | 02/21/ 79 | FIBER DUMP STATION   |                  |  |       |       |      |      | .16  |       |      |     |      | Y     | PLANT     |
| MFG  |      | 04/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | 1.71 |       |      |     |      |       | PLANT     |
| MFG  |      | 05/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .77  |       |      |     |      |       | PLANT     |
| MFG  |      | 11/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .62  |       |      |     |      |       | PLANT     |
| MFG  |      | 12/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .81  |       |      |     |      |       | PLANT     |
| MFG  |      | 12/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .76  |       |      |     |      |       | PLANT     |
| MFG  |      | 12/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .76  |       |      |     |      |       | PLANT     |
| MFG  |      | 12/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .51  |       |      |     |      |       | PLANT     |
| MFG  |      | 12/ / 74  | FIBER MIXING         |                  |  |       |       |      |      | .75  |       |      |     |      |       | PLANT     |
| MFG  |      | 01/ / 75  | FIBER MIXING         |                  |  |       |       |      |      | .81  |       |      |     |      |       | PLANT     |
| MFG  |      | 07/ / 75  | FIBER MIXING         |                  |  |       |       |      |      | .35  |       |      |     |      |       | PLANT     |
| MFG  |      | 07/21/ 75 | FIBER MIXING         |                  |  |       |       |      |      | .30  |       |      |     |      |       | PLANT     |
| MFG  |      | 07/22/ 75 | FIBER MIXING         |                  |  |       |       |      |      | .49  |       |      |     |      |       | PLANT     |
| MFG  |      | 08/05/ 75 | FIBER MIXING         |                  |  |       |       |      |      | .79  |       |      |     |      |       | PLANT     |
| MFG  |      | 11/11/ 75 | FIBER MIXING         |                  |  |       |       |      |      | .80  |       |      |     |      |       | PLANT     |
| MFG  | P    | 03/11/ 75 | FIBER UNLOADER       | VOIGHTLANDER, C. |  |       |       |      | 240  | .27  |       |      |     |      |       | PLANT     |
| MFG  | P    | 03/02/ 76 | FIBER UNLOADER       | BUCKNELL         |  |       |       |      |      | 1.77 |       |      |     |      | Y     | PLANT     |
| MFG  |      | 03/11/ 75 | FIBER UNLOADING      |                  |  |       |       |      |      | .27  |       |      |     |      |       | PLANT     |
| MFG  |      | 09/07/ 76 | FIBER WAREHOUSE      |                  |  |       |       |      |      | .15  |       |      |     |      |       | PLANT     |
| MFG  | P    | 03/30/ 82 | GENERAL HELPER       | FEASTER, W.      |  | 0641  | 0818  | 1620 | 482  | .06  | 0818  | 1620 | 482 | .06  | S     | PLANT     |
| MFG  | P    | 03/31/ 82 | GENERAL HELPER       |                  |  | 0644  | 0827  | 1516 | 389  | .08  | 0827  | 1516 | 389 | .08  | N     | PLANT     |
| MFG  | P    | 10/20/ 83 | GENERAL HELPER       | RODRIGUEZ        |  | 3130  | 0820  | 1535 | 435  | .07  | 0820  | 1535 | 435 | .07  | S     | PLANT     |
| MFG  | P    | 10/29/ 84 | GENERAL HELPER       |                  |  | 84029 | 0855  | 1444 | 349  |      |       |      |     |      |       | CORPORATE |
| MFG  | P    | 10/29/ 84 | GENERAL HELPER       | LOLIE, K         |  | 84030 | 0858  | 1443 | 345  |      |       |      |     |      |       | CORPORATE |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/<br>DEPT | TEST<br>AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME  | SAMP<br>NO. | SAMP<br>START | SAMP<br>STOP | SAMP<br>MINS | SAMP<br>F/CC    | TWA<br>START    | TWA<br>STOP     | TWA<br>MIN     | TWA<br>F/CC     | RESP. | SAMPLED<br>BY |
|--------------|--------------|-----------|----------------------|----------------|-------------|---------------|--------------|--------------|-----------------|-----------------|-----------------|----------------|-----------------|-------|---------------|
| MFG          | P            | 11/01/ 84 | GENERAL HELPER       | LOLIE, K       | 84031       | 0810          | 1045         | 155          | <del>1.17</del> |                 |                 |                |                 | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | GENERAL HELPER       | LOLIE, K       | 84032       | 1045          | 1445         | 240          | <del>1.23</del> |                 |                 |                |                 | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | GENERAL HELPER       | LOLIE, K       |             |               |              |              |                 | 0810            | 1445            | 395            | <del>1.21</del> | Y     | CORPORATE     |
| MFG          | P            | 01/07/ 81 | MACHINE TENDER       | MORALES, D.    | 0305        | 0830          | 1130         | 180          | .17             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 01/07/ 81 | MACHINE TENDER       | MORALES, D.    | 0306        | 1130          | 1345         | 135          | .18             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 01/07/ 81 | MACHINE TENDER       | MORALES, D.    | 0307        | 1345          | 1450         | 65           | .26             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 01/07/ 81 | MACHINE TENDER       | MORALES, D.    |             |               |              |              |                 | 0830            | 1450            | 380            | .19             | N     | PLANT         |
| MFG          | P            | 04/10/ 81 | MACHINE TENDER       | MORALES, D.    | 9352        | 0818          | 1134         | 196          | .12             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/10/ 81 | MACHINE TENDER       | MORALES, D.    | 9353        | 1134          | 1438         | 184          | .30             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/10/ 81 | MACHINE TENDER       | MORALES, D.    |             |               |              |              |                 | 0818            | 1438            | 380            | .21             | N     | PLANT         |
| MFG          | P            | 12/10/ 81 | MACHINE TENDER       | MORALES, D.    | 0611        | 0748          | 1410         | 382          | .03             | 0748            | 1410            | 382            | .03             | N     | PLANT         |
| MFG          | P            | 03/29/ 82 | MACHINE TENDER       | WINDSOR, F.    | 0639        | 0810          | 1436         | 386          | .07             | 0810            | 1436            | 386            | .07             | N     | PLANT         |
| MFG          | P            | 04/15/ 82 | MACHINE TENDER       | HORTON, A.     | 0665        | 0817          | 1447         | 390          | .09             | 0817            | 1447            | 390            | .09             | N     | PLANT         |
| MFG          | P            | 05/24/ 82 | MACHINE TENDER       | HORTON, A.     | 82003       | 1039          | 1435         | 236          | <del>1.17</del> | <del>0839</del> | <del>1435</del> | <del>236</del> | <del>1.17</del> | N     | CORPORATE     |
| MFG          | P            | 03/24/ 83 | MACHINE TENDER       | PETERSON, J.   | 8323        | 0810          | 1449         | 399          | .07             | 0810            | 1449            | 399            | .07             | S     | PLANT         |
| MFG          | P            | 04/07/ 83 | MACHINE TENDER       | HORTON, A.     | 8366        | 0830          | 1442         | 372          | .07             | 0830            | 1442            | 372            | .07             | N     | PLANT         |
| MFG          | P            | 04/20/ 83 | MACHINE TENDER       | MORALES, D.    | 8377        | 0810          | 1432         | 382          | .05             | 0810            | 1432            | 382            | .05             | N     | PLANT         |
| MFG          | P            | 04/27/ 83 | MACHINE TENDER       | WINDSOR, F.    | 8381        | 0803          | 1455         | 412          | .05             | 0803            | 1455            | 412            | .05             | N     | PLANT         |
| MFG          | P            | 10/13/ 83 | MACHINE TENDER       | MORALES, D.    | 3102        | 0858          | 1448         | 350          | .07             | 0858            | 1448            | 350            | .07             | N     | PLANT         |
| MFG          | P            | 10/18/ 83 | MACHINE TENDER       | AESCHLIMAN, K. | 3125        | 0830          | 1459         | 379          | .06             | 0830            | 1459            | 379            | .06             | N     | PLANT         |
| MFG          | P            | 10/24/ 83 | MACHINE TENDER       | HORTON, A.     | 83013       | 1512          | 1945         | 273          | .25             |                 |                 |                |                 | N     | CORPORATE     |
| MFG          | P            | 10/24/ 83 | MACHINE TENDER       | HORTON, A.     | 83014       | 1945          | 2247         | 182          | .35             |                 |                 |                |                 | N     | CORPORATE     |
| MFG          | P            | 10/24/ 83 | MACHINE TENDER       | HORTON, A.     |             |               |              |              |                 | 1512            | 2247            | 455            | .29             | N     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MACHINE TENDER       | AESCHLIMAN, K. | 83015       | 0727          | 1113         | 226          | .56             |                 |                 |                |                 | N     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MACHINE TENDER       | AESCHLIMAN, K. | 83016       | 1113          | 1449         | 216          | .30             |                 |                 |                |                 | N     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MACHINE TENDER       | AESCHLIMAN, K. |             |               |              |              |                 | 0727            | 1449            | 442            | .43             | N     | CORPORATE     |
| MFG          | P            | 03/12/ 84 | MACHINE TENDER       | HORTON, A.     | 539         | 0805          | 1459         | 414          | .09             | 0805            | 1459            | 414            | .09             | N     | PLANT         |
| MFG          | P            | 03/13/ 84 | MACHINE TENDER       | HORTON, A.     | 527         | 0748          | 1457         | 429          | .09             | 0748            | 1457            | 429            | .09             | N     | PLANT         |
| MFG          | P            | 03/14/ 84 | MACHINE TENDER       | HORTON, A.     | 605         | 0753          | 1455         | 422          | .13             | 0753            | 1455            | 422            | .13             | N     | PLANT         |
| MFG          | P            | 03/15/ 84 | MACHINE TENDER       | HORTON, A.     | 613         | 0817          | 1458         | 398          | .13             | 0817            | 1458            | 398            | .13             | N     | PLANT         |
| MFG          | P            | 03/16/ 84 | MACHINE TENDER       | HORTON, A.     | 619         | 0755          | 1458         | 423          | .09             | 0755            | 1458            | 423            | .09             | N     | PLANT         |
| MFG          | P            | 03/22/ 84 | MACHINE TENDER       | HORTON, A.     | 706         | 0750          | 1449         | 419          | .10             | 0850            | 1449            | 419            | .10             | N     | PLANT         |
| MFG          | P            | 03/23/ 84 | MACHINE TENDER       | HORTON, AL     | 712         | 0745          | 1338         | 353          | .09             | 0745            | 1338            | 353            | .09             | N     | PLANT         |
| MFG          | P            | 04/17/ 84 | MACHINE TENDER       | AESCHLIMAN, K. | 419         | 0740          | 1058         | 198          | .07             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/17/ 84 | MACHINE TENDER       | AESCHLIMAN, K. | 4192        | 1058          | 1455         | 237          | .15             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/17/ 84 | MACHINE TENDER       | AESCHLIMAN, K. |             |               |              |              |                 | 0740            | 1455            | 435            | .11             | N     | PLANT         |
| MFG          | P            | 04/24/ 84 | MACHINE TENDER       | MORALES, D.    | 431         | 1908          | 2229         | 201          | .16             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/24/ 84 | MACHINE TENDER       | MORALES, D.    | 4312        | 2290          | 0200         | 211          | .15             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/24/ 84 | MACHINE TENDER       | MORALES, D.    |             |               |              |              |                 | 1908            | 0200            | 412            | .15             | N     | PLANT         |
| MFG          | P            | 04/27/ 84 | MACHINE TENDER       | MORALES, D.    | 4401        |               |              | 200          | .08             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/27/ 84 | MACHINE TENDER       | MORALES, D.    | 4402        |               |              | 200          | .08             |                 |                 |                |                 | N     | PLANT         |
| MFG          | P            | 04/27/ 84 | MACHINE TENDER       | MORALES, D.    |             |               |              |              |                 |                 |                 | 400            | .08             | N     | PLANT         |
| MFG          | P            | 04/27/ 84 | MACHINE TENDER       | MORALES, D.    | 443         | 0805          | 1045         | 240          | .10             | 0805            | 1045            | 240            | .10             | N     | PLANT         |
| MFG          | P            | 10/29/ 84 | MACHINE TENDER       | MORALES, D.    | 84010       | 0849          | 1435         | 346          |                 |                 |                 |                |                 | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MACHINE TENDER       | MORALES, D.    | 84011       | 0710          | 1029         | 199          |                 |                 |                 |                |                 | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MACHINE TENDER       | MORALES, D.    | 84012       | 1029          | 1444         | 255          |                 |                 |                 |                |                 | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MACHINE TENDER       | MORALES, D.    |             |               |              |              |                 | 0710            | 1444            | 454            |                 | Y     | CORPORATE     |
| MFG          | P            | 05/22/ 85 | MACHINE TENDER       | HORTON, A.     | 005         | 0840          | 1453         | 373          | .06             | 0840            | 1453            | 373            | .06             | N     | PLANT         |
| MFG          | P            | 06/12/ 85 | MACHINE TENDER       | MORALES, D.    | 025         | 0836          | 1446         | 370          | .08             | 0836            | 1446            | 370            | .08             | N     | PLANT         |
| MFG          | P            | 06/18/ 85 | MACHINE TENDER       | AESCHLIMAN, K. | 030         | 0850          | 1443         | 353          | <del>1.10</del> | 0850            | 1443            | 353            | .10             | N     | PLANT         |
| MFG          | A            | 05/27/ 82 | MACHINE TENDERS AREA |                | 82039       | 0712          | 1430         | 438          | .40             |                 |                 |                |                 |       | CORPORATE     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |                | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED |           |
|------|------|-----------|----------------------|----------------|-------|-------|------|------|------|-------|------|-----|------|-------|---------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME  | NO.   | START | STOP | MIN  | F/CC | START | STOP | MIN | F/CC | RESP. | BY      |           |
| MFG  | A    | 10/24/ 83 | MACHINE TENDERS AREA |                | 83017 | 1049  | 1501 | 252  | .73  |       |      |     |      |       |         | CORPORATE |
| MFG  | A    | 03/12/ 84 | MACHINE TENDERS AREA |                | 537   | 0900  | 1608 | 428  | .11  |       |      |     |      |       |         | PLANT     |
| MFG  | A    | 03/13/ 84 | MACHINE TENDERS AREA |                | 535   | 0814  | 1535 | 441  | .11  |       |      |     |      |       |         | PLANT     |
| MFG  | A    | 03/14/ 84 | MACHINE TENDERS AREA |                | 607   | 0815  | 1550 | 455  | .11  |       |      |     |      |       |         | PLANT     |
| MFG  | A    | 03/15/ 84 | MACHINE TENDERS AREA |                | 615   | 0827  | 1648 | 501  | .12  |       |      |     |      |       |         | PLANT     |
| MFG  | A    | 03/16/ 84 | MACHINE TENDERS AREA |                | 622   | 0805  | 1509 | 424  | .10  | 0805  | 1509 | 424 | .10  |       |         | PLANT     |
| MFG  | A    | 03/23/ 84 | MACHINE TENDERS AREA |                | 717   | 0730  | 1435 | 425  | .04  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 11/ / 72  | MANDREL HANDLER      |                |       |       |      |      | .02  |       |      |     |      |       |         | TRAVELERS |
| MFG  | P    | 04/03/ 81 | MANDREL HANDLER      | CLAUSEN, J.    | 0338  | 0813  | 1207 | 234  | .20  |       |      |     |      | N     |         | PLANT     |
| MFG  | P    | 04/03/ 81 | MANDREL HANDLER      | CLAUSEN, J.    | 0339  | 1207  | 1557 | 170  | .15  |       |      |     |      | N     |         | PLANT     |
| MFG  | P    | 04/03/ 81 | MANDREL HANDLER      | CLAUSEN, J.    |       |       |      |      |      | 0813  | 1557 | 404 | .18  | N     |         | PLANT     |
| MFG  | P    | 12/10/ 81 | MANDREL HANDLER      | REYES, P.      | 0606  | 0743  | 1400 | 377  | .04  | 0743  | 1400 | 377 | .04  | N     |         | PLANT     |
| MFG  | P    | 04/15/ 82 | MANDREL HANDLER      | BRADY, J.      | 0656  | 0822  | 1452 | 390  | .10  | 0822  | 1452 | 390 | .10  | N     |         | PLANT     |
| MFG  | P    | 05/24/ 82 | MANDREL HANDLER      | CASAS, J.      | 82005 | 1032  | 1434 | 242  | .09  | 1032  | 1434 | 242 | .09  | N     |         | CORPORATE |
| MFG  | P    | 03/18/ 83 | MANDREL HANDLER      | REYES, P.      | 8303  | 0756  | 1428 | 392  | .09  | 0756  | 1428 | 392 | .09  | N     |         | PLANT     |
| MFG  | P    | 03/22/ 83 | MANDREL HANDLER      | AVERY, A.      | 8315  | 0830  | 1450 | 380  | .05  | 0830  | 1450 | 380 | .05  | N     |         | PLANT     |
| MFG  | P    | 04/05/ 83 | MANDREL HANDLER      | CANTRELL, N.   | 8355  | 0817  | 1453 | 396  | .02  | 0817  | 1453 | 396 | .02  | N     |         | PLANT     |
| MFG  | P    | 10/11/ 83 | MANDREL HANDLER      | REYES, P. C.   | 8389  | 0951  | 1452 | 301  | .04  | 0951  | 1452 | 301 | .04  | N     |         | PLANT     |
| MFG  | P    | 10/18/ 83 | MANDREL HANDLER      | PLAZA, M.      | 3124  | 0834  | 1451 | 377  | .04  | 0834  | 1451 | 377 | .04  | N     |         | PLANT     |
| MFG  | P    | 10/24/ 83 | MANDREL HANDLER      | CANTRELL, N.   | 83022 | 1518  | 1957 | 279  | .06  |       |      |     |      | N     |         | CORPORATE |
| MFG  | P    | 10/24/ 83 | MANDREL HANDLER      | CANTRELL, N.   | 83023 | 1957  | 2242 | 165  | .07  |       |      |     |      | N     |         | CORPORATE |
| MFG  | P    | 10/24/ 83 | MANDREL HANDLER      | CANTRELL, N.   |       |       |      |      |      | 1518  | 2242 | 444 | .06  | N     |         | CORPORATE |
| MFG  | P    | 10/25/ 83 | MANDREL HANDLER      | PLAZA, M.      | 83024 | 0735  | 1449 | 434  | .07  | 0735  | 1449 | 434 | .07  | N     |         | CORPORATE |
| MFG  | P    | 05/11/ 84 | MANDREL HANDLER      | REYES, P.      |       | 0815  | 1315 | 300  | .03  | 0815  | 1315 | 300 | .03  | N     |         | PLANT     |
| MFG  | P    | 08/29/ 84 | MANDREL HANDLER      | CANTRELL, N.   | 733   | 0815  | 1429 | 374  | .03  | 0815  | 1429 | 374 | .03  | N     |         | PLANT     |
| MFG  | P    | 11/01/ 84 | MANDREL HANDLER      | REYES, P.      | 84017 | 0703  | 1030 | 207  | .01  |       |      |     |      | N     |         | CORPORATE |
| MFG  | P    | 11/01/ 84 | MANDREL HANDLER      | REYES, P.      | 84018 | 1030  | 1435 | 245  | .15  |       |      |     |      | N     |         | CORPORATE |
| MFG  | P    | 11/01/ 84 | MANDREL HANDLER      | REYES, P.      |       |       |      |      |      | 0703  | 1435 | 452 | .09  | N     |         | CORPORATE |
| MFG  | P    | 19/29/ 84 | MANDREL HANDLER      | REYES, P.      | 84016 | 0852  | 1433 | 341  | 0.04 |       |      |     |      | N     |         | CORPORATE |
| MFG  | P    | 05/23/ 85 | MANDREL HANDLER      | PADRON, N.     | 007   | 0829  | 1424 | 355  | .03  | 0829  | 1424 | 355 | .03  | N     |         | PLANT     |
| MFG  | P    | 06/18/ 85 | MANDREL HANDLER      | PLAZA, M.      | 031   | 0843  | 1441 | 358  | .05  | 0843  | 1441 | 358 | .05  | N     |         | PLANT     |
| MFG  | A    | 05/27/ 82 | MANDREL RETURN AREA  |                | 82040 | 0710  | 1432 | 442  | .02  |       |      |     |      |       |         | CORPORATE |
| MFG  | P    | 11/ / 72  | MIXER OPERATOR       |                |       |       |      |      | .29  |       |      |     |      |       |         | TRAVELERS |
| MFG  | P    | 11/ / 72  | MIXER OPERATOR       |                |       |       |      |      | .09  |       |      |     |      |       |         | TRAVELERS |
| MFG  | P    | 01/23/ 75 | MIXER OPERATOR       | POWELL, R.     |       |       |      | 70   | .81  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 01/07/ 76 | MIXER OPERATOR       | SANIGA         |       |       |      |      | 1.28 |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 01/12/ 76 | MIXER OPERATOR       | MORGAN,        |       |       |      |      | 1.39 |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 01/13/ 76 | MIXER OPERATOR       | CHAVEZ         |       |       |      |      | .98  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 01/16/ 76 | MIXER OPERATOR       | CHAVEZ         |       |       |      |      | 1.45 |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 01/22/ 76 | MIXER OPERATOR       | POULAS         |       |       |      |      | 1.45 |       |      |     |      |       |         | PLANT     |
| MFG  |      | 07/07/ 76 | MIXER OPERATOR       |                |       |       |      |      | .32  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 07/08/ 76 | MIXER OPERATOR       |                |       |       |      |      | .41  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 07/14/ 76 | MIXER OPERATOR       |                |       |       |      |      | .22  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 09/10/ 76 | MIXER OPERATOR       |                |       |       |      |      | .66  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 10/04/ 76 | MIXER OPERATOR       |                |       |       |      |      | .29  |       |      |     |      |       |         | PLANT     |
| MFG  | P    | 02/28/ 80 | MIXER OPERATOR       | MORGAN         |       |       |      |      | .06  |       |      |     |      |       | Y       | PLANT     |
| MFG  | P    | 01/06/ 81 | MIXER OPERATOR       | RICHARDSON     | 0301  | 0834  | 1133 | 179  | .40  |       |      |     |      | S     |         | PLANT     |
| MFG  | P    | 01/06/ 81 | MIXER OPERATOR       | RICHARDSON, J. | 0302  | 1133  | 1405 | 152  | .37  |       |      |     |      | S     |         | PLANT     |
| MFG  | P    | 01/06/ 81 | MIXER OPERATOR       | RICHARDSON, J. | 0303  | 1405  | 1445 | 40   | .40  |       |      |     |      | S     |         | PLANT     |
| MFG  | P    | 01/06/ 81 | MIXER OPERATOR       | RICHARDSON, J. |       |       |      |      |      | 0834  | 1445 | 371 | .39  | S     |         | PLANT     |
| MFG  | P    | 04/07/ 81 | MIXER OPERATOR       | REYES, P.      | 0344  | 0717  | 1143 | 266  | .27  |       |      |     |      | Y     |         | PLANT     |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/<br>DEPT | TEST<br>AREA | DATE      | JOB TITLE/AREA      | EMPLOYEE NAME    | SAMP<br>NO. | SAMP<br>START | SAMP<br>STOP | SAMP<br>MINS | SAMP<br>F/CC | TWA<br>START    | TWA<br>STOP     | TWA<br>MIN     | TWA<br>F/CC    | RESP. | SAMPLED<br>BY |
|--------------|--------------|-----------|---------------------|------------------|-------------|---------------|--------------|--------------|--------------|-----------------|-----------------|----------------|----------------|-------|---------------|
| MFG          | P            | 04/07/ 81 | MIXER OPERATOR      | REYES, P.        | 0345        | 1143          | 1453         | 190          | .30          |                 |                 |                |                | Y     | PLANT         |
| MFG          | P            | 04/07/ 81 | MIXER OPERATOR      | REYES, P.        |             |               |              |              |              | 0717            | 1453            | 456            | .28            | Y     | PLANT         |
| MFG          | P            | 04/22/ 81 | MIXER OPERATOR      | MORGAN, J.W.     | 551A        | 0716          | 1221         | 305          | .11          |                 |                 |                |                | S     | PLANT         |
| MFG          | P            | 04/22/ 81 | MIXER OPERATOR      | MORGAN, J.W.     | 551B        | 1221          | 1437         | 136          | .19          |                 |                 |                |                | S     | PLANT         |
| MFG          | P            | 04/22/ 81 | MIXER OPERATOR      | MORGAN, J.W.     |             |               |              |              |              | 0716            | 1437            | 441            | .14            | S     | PLANT         |
| MFG          | P            | 12/04/ 81 | MIXER OPERATOR      | CONTRERAS, JOE   | 0607        | 0830          | 1450         | 380          | .07          | 0830            | 1450            | 380            | .07            | S     | PLANT         |
| MFG          | P            | 12/07/ 81 | MIXER OPERATOR      | RICHARDSON, J.   | 0602        | 0802          | 1200         | 238          | .07          |                 |                 |                |                | S     | PLANT         |
| MFG          | P            | 12/07/ 81 | MIXER OPERATOR      | RICHARDSON, J.   | 0614        | 1200          | 1445         | 165          | .06          |                 |                 |                |                | S     | PLANT         |
| MFG          | P            | 12/07/ 81 | MIXER OPERATOR      | RICHARDSON, J.   |             |               |              |              |              | 0802            | 1445            | 403            | .06            | S     | PLANT         |
| MFG          | P            | 05/24/ 82 | MIXER OPERATOR      | CONTRERAS, JOE   | 82001       | 1028          | 1305         | 157          | .01          | <del>0828</del> | <del>1305</del> | <del>157</del> | <del>.01</del> | Y     | CORPORATE     |
| MFG          | P            | 05/25/ 82 | MIXER OPERATOR      | CONTRERAS, JOE   | 82002       | 0805          | 1454         | 411          | .21          | 0805            | 1454            | 411            | .21            | Y     | CORPORATE     |
| MFG          | P            | 07/16/ 82 | MIXER OPERATOR      | MORGAN, J.W.     | 0672        | 0824          | 1434         | 370          | .11          | 0824            | 1434            | 370            | .11            | Y     | PLANT         |
| MFG          | P            | 03/18/ 83 | MIXER OPERATOR      | RICHARDSON       | 8305        | 0805          | 1431         | 386          | .13          | 0805            | 1431            | 386            | .13            | S     | PLANT         |
| MFG          | P            | 03/21/ 83 | MIXER OPERATOR      | MORGAN, J.W.     | 8307        | 0825          | 1442         | 377          | .12          | 0825            | 1442            | 377            | .12            | Y     | PLANT         |
| MFG          | P            | 10/11/ 83 | MIXER OPERATOR      | RICHARDSON, V.D. | 8387        | 0950          | 1455         | 305          | .07          | 0950            | 1455            | 305            | .07            | Y     | PLANT         |
| MFG          | P            | 10/20/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 3126        | 0845          | 1459         | 374          | .16          | 0845            | 1459            | 374            | .16            | Y     | PLANT         |
| MFG          | P            | 10/24/ 83 | MIXER OPERATOR      | GILMORE, R.      | 83002       | 1509          | 1942         | 273          | .39          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/24/ 83 | MIXER OPERATOR      | GILMORE, R.      | 83003       | 1942          | 2245         | 183          | .58          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/24/ 83 | MIXER OPERATOR      | GILMORE, R.      |             |               |              |              |              | 1509            | 2245            | 456            | .47            | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 83004       | 0723          | 1015         | 172          | .08          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 83005       | 1015          | 1340         | 205          | .23          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 83006       | 1340          | 1402         | 22           | .45          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 83007       | 1402          | 1434         | 32           | .31          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     | 83008       | 1434          | 1457         | 23           | .27          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 10/25/ 83 | MIXER OPERATOR      | MARTINEZ, P.     |             |               |              |              |              | 0723            | 1457            | 454            | .19            | Y     | CORPORATE     |
| MFG          | P            | 03/12/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 529         | 0809          | 1450         | 401          | .11          | 0809            | 1450            | 401            | .11            | Y     | PLANT         |
| MFG          | P            | 03/13/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 538         | 0749          | 1455         | 426          | .19          | 0749            | 1455            | 426            | .19            | Y     | PLANT         |
| MFG          | P            | 03/14/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 610         | 0755          | 1456         | 421          | .17          | 0755            | 1456            | 421            | .17            | Y     | PLANT         |
| MFG          | P            | 03/15/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 612         | 0818          | 1456         | 396          | .12          | 0818            | 1456            | 396            | .12            | Y     | PLANT         |
| MFG          | P            | 03/16/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 620         | 0757          | 1455         | 415          | .12          | 0757            | 1455            | 415            | .12            | Y     | PLANT         |
| MFG          | P            | 03/22/ 84 | MIXER OPERATOR      | CONTRERAS, J.    |             | 0752          | 1450         | 418          | .24          | 0752            | 1450            | 418            | .24            | Y     | PLANT         |
| MFG          | P            | 03/23/ 84 | MIXER OPERATOR      | CONTRERAS, J.    | 713         | 0755          | 1453         | 423          | .17          | 0755            | 1453            | 423            | .17            | Y     | PLANT         |
| MFG          | P            | 05/11/ 84 | MIXER OPERATOR      | RICHARDSON, J.   |             | 0830          | 1316         | 286          | .05          | 0830            | 1316            | 286            | .05            | Y     | PLANT         |
| MFG          | P            | 08/29/ 84 | MIXER OPERATOR      | RODRIGUEZ        | 734         | 0817          | 1445         | 388          | .13          | 0817            | 1445            | 388            | .13            | Y     | PLANT         |
| MFG          | P            | 10/29/ 84 | MIXER OPERATOR      | RICHARDSON, J.   | 84001       | 0840          | 1436         | 356          | .11          | 0840            | 1436            | 356            | .11            | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MIXER OPERATOR      | RICHARDSON, J.   | 84002       | 0712          | 1036         | 204          | .24          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MIXER OPERATOR      | RICHARDSON, J.   | 84003       | 1036          | 1439         | 243          | .23          |                 |                 |                |                | Y     | CORPORATE     |
| MFG          | P            | 11/01/ 84 | MIXER OPERATOR      | RICHARDSON, J.   |             |               |              |              |              | 0712            | 1439            | 447            | .23            | Y     | CORPORATE     |
| MFG          | P            | 05/22/ 85 | MIXER OPERATOR      | CONTRERAS, J.    | 003         | 0842          | 1455         | 373          | .16          | 0842            | 1455            | 373            | .16            | S     | PLANT         |
| MFG          | P            | 06/12/ 85 | MIXER OPERATOR      | RICHARDSON, G.   | 024         | 0838          | 1447         | 369          | .10          | 0838            | 1447            | 369            | .10            | Y     | PLANT         |
| MFG          | P            | 06/19/ 85 | MIXER OPERATOR      | REYES, P.        | 035         | 0822          | 1437         | 375          | .09          | 0822            | 1437            | 375            | .09            | S     | PLANT         |
| MFG          | A            | 08/15/ 73 | MIXING AREA #4 MILL |                  |             |               |              |              | .03          |                 |                 |                |                |       | TRAVELERS     |
| MFG          | A            | 07/27/ 76 | MUNSON #1 DISCHARGE |                  |             |               |              |              | .31          |                 |                 |                |                |       | PLANT         |
| MFG          |              | 06/29/ 77 | MUNSON #4 DISCHARGE |                  |             |               |              |              | .00          |                 |                 |                |                |       | PLANT         |
| MFG          | E            | 10/27/ 83 | MUNSON MIXER #2     |                  | 83011       | 1050          | 1458         | 248          | .88          |                 |                 |                |                |       | CORPORATE     |
| MFG          | A            | 04/18/ 84 | MUNSON MIXER #2     |                  | 424         | 0813          | 1148         | 215          | .12          |                 |                 |                |                |       | PLANT         |
| MFG          | A            | 04/18/ 84 | MUNSON MIXER #2     |                  | 4242        | 1148          | 1529         | 199          | .08          |                 |                 |                |                |       | PLANT         |
| MFG          | A            | 04/25/ 84 | MUNSON MIXER #2     |                  |             | 0817          | 1040         | 143          | .07          |                 |                 |                |                |       | PLANT         |
| MFG          | A            | 04/25/ 84 | MUNSON MIXER #2     |                  |             | 1040          | 1528         | 288          | .08          |                 |                 |                |                |       | PLANT         |
| MFG          | A            | 08/01/ 84 | MUNSON MIXER #2     |                  | 730         | 1047          | 1535         | 288          | .08          |                 |                 |                |                |       | PLANT         |
| MFG          | A            | 08/01/ 84 | MUNSON MIXER #2     |                  | 731         | 1047          | 1535         | 288          | .08          |                 |                 |                |                |       | PLANT         |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                      |                 | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED   |
|------|------|-----------|----------------------|-----------------|-------|-------|------|------|------|-------|------|-----|------|-------|-----------|
| DEPT | AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME   | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY        |
| MFG  | A    | 10/29/ 84 | MUNSON MIXER #2      |                 | 84036 | 0922  | 1449 | 327  | 1.42 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 11/01/ 84 | MUNSON MIXER #2      |                 | 84037 | 0723  | 1031 | 188  | 0.24 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 11/01/ 84 | MUNSON MIXER #2      |                 | 84038 | 1031  | 1446 | 255  | 0.33 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 10/29/ 84 | MUNSON MIXER #4      |                 | 84039 | 0925  | 1450 | 325  | 0.39 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 11/01/ 84 | MUNSON MIXER #4      |                 | 84040 | 0722  | 1030 | 188  | 0.16 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 11/01/ 84 | MUNSON MIXER #4      |                 | 84041 | 1030  | 1447 | 257  | 0.26 |       |      |     |      |       | CORPORATE |
| MFG  | A    | 05/24/ 82 | MUNSONS              |                 | 82038 | 1120  | 1449 | 209  | .76  |       |      |     |      |       | CORPORATE |
| MFG  | P    | 01/08/ 81 | PRESS OPERATOR       | CASAS, J.       | 0308  | 0805  | 1043 | 158  | .13  |       |      |     |      | N     | PLANT     |
| MFG  | P    | 01/08/ 81 | PRESS OPERATOR       | CASAS, J.       | 0309  | 1043  | 1243 | 120  | .24  |       |      |     |      | N     | PLANT     |
| MFG  | P    | 01/08/ 81 | PRESS OPERATOR       | CASAS, J.       | 0310  | 1305  | 1455 | 110  | .35  |       |      |     |      | N     | PLANT     |
| MFG  | P    | 01/08/ 81 | PRESS OPERATOR       | CASAS, J.       |       |       |      |      |      | 0805  | 1455 | 388 | .23  | N     | PLANT     |
| MFG  | P    | 01/09/ 81 | PRESS OPERATOR       | CASAS, J.       | 0311  | 1243  | 1401 | 78   | .34  | 1243  | 1401 | 78  | .34  | N     | PLANT     |
| MFG  | P    | 04/30/ 81 | PRESS OPERATOR       | PETERSON, J.    | 0559  | 0804  | 1306 | 302  | .12  | 0804  | 1306 | 302 | .12  | N     | PLANT     |
| MFG  | P    | 05/01/ 81 | PRESS OPERATOR       | PETERSON, J.    | 0560  | 0905  | 1108 | 123  | .34  | 0905  | 1108 | 123 | .34  | N     | PLANT     |
| MFG  | P    | 12/08/ 81 | PRESS OPERATOR       | CASAS, J.       | 0612  | 0737  | 1418 | 401  | .05  | 0737  | 1418 | 401 | .05  | N     | PLANT     |
| MFG  | P    | 01/13/ 82 | PRESS OPERATOR       | MARRON, D.      | 0626  | 0845  | 1450 | 370  | .09  | 0845  | 1450 | 370 | .09  | N     | PLANT     |
| MFG  | P    | 04/19/ 82 | PRESS OPERATOR       | PETERSON, J.    | 0661  | 0817  | 1435 | 378  | .09  | 0817  | 1435 | 378 | .09  |       | PLANT     |
| MFG  | P    | 05/24/ 82 | PRESS OPERATOR       | PETERSON, J.    | 82004 | 1036  | 1438 | 242  | .01  | 1036  | 1438 | 242 | .01  | N     | CORPORATE |
| MFG  | P    | 03/18/ 83 | PRESS OPERATOR       | CASAS, J.       | 8304  | 0800  | 1430 | 360  | .05  | 0800  | 1430 | 360 | .05  | N     | PLANT     |
| MFG  | P    | 03/21/ 83 | PRESS OPERATOR       | AESCHLIMAN, K.  | 8309  | 0817  | 1435 | 378  | .13  | 0817  | 1435 | 378 | .13  | N     | PLANT     |
| MFG  | P    | 03/21/ 83 | PRESS OPERATOR       | MARRON, D.      | 8308  | 0815  | 1437 | 387  | .10  | 0815  | 1437 | 387 | .10  | N     | PLANT     |
| MFG  | P    | 04/05/ 83 | PRESS OPERATOR       | CONTRERAS, J.   | 8354  | 0814  | 1450 | 396  | .06  | 0814  | 1450 | 396 | .06  | N     | PLANT     |
| MFG  | P    | 05/17/ 83 | PRESS OPERATOR       | BRADY, J.       | 8380  | 0820  | 1361 | 381  | .05  | 0820  | 1361 | 381 | .05  | N     | PLANT     |
| MFG  | P    | 10/11/ 83 | PRESS OPERATOR       | CASAS, JOHN     | 8388  | 0948  | 1456 | 308  | .04  | 0948  | 1456 | 308 | .04  | N     | PLANT     |
| MFG  | P    | 10/18/ 83 | PRESS OPERATOR       | MARRON, D.      | 3123  | 0832  | 1450 | 378  | .05  | 0832  | 1450 | 378 | .05  | N     | PLANT     |
| MFG  | P    | 10/24/ 83 | PRESS OPERATOR       | BRADY, J.       | 83018 | 1515  | 1945 | 270  | .63  |       |      |     |      | Y     | CORPORATE |
| MFG  | P    | 10/24/ 83 | PRESS OPERATOR       | BRADY, J.       | 83019 | 1945  | 2248 | 183  | .23  |       |      |     |      | Y     | CORPORATE |
| MFG  | P    | 10/24/ 83 | PRESS OPERATOR       | BRADY, J.       |       |       |      |      |      | 1515  | 2248 | 453 | .47  | Y     | CORPORATE |
| MFG  | P    | 10/25/ 83 | PRESS OPERATOR       | MARON, D.       | 83020 | 0728  | 1114 | 226  | .14  |       |      |     |      | N     | CORPORATE |
| MFG  | P    | 10/25/ 83 | PRESS OPERATOR       | MARON, D.       | 83021 | 1114  | 1437 | 203  | .18  |       |      |     |      | N     | CORPORATE |
| MFG  | P    | 10/25/ 83 | PRESS OPERATOR       | MARON, D.       |       |       |      |      |      | 0728  | 1437 | 429 | .16  | N     | CORPORATE |
| MFG  | P    | 05/03/ 84 | PRESS OPERATOR       | BRADY, J.       |       | 0830  | 1455 | 385  | .04  | 0830  | 1455 | 385 | .04  | N     | PLANT     |
| MFG  | P    | 05/11/ 84 | PRESS OPERATOR       | CASAS, J.       |       | 0818  | 1317 | 299  | .03  | 0818  | 1317 | 299 | .03  | N     | PLANT     |
| MFG  | P    | 10/29/ 84 | PRESS OPERATOR       | CASAS, J.       | 84013 | 0842  | 1434 | 352  | .06  |       |      |     |      | N     | CORPORATE |
| MFG  | P    | 11/01/ 84 | PRESS OPERATOR       | CASAS, J.       | 84014 | 0709  | 1034 | 205  | .14  |       |      |     |      | N     | CORPORATE |
| MFG  | P    | 11/01/ 84 | PRESS OPERATOR       | CASAS, J.       | 84015 | 1034  | 1437 | 243  | .20  |       |      |     |      | N     | CORPORATE |
| MFG  | P    | 11/01/ 84 | PRESS OPERATOR       | CASAS, J.       |       |       |      |      |      | 0709  | 1437 | 448 | .17  | N     | CORPORATE |
| MFG  | P    | 05/22/ 85 | PRESS OPERATOR       | BRADY, J.       | 004   | 0838  | 1453 | 375  | .06  | 0838  | 1453 | 375 | .06  | N     | PLANT     |
| MFG  | P    | 06/18/ 85 | PRESS OPERATOR       | VILLALPANDO, A. | 032   | 0846  | 1442 | 356  | .06  | 0846  | 1442 | 356 | .06  | N     | PLANT     |
| MFG  | A    | 11/ / 72  | PRESS OPERATOR STATI |                 |       |       |      |      | .04  |       |      |     |      |       | TRAVELERS |
| MFG  | P    | 05/27/ 81 | RELIEF OPERATOR      | AESCHLIMAN, K   | 0561  | 0750  | 1149 | 239  | .14  |       |      |     |      | S     | PLANT     |
| MFG  | P    | 05/27/ 81 | RELIEF OPERATOR      | AESCHLIMAN, K   | 0562  | 1149  | 1449 | 180  | .20  |       |      |     |      | S     | PLANT     |
| MFG  | P    | 05/27/ 81 | RELIEF OPERATOR      | AESCHLIMAN, K   |       |       |      |      |      | 0750  | 1449 | 419 | .16  | S     | PLANT     |
| MFG  | P    | 12/11/ 81 | RELIEF OPERATOR      | CANTRELL, N.    | 0617  | 0732  | 1333 | 361  | .04  | 0732  | 1333 | 361 | .04  | N     | PLANT     |
| MFG  | P    | 04/15/ 82 | RELIEF OPERATOR      | RENFRO, E.      | 0654  | 0815  | 1448 | 393  | .11  | 0815  | 1448 | 393 | .11  | S     | PLANT     |
| MFG  | P    | 05/24/ 82 | RELIEF OPERATOR      | RENFRO, E.      | 82010 | 1105  | 1441 | 216  | .09  | 1105  | 1441 | 216 | .09  | N     | CORPORATE |
| MFG  | P    | 07/16/ 82 | RELIEF OPERATOR      | AESCHLIMAN, K.  | 0673  | 0840  | 1442 | 362  | .08  | 0840  | 1442 | 362 | .08  | N     | PLANT     |
| MFG  | P    | 04/07/ 83 | RELIEF OPERATOR      | RENFRO, E.      | 8367  | 0835  | 1420 | 365  | .06  | 0835  | 1420 | 365 | .06  | N     | PLANT     |
| MFG  | P    | 10/11/ 83 | RELIEF OPERATOR      | WINDSOR, F.     | 8390  | 0954  | 1453 | 299  | .11  | 0954  | 1453 | 299 | .11  | S     | PLANT     |
| MFG  | P    | 10/18/ 83 | RELIEF OPERATOR      | PETERSON, J.    | 3121  | 0831  | 1449 | 378  | .03  | 0831  | 1449 | 378 | .03  | S     | PLANT     |
| MFG  | P    | 10/24/ 83 | RELIEF OPERATOR      | RENFRO, E.      | 83035 | 1515  | 1948 | 273  | .16  |       |      |     |      | N     | CORPORATE |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| DEPT | PER/ AREA | TEST DATE | JOB TITLE/AREA    | EMPLOYEE NAME       | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START | TWA STOP | TWA MIN | TWA F/CC | RESP. | SAMPLED BY |
|------|-----------|-----------|-------------------|---------------------|----------|------------|-----------|-----------|-----------|-----------|----------|---------|----------|-------|------------|
| MFG  | P         | 10/24/ 83 | RELIEF OPERATOR   | RENFROW, E.         | 83036    | 1948       | 2247      | 179       | .20       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | RELIEF OPERATOR   | RENFROW, E.         |          |            |           |           |           | 1515      | 2247     | 452     | .18      | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | RELIEF OPERATOR   | PETERSON, J.        | 83037    | 0732       | 1438      | 426       | .23       | 0732      | 1438     | 426     | .23      | N     | CORPORATE  |
| MFG  | P         | 05/04/ 84 | RELIEF OPERATOR   | RENFRO, E.          |          | 0809       | 1459      | 410       | .05       | 0809      | 1459     | 410     | .05      | N     | PLANT      |
| MFG  | P         | 05/11/ 84 | RELIEF OPERATOR   | WINDSOR, F.         |          | 0821       | 1319      | 298       | .04       | 0821      | 1319     | 298     | .04      | N     | PLANT      |
| MFG  | P         | 10/29/ 84 | RELIEF OPERATOR   | WINDSOR, F.         | 84026    | 0845       | 1436      | 351       | .06       | 0845      | 1436     | 351     | .06      | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | RELIEF OPERATOR   | WINDSOR, F.         | 84027    | 0708       | 1036      | 208       | .09       |           |          |         |          | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | RELIEF OPERATOR   | WINDSOR, F.         | 84028    | 1037       | 1438      | 241       | .13       |           |          |         |          | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | RELIEF OPERATOR   | WINDSOR, F.         |          |            |           |           |           | 0708      | 1438     | 449     | .13      | Y     | CORPORATE  |
| MFG  | P         | 05/22/ 85 | RELIEF OPERATOR   | RENFRO, E.          | 006      | 0848       | 1454      | 366       | .10       | 0848      | 1454     | 366     | .10      | N     | PLANT      |
| MFG  | P         | 06/19/ 85 | RELIEF OPERATOR   | MORGAN, J. W.       | 033      | 0821       | 1436      | 375       | .06       | 0821      | 1436     | 375     | .06      | N     | PLANT      |
| MFG  | P         | 03/25/ 81 | STRIPPER OPERATOR | SUAREZ, A.          | 0322     | 0742       | 1043      | 181       | .04       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 03/25/ 81 | STRIPPER OPERATOR | SUAREZ, A.          | 0323     | 1043       | 1444      | 241       | .06       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 03/25/ 81 | STRIPPER OPERATOR | SUAREZ, A.          |          |            |           |           |           | 0742      | 1444     | 422     | .05      | N     | PLANT      |
| MFG  | P         | 03/30/ 81 | STRIPPER OPERATOR | HASTINGS, F.        | 0328     | 0952       | 1314      | 202       | .03       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 03/30/ 81 | STRIPPER OPERATOR | HASTINGS, F.        | 0329     | 1314       | 1500      | 106       | .06       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 03/30/ 81 | STRIPPER OPERATOR | HASTINGS, F.        |          |            |           |           |           | 0952      | 1500     | 308     | .03      | N     | PLANT      |
| MFG  | P         | 12/03/ 81 | STRIPPER OPERATOR | SONCRANT, G.        | 0609     | 0825       | 1456      | 390       | .04       | 0825      | 1456     | 390     | .04      | N     | PLANT      |
| MFG  | P         | 04/02/ 82 | STRIPPER OPERATOR | EAVES, R.           | 0645     | 0746       | 1429      | 403       | .15       | 0746      | 1429     | 403     | .15      | N     | PLANT      |
| MFG  | P         | 05/24/ 82 | STRIPPER OPERATOR | SONCRANT, G.        | 82007    | 1055       | 1448      | 233       | .02       | 1055      | 1448     | 233     | .02      | N     | CORPORATE  |
| MFG  | P         | 06/25/ 82 | STRIPPER OPERATOR | HASTINGS, F.        | 0671     | 0810       | 1445      | 395       | .05       | 0810      | 1445     | 395     | .05      | N     | PLANT      |
| MFG  | P         | 03/24/ 83 | STRIPPER OPERATOR | EAVES, R.           | 8324     | 0820       | 1442      | 382       | .05       | 0820      | 1442     | 382     | .05      | N     | PLANT      |
| MFG  | P         | 04/07/ 83 | STRIPPER OPERATOR | SONCRANT, G.        | 8368     | 0845       | 1447      | 362       | .02       | 0845      | 1447     | 362     | .02      | N     | PLANT      |
| MFG  | P         | 04/27/ 83 | STRIPPER OPERATOR | HASTINGS, F.        | 8384     | 0850       | 1448      | 358       | .02       | 0850      | 1448     | 358     | .02      | N     | PLANT      |
| MFG  | P         | 10/11/ 83 | STRIPPER OPERATOR | VILLALPANDO, ANDRES | 8386     | 0938       | 1451      | 313       | .06       | 0938      | 1451     | 313     | .06      | N     | PLANT      |
| MFG  | P         | 10/18/ 83 | STRIPPER OPERATOR | EAVES, R.           | 3120     | 0837       | 1453      | 376       | .01       | 0837      | 1453     | 376     | .01      | N     | PLANT      |
| MFG  | P         | 10/24/ 83 | STRIPPER OPERATOR | SONCRANT, W.        | 83025    | 1615       | 1951      | 216       | .04       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | STRIPPER OPERATOR | SONCRANT, W.        | 83026    | 1951       | 2237      | 166       | .04       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | STRIPPER OPERATOR | SONCRANT, W.        |          |            |           |           |           | 1615      | 2237     | 382     | .04      | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | STRIPPER OPERATOR | EAVES, R.           | 83027    | 0741       | 1120      | 219       | --        |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | STRIPPER OPERATOR | EAVES, R.           | 83028    | 1120       | 1442      | 202       | --        |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | STRIPPER OPERATOR | EAVES, R.           |          |            |           |           |           | 0741      | 1442     | 421     | .02      | N     | CORPORATE  |
| MFG  | P         | 06/26/ 84 | STRIPPER OPERATOR | HASTINGS, F.        | 719      | 0825       | 1432      | 367       | .03       | 0825      | 1432     | 367     | .03      | N     | PLANT      |
| MFG  | P         | 08/29/ 84 | STRIPPER OPERATOR | SONCRANT, G.        | 736      | 0825       | 1430      | 365       | .03       | 0825      | 1430     | 365     | .03      | N     | PLANT      |
| MFG  | P         | 10/29/ 84 | STRIPPER OPERATOR | MARTINEZ, P.        | 84019    | 0907       | 1438      | 331       | .01       | 0907      | 1438     | 331     | .01      | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | STRIPPER OPERATOR | MARTINEZ, P.        | 84020    | 0728       | 1038      | 190       | .01       |           |          |         |          | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | STRIPPER OPERATOR | MARTINEZ, P.        | 84021    | 1038       | 1442      | 242       | .02       |           |          |         |          | Y     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | STRIPPER OPERATOR | MARTINEZ, P.        |          |            |           |           |           | 0728      | 1442     | 432     | .02      | Y     | CORPORATE  |
| MFG  | P         | 05/23/ 85 | STRIPPER OPERATOR | SONCRANT, G.        | 009      | 0832       | 1431      | 359       | .04       | 0832      | 1431     | 359     | .04      | N     | PLANT      |
| MFG  | P         | 05/24/ 82 | SUPERVISOR        | VOIGHTLANDER, C.    | 82006    | 1043       | 1436      | 233       | .14       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 10/29/ 84 | SUPERVISOR        | VOIGHTLANDER, C.    | 84033    | 0918       | 1432      | 314       | .03       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | SUPERVISOR        | VOIGHTLANDER, C.    | 84034    | 0717       | 1035      | 198       | .03       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | SUPERVISOR        | VOIGHTLANDER, C.    | 84035    | 1035       | 1438      | 243       | .03       |           |          |         |          | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | SUPERVISOR        | VOIGHTLANDER, C.    |          |            |           |           |           | 0717      | 1438     | 441     | .03      | N     | CORPORATE  |
| MFG  | P         | 04/09/ 81 | TRAY LOADER       | PLAZA, M.           | 0348     | 0947       | 1142      | 115       | .08       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 04/09/ 81 | TRAY LOADER       | PLAZA, M.           | 0349     | 1142       | 1455      | 193       | .02       |           |          |         |          | N     | PLANT      |
| MFG  | P         | 04/09/ 81 | TRAY LOADER       | PLAZA, M.           |          |            |           |           |           | 0947      | 1455     | 308     | .04      | N     | PLANT      |
| MFG  | P         | 11/30/ 81 | TRAY LOADER       | PALOMERA, G.        | 0605     | 0825       | 1451      | 386       | .04       | 0825      | 1451     | 386     | .04      | N     | PLANT      |
| MFG  | P         | 12/11/ 81 | TRAY LOADER       | PLAZA, M.           | 0618     | 0750       | 1403      | 373       | .03       | 0750      | 1403     | 373     | .03      | N     | PLANT      |
| MFG  | P         | 04/14/ 82 | TRAY LOADER       | MARTINEZ, P.        | 0650     | 0814       | 1447      | 393       | .05       | 0814      | 1447     | 393     | .05      | N     | PLANT      |
| MFG  | P         | 04/16/ 82 | TRAY LOADER       | LEDFOORD, J.        | 0657     | 0824       | 1436      | 371       | .12       | 0824      | 1436     | 371     | .12      | N     | PLANT      |

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| DEPT | PER/ AREA | TEST DATE | JOB TITLE/AREA    | EMPLOYEE NAME  | SAMP NO. | SAMP START | SAMP STOP | SAMP MINS | SAMP F/CC | TWA START       | TWA STOP        | TWA MIN        | TWA F/CC | RESP. | SAMPLED BY |
|------|-----------|-----------|-------------------|----------------|----------|------------|-----------|-----------|-----------|-----------------|-----------------|----------------|----------|-------|------------|
| MFG  | P         | 05/24/ 82 | TRAY LOADER       | LEDFORD, J     | 82008    | 1049       | 1440      | 231       | .01       | <del>1049</del> | <del>1440</del> | <del>231</del> | .01      | N     | CORPORATE  |
| MFG  | P         | 03/18/ 83 | TRAY LOADER       | PLAZA, M.      | 8301     | 0752       | 1417      | 395       | .03       | 0752            | 1417            | 395            | .03      | N     | PLANT      |
| MFG  | P         | 03/21/ 83 | TRAY LOADER       | MARTINEZ, P.   | 8310     | 0832       | 1200      | 208       | .08       | <del>0832</del> | <del>1200</del> | <del>208</del> | .08      | N     | PLANT      |
| MFG  | P         | 03/28/ 83 | TRAY LOADER       | FEASTER, WAYNE | 8334     | 0840       | 1545      | 425       | .06       | 0840            | 1545            | 425            | .06      | S     | PLANT      |
| MFG  | P         | 04/06/ 83 | TRAY LOADER       | LEDFORD, J.    | 8357     | 0815       | 1135      | 200       | --        | <del>0815</del> | <del>1135</del> | <del>200</del> |          | N     | PLANT      |
| MFG  | P         | 04/07/ 83 | TRAY LOADER       | LEDFORD, J.    | 8357     | 0815       | 1135      | 186       | .03       | <del>0815</del> | <del>1135</del> | <del>186</del> | .03      | N     | PLANT      |
| MFG  | P         | 10/11/ 83 | TRAY LOADER       | SALAS, JOHN    | 8385     | 0930       | 1450      | 320       | .04       | 0930            | 1450            | 320            | .04      | N     | PLANT      |
| MFG  | P         | 10/24/ 83 | TRAY LOADER       | LEDFORD, J.    | 83029    | 1617       | 1954      | 227       | .02       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | TRAY LOADER       | LEDFORD, J.    | 83030    | 1954       | 2235      | 161       | .03       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | TRAY LOADER       | LEDFORD, J.    |          |            |           |           |           | 1647            | 2235            | 388            | .02      | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | TRAY LOADER       | ZARAGOZA, R.   | 83031    | 0749       | 1447      | 398       | .06       | 0749            | 1447            | 398            | .06      | N     | CORPORATE  |
| MFG  | P         | 06/26/ 84 | TRAY LOADER       | VILLALPANDO, A | 718      | 0830       | 1430      | 360       | .04       | 0830            | 1430            | 360            | .04      | N     | PLANT      |
| MFG  | P         | 08/29/ 84 | TRAY LOADER       | LEDFORD, J.    | 735      | 0821       | 1432      | 371       | .03       | 0821            | 1432            | 371            | .03      | N     | PLANT      |
| MFG  | P         | 10/29/ 84 | TRAY LOADER       | VILLALPANDO, A | 84022    | 0904       | 1440      | 336       | .08       | <del>0904</del> | <del>1440</del> | <del>336</del> | .08      | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | TRAY LOADER       | VILLALPANDO, A | 84023    | 0735       | 1040      | 185       | .13       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | TRAY LOADER       | VILLALPANDO, A | 84024    | 1040       | 1440      | 240       | .04       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 11/01/ 84 | TRAY LOADER       | VILLALPANDO, A |          |            |           |           |           | 0735            | 1440            | 425            | .08      | N     | CORPORATE  |
| MFG  | P         | 12/08/ 81 | TRAY LOADER/TRUCK | SANIGA, E.     | 0619     | 0733       | 1415      | 402       | .02       | 0733            | 1415            | 402            | .02      | N     | PLANT      |
| MFG  | P         | 03/30/ 82 | TRAY LOADER/TRUCK | CHAVEZ, A.     | 0640     | 0809       | 1452      | 403       | .12       | 0809            | 1452            | 403            | .12      |       | PLANT      |
| MFG  | P         | 04/16/ 82 | TRAY LOADER/TRUCK | COLE, H.       | 0658     | 0826       | 1437      | 371       | .13       | 0826            | 1437            | 371            | .13      | N     | PLANT      |
| MFG  | P         | 05/24/ 82 | TRAY LOADER/TRUCK | COLE, H.       | 82009    | 1052       | 1440      | 228       | .07       | <del>1052</del> | <del>1440</del> | <del>228</del> | .07      | N     | CORPORATE  |
| MFG  | P         | 03/18/ 83 | TRAY LOADER/TRUCK | SANIGA, GEAN   | 8302     | 0750       | 1418      | 388       | .03       | 0750            | 1418            | 388            | .03      | N     | PLANT      |
| MFG  | P         | 03/21/ 83 | TRAY LOADER/TRUCK | CHAVEZ, A.     | 8306     | 0840       | 1440      | 360       | .07       | 0840            | 1440            | 360            | .07      | N     | PLANT      |
| MFG  | P         | 04/07/ 83 | TRAY LOADER/TRUCK | COLE, H.       | 8369     | 0859       | 1445      | 346       | .02       | 0859            | 1445            | 346            | .02      | N     | PLANT      |
| MFG  | P         | 10/11/ 83 | TRAY LOADER/TRUCK | SANIGA, E.     | 8391     | 0958       | 1446      | 287       | .03       | <del>0958</del> | <del>1446</del> | <del>287</del> | .03      | N     | PLANT      |
| MFG  | P         | 10/18/ 83 | TRAY LOADER/TRUCK | CHAVEZ, A.     | 3122     | 0839       | 1455      | 376       | .03       | 0839            | 1455            | 376            | .03      | N     | PLANT      |
| MFG  | P         | 10/24/ 83 | TRAY LOADER/TRUCK | COLE, H.       | 83032    | 1624       | 2000      | 216       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | TRAY LOADER/TRUCK | COLE, H.       | 83033    | 2000       | 2237      | 157       | .01       |                 |                 |                |          | N     | CORPORATE  |
| MFG  | P         | 10/24/ 83 | TRAY LOADER/TRUCK | COLE, H.       |          |            |           |           |           | 1624            | 2237            | 373            | .01      | N     | CORPORATE  |
| MFG  | P         | 10/25/ 83 | TRAY LOADER/TRUCK | CHANEY, A.     | 83034    | 0749       | 1446      | 417       | .04       | 0749            | 1446            | 417            | .04      | N     | CORPORATE  |
| MFG  | P         | 06/26/ 84 | TRAY LOADER/TRUCK | SANIGA, E.     | 717      | 0829       | 1449      | 380       | .03       | 0829            | 1449            | 380            | .03      | N     | PLANT      |
| MFG  | P         | 10/29/ 84 | TRAY LOADER/TRUCK | SANIGA, G      | 84025    | 0913       | 1442      | 329       | .04       | <del>0913</del> | <del>1442</del> | <del>329</del> | .04      | N     | CORPORATE  |
| MFG  | P         | 05/23/ 85 | TRAY LOADER/TRUCK | COLE, H.       | 008      | 0840       | 1432      | 352       | .02       | 0840            | 1432            | 352            | .02      | N     | PLANT      |
| MFG  | P         | 05/24/ 85 | TRAY LOADER/TRUCK | LEDFORD, J.    | 010      | 0835       | 1400      | 325       | .03       | 0835            | 1400            | 325            | .03      | N     | PLANT      |
| MFG  | P         | 06/19/ 85 | TRAY LOADER/TRUCK | CHAVEZ, A.     | 036      | 0826       | 1440      | 374       | .04       | 0826            | 1440            | 374            | .04      | N     | PLANT      |
| MFG  | A         | 05/27/ 82 | WAREHOUSE         |                | 82035    | 0700       | 1428      | 448       | .14       |                 |                 |                |          |       | CORPORATE  |
| MFG  | A         | 05/27/ 82 | WAREHOUSE         |                | 82036    | 0705       | 1429      | 444       | .14       |                 |                 |                |          |       | CORPORATE  |
| MFG  | A         | 10/27/ 83 | WAREHOUSE         |                | 83001    | 1047       | 1500      | 253       | .08       |                 |                 |                |          |       | CORPORATE  |
| MFG  | A         | 07/14/ 77 | WILLOW MILL       |                |          |            |           |           | .05       |                 |                 |                |          |       | PLANT      |
| MFG  | E         | 10/27/ 83 | WILLOW MILL       |                | 83012    | 1057       | 1502      | 245       | .28       |                 |                 |                |          |       | CORPORATE  |
| MFG  |           | 07/25/ 79 | WILLOW MILL (W)   |                |          |            |           |           | .90       |                 |                 |                |          |       | PLANT      |
| OK   | P         | 08/23/ 84 | Q.C. INSPECTOR    | GRANILLO, B.   | 762      | 0811       | 1416      | 365       | .03       | 0811            | 1416            | 365            | .03      | S     | PLANT      |
| SHP  | P         | 11/05/ 75 | FORKLIFT          | AMPARAM, M.    |          |            |           |           | .46       |                 |                 |                |          |       | PLANT      |
| SHP  | P         | 03/29/ 82 | GENERAL HELPER    | HAGERMAN, D.   | 0638     | 0829       | 1443      | 374       | .09       | 0829            | 1443            | 374            | .09      | N     | PLANT      |
| SHP  | P         | 03/29/ 82 | LOADER            | ATENCIO, S.    | 0637     | 0824       | 1512      | 408       | .06       | 0824            | 1512            | 408            | .06      | N     | PLANT      |
| SHP  | P         | 03/23/ 83 | LOADER            | TAYLOR, R.     | 8319     | 0830       | 1535      | 425       | .09       | 0830            | 1535            | 425            | .09      | N     | PLANT      |
| SHP  | P         | 10/12/ 83 | LOADER            | TAYLOR, BRIAN  | 8396     | 0917       | 1548      | 391       | .03       | 0917            | 1548            | 391            | .03      | N     | PLANT      |
| SHP  | P         | 12/20/ 85 | LOADER            | TAYLOR, B.     | 0639     | 0846       | 1446      | 360       | .09       | 0846            | 1446            | 360            | .09      | N     | PLANT      |
| SHP  | P         | 11/05/ 75 | SUPERVISOR        | PRICE, L       |          |            | 120       |           | .004      |                 |                 |                |          |       | PLANT      |
| SHP  | P         | 12/01/ 81 | SUPERVISOR        | GLOVER, D.     | 0610     | 0830       | 1610      | 460       | .03       | 0830            | 1610            | 460            | .03      | N     | PLANT      |
| SHP  | P         | 03/20/ 81 | TRUCK OPERATOR    | FONSECA, R.    | 0318     | 0809       | 1233      | 264       | .08       |                 |                 |                |          | N     | PLANT      |

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DATE: Wed Apr 2 1986

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RIVERSIDE A/C PIPE PLANT  
1972-1984 ASBESTOS MONITORING SAMPLE RESULTS

| PER/ | TEST |           |                |               |  | SAMP  | SAMP  | SAMP | SAMP | SAMP | TWA   | TWA  | TWA | TWA  |       | SAMPLED |
|------|------|-----------|----------------|---------------|--|-------|-------|------|------|------|-------|------|-----|------|-------|---------|
| DEPT | AREA | DATE      | JOB TITLE/AREA | EMPLOYEE NAME |  | NO.   | START | STOP | MINS | F/CC | START | STOP | MIN | F/CC | RESP. | BY      |
| SHP  | P    | 03/20/ 81 | TRUCK OPERATOR | FONSECA, R.   |  | 0319  | 1233  | 1500 | 147  | .06  |       |      |     |      | N     | PLANT   |
| SHP  | P    | 03/20/ 81 | TRUCK OPERATOR | FONSECA, R.   |  |       |       |      |      |      | 0809  | 1500 | 411 | .07  | N     | PLANT   |
| SHP  | P    | 11/30/ 81 | TRUCK OPERATOR | CORRAL, R.    |  | 0604  | 0857  | 1612 | 435  | .03  | 0857  | 1612 | 435 | .03  | N     | PLANT   |
| SHP  | P    | 03/23/ 83 | TRUCK OPERATOR | FONSECA, R.   |  | 8318  | 0830  | 1538 | 428  | .04  | 0830  | 1538 | 428 | .04  | N     | PLANT   |
| SHP  | P    | 03/28/ 83 | TRUCK OPERATOR | CORRAL, R.    |  | 8332  | 0825  | 1537 | 432  | .08  | 0825  | 1537 | 432 | .08  | N     | PLANT   |
| SHP  | P    | 10/12/ 83 | TRUCK OPERATOR | FONSECA, R.   |  | 8394  | 0916  | 1547 | 391  | .04  | 0916  | 1547 | 391 | .04  | N     | PLANT   |
| SHP  | P    | 10/13/ 83 | TRUCK OPERATOR | BIVENS, JANET |  | 8393B | 0818  | 1254 | 276  | .06  | 0818  | 1254 | 276 | .06  | N     | PLANT   |

RECORDS SELECTED 00976

CTD021425

S-11' C-7 3:15 PM  
PIPE MACHINE REPORT

| SIZE & CLASS                     | NO. PCS. MFR'D | COMMENTS       | B        | 1ST SHIFT |
|----------------------------------|----------------|----------------|----------|-----------|
| 16"200                           | 32             | Pipe Look Good |          |           |
| 14"150                           | 119            |                |          |           |
| 12"150                           | 12             |                |          |           |
| 15"FT-45PM                       | 2              |                |          |           |
| 24"3300%                         | 8              |                |          |           |
| 16"200TBIC                       | 1              |                |          |           |
| 14"150%                          | 10             |                |          |           |
| 184 Scrap = 0                    |                |                |          |           |
| SHIFT                            | HOUR           | GROSS TIME: 8  | FELT NO. | HOURS     |
| TONS PER                         | DOWN TIME: 0   | TOP 85595      | 29 1/4   |           |
|                                  | NET TIME: 8    | BOT. 71734     | 27 3/4   |           |
| 112.56% FOREMAN C.W. Nightlander |                |                |          |           |

| SIZE & CLASS                     | NO. PCS. MFR'D | COMMENTS       | A        | 2ND SHIFT |
|----------------------------------|----------------|----------------|----------|-----------|
| 14"150                           | 101            | Pipe Look Good |          |           |
| 12"150                           | 140            |                |          |           |
| 24"3300%                         | 10             |                |          |           |
| 251                              |                |                |          |           |
| Scrap = 0                        |                |                |          |           |
| SHIFT                            | HOUR           | GROSS TIME: 8  | FELT NO. | HOURS     |
| TONS PER                         | DOWN TIME: 0   | TOP 85595      | 37 1/4   |           |
|                                  | NET TIME: 8    | BOT. 71734     | 35 3/4   |           |
| 113.80% FOREMAN C.W. Nightlander |                |                |          |           |

| SIZE & CLASS                        | NO. PCS. MFR'D | COMMENTS       | C        | 3RD SHIFT |
|-------------------------------------|----------------|----------------|----------|-----------|
| 12"150                              | 126            | PIPE LOOK GOOD |          |           |
| 14"150                              | 132            |                |          |           |
| 258                                 |                |                |          |           |
| Scrap = 0                           |                |                |          |           |
| SHIFT                               | HOUR           | GROSS TIME: 8  | FELT NO. | HOURS     |
| TONS PER                            | DOWN TIME: 0   | TOP 85595      | 45 1/4   |           |
|                                     | NET TIME: 8    | BOT. 71734     | 43 3/4   |           |
| 115.61% FOREMAN C.W. Nightlander    |                |                |          |           |
| FELT TONS TOP - 402.11 BOT - 382.11 |                |                |          |           |

MACHINE NO 01 DATE April 11, 1986 FRI  
WD-9FINES 48F 48F 48F  
SCALES 35-8F 45 7 44-1  
BATCHES 4-3 45 7 44-1  
FORMULA NO. 13/15 15 15416

## RAW MATERIAL USAGE

| RAW MATERIALS | TOTAL USAGE (LBS.) |           |           | DAILY TOTAL | UNIT STANDARD COST | EXTENDED STANDARD COST | ACCUMULATED USAGE TO DATE |
|---------------|--------------------|-----------|-----------|-------------|--------------------|------------------------|---------------------------|
|               | 1ST SHIFT          | 2ND SHIFT | 3RD SHIFT |             |                    |                        |                           |
| C & G 3       |                    |           |           |             |                    |                        |                           |
| C & G 4       |                    |           |           |             |                    |                        |                           |
| C & G 5       |                    |           |           |             |                    |                        |                           |
| AK            | 6172               | 6172      | 6173      | 18517       | 27325              | 5059.77                |                           |
| AD            | 3858               | 3858      | 3858      | 11574       | 27325              | 3162.60                |                           |
| AT            | 4630               | 4630      | 4630      | 13890       | 14268              | 1995.72                |                           |
| HT            | 2500               | 2100      | 2200      | 6800        | 28027              | 1901.84                |                           |
| H56           | 3858               | 3858      | 3858      | 11574       | 27400              | 3171.28                |                           |
| 4K500         | 331                | 772       | 661       | 1764        | 30261              | 533.80                 |                           |
| TOTAL         | 21349              | 21390     | 21380     | 64119       | 27469              | 15625.01               |                           |
| TARE          | 21202              | 20716     | 20260     | 62177       |                    |                        |                           |

CTD021428

|                 |        |        |        |           |       |            |  |
|-----------------|--------|--------|--------|-----------|-------|------------|--|
| CEMENT          | 92276  | 58890  | 57600  | 172766    | 07250 | 6305.90    |  |
| SILICA          | 37496  | 39240  | 38268  | 115004    | 07208 | 2564.52    |  |
| FINES           | 10795  | 11323  | 11042  | 33160     |       |            |  |
| DAILY TOTAL     | 125916 | 109453 | 106910 | 342279    |       | 24495.42   |  |
| BROUGHT FORWARD |        |        |        | 2762.06   |       | 176.347.2  |  |
| ACCUM.          |        |        |        | 3,347,215 |       | 200,812.78 |  |

|                    | NO. PCS. MFR'D | TOTAL FEET | TOTAL WEIGHT | TOTAL EXTD. STANDARD COST |
|--------------------|----------------|------------|--------------|---------------------------|
| DAILY TOTALS       | 693            | 9009       | 436840       | 23815.46                  |
| BROUGHT FORWARD    | 9619           | 125,047    | 3347878      | 177019.20                 |
| ACCUMULATED TOTALS | 10312          | 134056     | 3,784718     | 200834.66                 |

|                     |       |           |        |         |
|---------------------|-------|-----------|--------|---------|
| TOTAL FIBER BLENDS  | DAILY | AVE 62177 | ACCUM. | 499,599 |
| TOTAL FIBER BATCHES | DAILY | 64119     | ACCUM. | 501,000 |

|                       |                    |                       |                |      |
|-----------------------|--------------------|-----------------------|----------------|------|
| 113.07% + 1942 + 1401 |                    |                       |                |      |
| DAILY YIELD           | DAILY VARIATION    | ACCUMULATED VARIATION | AVE DAILY      |      |
| 114.00%               | < 680.03 >         | < 8.04 >              |                |      |
| GROSS HOURS           | NET HOURS          | TONS                  | TONS           |      |
| DAILY                 | 24.00              | 24.00                 | 218.42         | 9.10 |
| ACCUM.                | 224.00             | 213.25                | 1892.36        | 8.87 |
| TOTAL BATCHES - 21    | TOTAL SCALES - 132 | W44                   | TONS - 1052.43 |      |

| SIZE & CLASS              | NO. PCS. MFR'D | COMMENTS             | SHIFT     |
|---------------------------|----------------|----------------------|-----------|
| 8"150                     | 499            | Pipe Look Good       | 1ST SHIFT |
| 6"200 FM                  | 3              |                      |           |
| 8"150 1/2                 | 44             | started Pipe Machine |           |
| 6"150 1/2                 | 40             | AT 6:45 AM           |           |
| 586                       |                |                      |           |
| Scrap = 0                 |                |                      |           |
| SHIFT                     | HOUR           | GROSS TIME: 8        | FELT NO.  |
| DOWN TIME: 0              |                | NET TIME: 8          | HOURS     |
| TOP                       | 85594          | 126 3/4              |           |
| BOT.                      | 70654          | 126 3/4              |           |
| FOREMAN C.W. Voughtlander |                |                      |           |
| 104.50%                   |                |                      |           |

| SIZE & CLASS        | NO. PCS. MFR'D | COMMENTS       | SHIFT     |
|---------------------|----------------|----------------|-----------|
| 8"150               | 513            | Pipe Look Good | 2ND SHIFT |
| 6"200 FM            | 4              |                |           |
| 8"150 1/2           | 33             |                |           |
| 6"150 1/2           | 33             |                |           |
| 583                 |                |                |           |
| Scrap = 0           |                |                |           |
| SHIFT               | HOUR           | GROSS TIME: 8  | FELT NO.  |
| DOWN TIME: 0        |                | NET TIME: 8    | HOURS     |
| TOP                 | 85594          | 132 3/4        |           |
| BOT.                | 70654          | 132 3/4        |           |
| FOREMAN VIGHTLANDER |                |                |           |
| 109.80%             |                |                |           |

| SIZE & CLASS                               | NO. PCS. MFR'D | COMMENTS       | SHIFT     |
|--------------------------------------------|----------------|----------------|-----------|
| 8"150                                      | 530            | PIPE LOOK GOOD | 3RD SHIFT |
| 6"200                                      | 3              | FM             |           |
| 8"150                                      | 44             | 1/2            |           |
| DOWN 6 MIN.'S                              |                |                |           |
| 3:08 A.M. / 3:14 A.M.                      |                |                |           |
| REPLACED SPROCKET ON MAUDRELL IN CONVEYOR. |                |                |           |
| SCRAP = 0                                  |                |                |           |
| SHIFT                                      | HOUR           | GROSS TIME: 8  | FELT NO.  |
| DOWN TIME: 0                               |                | NET TIME: 8    | HOURS     |
| TOP                                        | 85594          | 142 3/4        |           |
| BOT.                                       | 70654          | 142 3/4        |           |
| FOREMAN                                    |                |                |           |
| 111.97%                                    |                |                |           |
| FELT TOP - 1257.45 BOT - 1257.45           |                |                |           |

S-10' C-7' 3:00 PM  
PIPE MACHINE REPORT

| MACHINE NO. 01       |           | DATE April 7, 1986 |           | MON WED-5   |                    |                        |                           |
|----------------------|-----------|--------------------|-----------|-------------|--------------------|------------------------|---------------------------|
| FINE 149 46 45 6     |           |                    |           |             |                    |                        |                           |
| BATCHES 149 46 45 6  |           |                    |           |             |                    |                        |                           |
| FORMULA NO. 10 10 10 |           |                    |           |             |                    |                        |                           |
| TOTAL USAGE (LBS.)   |           |                    |           | DAILY TOTAL | UNIT STANDARD COST | EXTENDED STANDARD COST | ACCUMULATED USAGE TO DATE |
| RAW MATERIALS        | 1ST SHIFT | 2ND SHIFT          | 3RD SHIFT |             |                    |                        |                           |
| C & G 3              |           |                    |           |             |                    |                        |                           |
| C & G 4              |           |                    |           |             |                    |                        |                           |
| C & G 5              |           |                    |           |             |                    |                        |                           |
| AK                   | 6173      | 5291               | 5291      | 16755       | 27325              | 4578.38                |                           |
| AD                   | 3858      | 3307               | 3307      | 10472       | 27325              | 2861.47                |                           |
| AZ                   | 4620      | 3968               | 3968      | 18546       | 14368              | 1805.48                |                           |
| HT                   | 2100      | 1800               | 1800      | 5700        | 25027              | 1426.54                |                           |
| H56                  | 3086      | 2646               | 2646      | 8378        | 27400              | 2295.57                |                           |
| H5500                | 772       | 661                | 661       | 2094        | 30261              | 633.67                 |                           |
| TOTALS               | 20619     | 17673              | 17673     | 55965       | 124302             | 13621.03               |                           |
| TARE                 | 18855     | 17692              | 17308     | 53855       |                    |                        |                           |
| CTD021429            |           |                    |           |             |                    |                        |                           |
| CEMENT               | 65152     | 60216              | 58902     | 184270      | 03650              | 6725.86                |                           |
| SILICA               | 42728     | 40112              | 39236     | 122076      | 02228              | 2719.85                |                           |
| FINES                | 12312     | 11567              | 11284     | 35163       |                    |                        |                           |
| DAILY TOTAL          | 14681     | 12945              | 127095    | 39744       |                    | 2304.74                |                           |
| BROUGHT FORWARD      |           |                    |           | 1473216     |                    | 57821.93               |                           |
| ACCUM.               |           |                    |           | 1870790     |                    | 112828.67              |                           |

|                    | NO. PCS. MFR'D | TOTAL FEET | TOTAL WEIGHT | TOTAL EXTD. STANDARD COST |
|--------------------|----------------|------------|--------------|---------------------------|
| DAILY TOTALS       | 1746           | 22698      | 429,502      | 22155.63                  |
| BROUGHT FORWARD    | 3521           | 45,773     | 1,679,853    | 90687.74                  |
| ACCUMULATED TOTALS | 5267           | 68,471     | 2,109,355    | 112843.37                 |

| TOTAL FIBER BLENDS  | DAILY | TOTAL | ACCUM. |
|---------------------|-------|-------|--------|
| TOTAL FIBER BATCHES | 149   | 53855 | 283798 |
|                     |       | 55965 | 281924 |

|                    |                    |                       |                    |
|--------------------|--------------------|-----------------------|--------------------|
| 112.75%            | + 2110             | < 1874 >              |                    |
| DAILY YIELD        | DAILY VARIATION    | ACCUMULATED VARIATION | AUG DAILY TONS     |
| 108.63%            | < 891.11 >         | < 25.307              |                    |
| GROSS HOURS        | NET HOURS          | TONS                  | TONS HR.           |
| DAILY              | 24.00              | 24.00                 | 214.75 8.95 210.94 |
| ACCUM.             | 124.00             | 119.00                | 1054.68 8.86       |
| TOTAL BATCHES - 19 | TOTAL SCALES - 140 | WKLY TONS - 214.75    |                    |

5-13' C-8' 3:00 PM  
PIPE MACHINE REPORT

[illegible][illegible][illegible]

MACHINE NO 01

DATE April 8, 1986

TUES  
440-6

45F 45F 45F  
46 45 45  
6 6 6

FORMULA NO. 10 10 10

### RAW MATERIAL USAGE

| RAW MATERIALS   | TOTAL USAGE (LBS.) |           |           | DAILY TOTAL | UNIT STANDARD COST | EXTENDED STANDARD COST | ACCUMULATED USAGE TO DATE |
|-----------------|--------------------|-----------|-----------|-------------|--------------------|------------------------|---------------------------|
|                 | 1ST SHIFT          | 2ND SHIFT | 3RD SHIFT |             |                    |                        |                           |
| C & G 3         |                    |           |           |             |                    |                        |                           |
| C & G 4         |                    |           |           |             |                    |                        |                           |
| C & G 5         |                    |           |           |             |                    |                        |                           |
| AK              | 5291               | 5291      | 5291      | 15873       | 27325              | 4337.90                |                           |
| AD              | 3307               | 3307      | 3307      | 9921        | 27325              | 2710.91                |                           |
| AZ              | 3968               | 3968      | 3968      | 11904       | 14368              | 1710.37                |                           |
| HT              | 1800               | 1800      | 1800      | 5400        | 20027              | 1091.46                |                           |
| H36             | 2646               | 2646      | 2646      | 7938        | 27400              | 2175.01                |                           |
| HK200           | 661                | 661       | 661       | 1983        | 30261              | 600.08                 |                           |
| TOTALS          | 17673              | 17673     | 17673     | 53014       | 24303              | 12885.13               |                           |
| TARE            | 17310              | 17334     | 17693     | 52337       |                    |                        |                           |
|                 |                    |           |           |             |                    |                        |                           |
|                 |                    |           |           |             |                    |                        |                           |
|                 |                    |           |           |             |                    |                        |                           |
|                 |                    |           |           |             |                    |                        |                           |
| CEMENT          | 58824              | 58896     | 60206     | 177926      | 03600              | 6445.76                |                           |
| SILICA          | 39236              | 39240     | 40112     | 118588      | 02228              | 2642.14                |                           |
| FINES           | 11298              | 11326     | 11342     | 34166       | —                  | —                      |                           |
| DAILY TOTAL     | 127001             | 127195    | 129532    | 383728      |                    | 22023.03               |                           |
| BROUGHT FORWARD |                    |           |           | 1870790     |                    | 112868.68              |                           |
| ACCUM.          |                    |           |           | 2251529     |                    | 134891.70              |                           |

CTD021430

|                       | NO. PCS.<br>MFD. | TOTAL FEET | TOTAL WEIGHT | TOTAL EXTD.<br>STANDARD COST |
|-----------------------|------------------|------------|--------------|------------------------------|
| DAILY<br>TOTALS       | 1820             | 23,660     | 431,950      | 22,358.19                    |
| BROUGHT<br>FORWARD    | 5267             | 68,471     | 2,109,355    | 114,843.37                   |
| ACCUMULATED<br>TOTALS | 7087             | 92,131     | 2,541,311    | 135,201.56                   |

|                        |       |           |        |         |
|------------------------|-------|-----------|--------|---------|
| TOTAL<br>FIBER BLENDS  | DAILY | 4WE 52337 | ACCUM. | 336,135 |
| TOTAL<br>FIBER BATCHES |       | 53019     |        | 334,943 |

112.72% + 683 < 1192 >

| DAILY YIELD | DAILY VARIATION | ACCUMULATED VARIATION | AUG<br>DAILY<br>TONS<br>211.75 |             |
|-------------|-----------------|-----------------------|--------------------------------|-------------|
| 112.77%     | \$ 335.16       | \$ 309.86             |                                |             |
|             | GROSS HOURS     | NET HOURS             | TONS                           | TONS<br>MR. |
| DAILY       | 24.00           | 24.00                 | 215.98                         | 9.00        |
| ACCUM.      | 148.00          | 143.00                | 1270.66                        | 8.89        |

TOTAL  
BATCHES - 18

TOTAL  
SCALES - 136

WKLY  
TONS - 430.73

S-S' & C-9' 3:05 P.M.  
PIPE MACHINE REPORT

|              |  |                |  |                                              |                    |           |
|--------------|--|----------------|--|----------------------------------------------|--------------------|-----------|
| SIZE & CLASS |  | NO. PCB. MFR'D |  | COMMENTS                                     | B                  | 1ST SHIFT |
| 8"150        |  | 588            |  | Pipe Leak Good                               |                    |           |
| 6"200FM      |  | 3              |  | DOWN 16 MIN TO CHANGE CYLINDERS & CLEAN PUMP |                    |           |
|              |  |                |  |                                              |                    |           |
|              |  |                |  |                                              |                    |           |
|              |  | 591            |  |                                              |                    |           |
|              |  |                |  | SCRAPE                                       |                    |           |
| SHIFT        |  | HOUR           |  | GROSS TIME                                   | FELT NO            |           |
| 8            |  | 8              |  | 8                                            | HOURS              |           |
| DOWN TIME    |  | NET TIME       |  | 1/4                                          |                    |           |
| 68.49        |  | 8.54           |  | 7 3/4                                        | TOP 85594 174 1/2  |           |
| 113.10%      |  |                |  | FOREMAN                                      | BOT. 70654 174 1/2 |           |
|              |  |                |  | CW Vioth Harder                              |                    |           |

[illegible]

| SIZE & CLASS |  | NO. PCS. MFR'D |  | COMMENTS "C" 3RD SHIFT                                                              |  |
|--------------|--|----------------|--|-------------------------------------------------------------------------------------|--|
|              |  |                |  | PIPE LOOK GOOD                                                                      |  |
| 8"-2000      |  | 243            |  | STORM DRAIN<br>DOWN 6 MIN.'S<br>PIPE BACKED UP<br>STRIP STATION<br>DOWN.<br><br>705 |  |
| 10"-2000     |  | 462            |  |                                                                                     |  |
|              |  |                |  |                                                                                     |  |
|              |  |                |  |                                                                                     |  |
|              |  |                |  | SCRAP-O                                                                             |  |
| SHIFT        |  | HOUR           |  | CROSS TIME                                                                          |  |
| 1949         |  | 8:16           |  | DOWN                                                                                |  |
| 6/11         |  | 8:16           |  | TIME                                                                                |  |
|              |  |                |  | NET                                                                                 |  |
|              |  |                |  | TIME                                                                                |  |
| TONE PER     |  | FELT NO.       |  | HOURS                                                                               |  |
| 113          |  | 85594          |  | 190                                                                                 |  |
| 63990        |  | 10654          |  | 190                                                                                 |  |
|              |  | FOR IN         |  |                                                                                     |  |
| FELT         |  | TOP - 1683.17  |  | BOT - 1683.17                                                                       |  |
| TONS         |  |                |  |                                                                                     |  |

| MACHINE NO        |        | DATE                          |        | WED                       |                 |
|-------------------|--------|-------------------------------|--------|---------------------------|-----------------|
| 01                |        | April 9, 1986                 |        | WD-7                      |                 |
| FINES 43F 40F 35F |        | -OF                           |        |                           |                 |
| 43 5 30-16 41-4   |        |                               |        |                           |                 |
| 43 5 30-16 41-4   |        |                               |        |                           |                 |
| FORMULA NO.       |        | 10 10/12 12 14 13             |        | RAW MATERIAL USAGE        |                 |
| RAW MATERIALS     |        | TOTAL USAGE (LBS.)            |        | DAILY TOTAL               |                 |
|                   |        | 1ST SHIFT 2ND SHIFT 3RD SHIFT |        | UNIT STANDARD COST        |                 |
|                   |        |                               |        | EXTENDED STANDARD COST    |                 |
|                   |        |                               |        | ACCUMULATED USAGE TO DATE |                 |
| C & G 3           |        |                               |        |                           |                 |
| C & G 4           |        |                               |        |                           |                 |
| C & G 5           |        |                               |        |                           |                 |
| AK                | 4409   | 5291                          | 4410   | 14110                     | 27325 3855.50   |
| AD                | 2756   | 3307                          | 2755   | 8818                      | 12925 2409.58   |
| AI                | 3307   | 3968                          | 3306   | 10581                     | 14968 1520.28   |
| AT                | 1500   | 1800                          | 1600   | 4900                      | 12527 1226.32   |
| MS6               | 2205   | 2646                          | 2205   | 7056                      | 27400 1933.34   |
| 44500             | 551    | 661                           | 441    | 1653                      | 30261 500.21    |
| TOTALS            | 14728  | 17673                         | 14717  | 47118                     | 124291 11445.23 |
| TARE              | 16555  | 16411                         | 13104  | 46070                     |                 |
| CTD021431         |        |                               |        |                           |                 |
| CEMENT            | 56286  | 60180                         | 58900  | 175366                    | 03650 6400.86   |
| SILICA            | 37492  | 40114                         | 39240  | 116846                    | 02228 2603.33   |
| FINES             | 10786  | 11502                         | 11337  | 33625                     | — —             |
| DAILY TOTAL       | 119291 | 129529                        | 124194 | 373014                    | 20449.48        |
| BROUGHT FORWARD   |        |                               |        | 2254,528                  | 12481.70        |
| ACCUM.            |        |                               |        | 2127543                   | 15531.12        |

|                       | NO. PCS.<br>MFD. | TOTAL FEET | TOTAL WEIGHT | TOTAL EXTD.<br>STANDARD COST |
|-----------------------|------------------|------------|--------------|------------------------------|
| DAILY<br>TOTALS       | 1942             | 25246      | 419 495      | 20283.50                     |
| BROUGHT<br>FORWARD    | 7087             | 92,131     | 2,541,311    | 135,201.56                   |
| ACCUMULATED<br>TOTALS | 9029             | 117,377    | 2,960,806    | 155,485.06                   |

|                     |       |            |        |         |
|---------------------|-------|------------|--------|---------|
| TOTAL FIBER BLENDS  | DAILY | TAKE 46070 | ACCUM. | 382,205 |
| TOTAL FIBER BATCHES |       | 47118      |        | 382,061 |

|                       |                 |                       |              |
|-----------------------|-----------------|-----------------------|--------------|
| 112.68% $\times$ 1048 |                 | < 1447                |              |
| DAILY YIELD           | DAILY VARIATION | ACCUMULATED VARIATION |              |
| 112.78%               | \$ < 165.93     | \$ 143.94             |              |
|                       | GROSS HOURS     | NET HOURS             | TONS<br>HR.  |
| DAILY                 | 24.00           | 23.75                 | 209.74 8.23  |
| ACCUM.                | 172.00          | 166.75                | 1480.40 8.88 |

TOTAL BATCHES - 16      TOTAL SCALES - 134      WKLY TONS - 640.47

S-8 & C-7 4:00 P.M.  
PIPE MACHINE REPORT

| SIZE & CLASS |     | NO. PCS. MFR'D |  | COMMENTS                            | 1ST SHIFT       |
|--------------|-----|----------------|--|-------------------------------------|-----------------|
| 18"150       | 43  |                |  | Pipe Look Good                      |                 |
| 16"200       | 5   |                |  | Down 28 min to Check #3 Bally Ball  |                 |
| 8"2000       | 241 |                |  | Down 20 min to Install Top Felt     |                 |
| 18"150 %     | 3   |                |  | Down 15 min to Change Cylinders     |                 |
| 14"150 %     | 6   |                |  | Down 6 min to Check Conch Scales    |                 |
|              |     |                |  | Down 30 min. to Install Bottom Felt |                 |
|              |     |                |  | Mfg = 65 MIN                        | Maint = 28 MIN. |
|              | 298 |                |  | Scrap = 1/2 - 18"150                |                 |

| TONS PER | SHIFT | HOUR | GROSS TIME: |       | NET TIME: |
|----------|-------|------|-------------|-------|-----------|
|          |       |      | DOWN        | TIME. |           |
| 51.82    | 1978  |      | 8           | 1 1/2 | 6 1/2     |

| TOP      | 85594 | 1913 1/4 |
|----------|-------|----------|
| FELT NO. |       | HOURS    |
| TOP      | 85595 | 5 1/4    |
| BOT      | 70654 | 193 1/4  |
| BOT.     | 71734 | 3 3/4    |

| FOREMAN   |
|-----------|
| C.W. Voss |

[illegible]

| SIZE & CLASS                           |           | NO. PCS. MFR'D | COMMENTS                                                                                                                                                                                                                                      |             |          |       |            |           |        |           |           |        |
|----------------------------------------|-----------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------|-------|------------|-----------|--------|-----------|-----------|--------|
| 14"                                    | 150       | 28             | PIPE LOOK GOOD                                                                                                                                                                                                                                |             |          |       |            |           |        |           |           |        |
| 16"                                    | 200       | 38             |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| 18"                                    | 150       | 11             |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| 14"                                    | 150       | 22             | } c/s                                                                                                                                                                                                                                         |             |          |       |            |           |        |           |           |        |
| 18"                                    | 150       | 6              |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| 165                                    |           |                | SCRAP - 0                                                                                                                                                                                                                                     |             |          |       |            |           |        |           |           |        |
| TONS PER                               | SHIFT     | HOUR           | <table border="1"><thead><tr><th>GRASS TIME:</th><th>FELT NO.</th><th>HOURS</th></tr></thead><tbody><tr><td>DOWN TIME:</td><td>TOP 25595</td><td>21 1/4</td></tr><tr><td>NET TIME:</td><td>BOT 71734</td><td>19 3/4</td></tr></tbody></table> | GRASS TIME: | FELT NO. | HOURS | DOWN TIME: | TOP 25595 | 21 1/4 | NET TIME: | BOT 71734 | 19 3/4 |
| GRASS TIME:                            | FELT NO.  | HOURS          |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| DOWN TIME:                             | TOP 25595 | 21 1/4         |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| NET TIME:                              | BOT 71734 | 19 3/4         |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |
| 116.482                                |           |                | FOREMAN George Bunker                                                                                                                                                                                                                         |             |          |       |            |           |        |           |           |        |
| FELT TOP - 168312 - 0 BOT - 173,02 - 0 |           |                |                                                                                                                                                                                                                                               |             |          |       |            |           |        |           |           |        |

|                                                                                     |                    |           |           |                            |                    |                        |                           |
|-------------------------------------------------------------------------------------|--------------------|-----------|-----------|----------------------------|--------------------|------------------------|---------------------------|
| MACHINE NO                                                                          |                    |           |           | DATE                       |                    |                        |                           |
| 01                                                                                  |                    |           |           | April 10, 1986             |                    |                        |                           |
| FINES 33F 40F 42F<br>10 28 40 7 42 7<br>BATCHES 4 40 7 42 7<br>FORMULA NO. 13 13 13 |                    |           |           | - OF<br>RAW MATERIAL USAGE |                    |                        |                           |
| RAW MATERIALS                                                                       | TOTAL USAGE (LBS.) |           |           | DAILY TOTAL                | UNIT STANDARD COST | EXTENDED STANDARD COST | ACCUMULATED USAGE TO DATE |
|                                                                                     | 1ST SHIFT          | 2ND SHIFT | 3RD SHIFT |                            |                    |                        |                           |
| C & G 3                                                                             |                    |           |           |                            |                    |                        |                           |
| C & G 4                                                                             |                    |           |           |                            |                    |                        |                           |
| C & G 5                                                                             |                    |           |           |                            |                    |                        |                           |
| AK                                                                                  | 3526               | 6173      | 6173      | 15872                      | 27325              | 433702                 |                           |
| AD                                                                                  | 2205               | 3858      | 3858      | 9921                       | 27325              | 2710.91                |                           |
| AZ                                                                                  | 2646               | 4630      | 4630      | 11906                      | 14368              | 1710.65                |                           |
| HT                                                                                  | 1600               | 2800      | 2800      | 7200                       | 25027              | 1801.94                |                           |
| H56                                                                                 | 2205               | 3858      | 3858      | 9921                       | 27400              | 2718.35                |                           |
| TOTALS                                                                              | 12182              | 21319     | 21319     | 54820                      | 24283              | 13278.87               |                           |
| TAPE                                                                                | 14169              | 20030     | 21018     | 55217                      |                    |                        |                           |

CTD021432

|                 |        |         |           |         |       |           |
|-----------------|--------|---------|-----------|---------|-------|-----------|
| CEMENT          | 43186  | 52348   | 54960     | 150,494 | 03650 | 5493.03   |
| SILICA          | 28774  | 34880   | 36624     | 100278  | 02328 | 2234.19   |
| FINES           | 8289   | 10044   | 10578     | 28,931  | —     | —         |
| DAILY TOTAL     | 92,431 | 118,591 | 123,503   | 334,523 |       | 21006.09  |
| BROUGHT FORWARD |        |         | 2627,543  |         |       | 155341.12 |
| ACCUM.          |        |         | 2,962,066 |         |       | 176347.21 |

|                       | NO PCS.<br>MFD. | TOTAL FEET | TOTAL WEIGHT | TOTAL EXTD.<br>STANDARD COS |
|-----------------------|-----------------|------------|--------------|-----------------------------|
| DAILY<br>TOTALS       | 590             | 7670       | 387,072      | 21534.14                    |
| BROUGHT<br>FORWARD    | 9029            | 117,377    | 2,960,806    | 155,485.0                   |
| ACCUMULATED<br>TOTALS | 9619            | 125,047    | 3,347,878    | 177019.24                   |

|                        |                       |           |                        |         |
|------------------------|-----------------------|-----------|------------------------|---------|
| TOTAL<br>FIBER BLENDS  | D<br>A<br>I<br>L<br>Y | Tag 55217 | A<br>C<br>C<br>U<br>M. | 437,423 |
| TOTAL<br>FIBER BATCHES |                       | 54820     |                        | 436,881 |

113.03%
< 3977
< 541 =

| DAILY YIELD | DAILY VARIATION |           | ACCUMULATED VARIATION |          |
|-------------|-----------------|-----------|-----------------------|----------|
| 115.57%     | 528.05          |           | \$ 671.99             |          |
|             | GROSS HOURS     | NET HOURS | TONS                  | TONS HR. |
| DAILY       | 24.00           | 22.50     | 193.54                | 8.160    |
| ACCUM.      | 196.00          | 189.25    | 1673.94               | 8.85     |

TOTAL BATCHES - 15
TOTAL SCALES - 115
WEEKLY TONS - 8 =

DATE 4/7/86

## FINISHING DEPARTMENT

|         | MFG TONS       | FIN TONS      |
|---------|----------------|---------------|
| Today:  | <u>219.75</u>  | <u>218.82</u> |
| MTD     | <u>1054.68</u> | <u>903.89</u> |
| %       |                | <u>85.71%</u> |
| Reclass |                | <u>0</u>      |
| %       |                | <u>85.71%</u> |

## PRODUCTION RECAP

[illegible]

TOTAL TONS 218.82 SHIFT #1 94.07 SHIFT #2 105.63 FITTINGS 19.12

05 3.98

Total 05 35.36

✓

CONTROL NO. 86-73

DATE 4/8/86

## FINISHING DEPARTMENT

## PRODUCTION RECAP

**Today:**

MTD

2

**Reclass**

2

MFG TONS

215.98

215170  
123766

FIN TONS

251.20

251170  
115514

1122.67  
20.40

90.927

2000

[illegible]

TOTAL TONS 251.70 SHIFT #1 103.70 SHIFT #2 120.34 FITTINGS 27.66

05 5.11 Total 05 40.47

CONTROL NO. 86-74

## FINISHING DEPARTMENT

DATE.

## PRODUCTION RECAP

**Today:**

MTD

2

**Reclass**

2

MFG TONS

FIN TONS

209,74

220.60

14 FD NO

132/ 20

110570

12/6/27  
95 871

5311

22772

7004514

✓8.89-

[illegible]

TOTAL TONS 220.60 SHIFT #1 111.08 SHIFT #2 89.15 FITTINGS 20.37

05 7.83

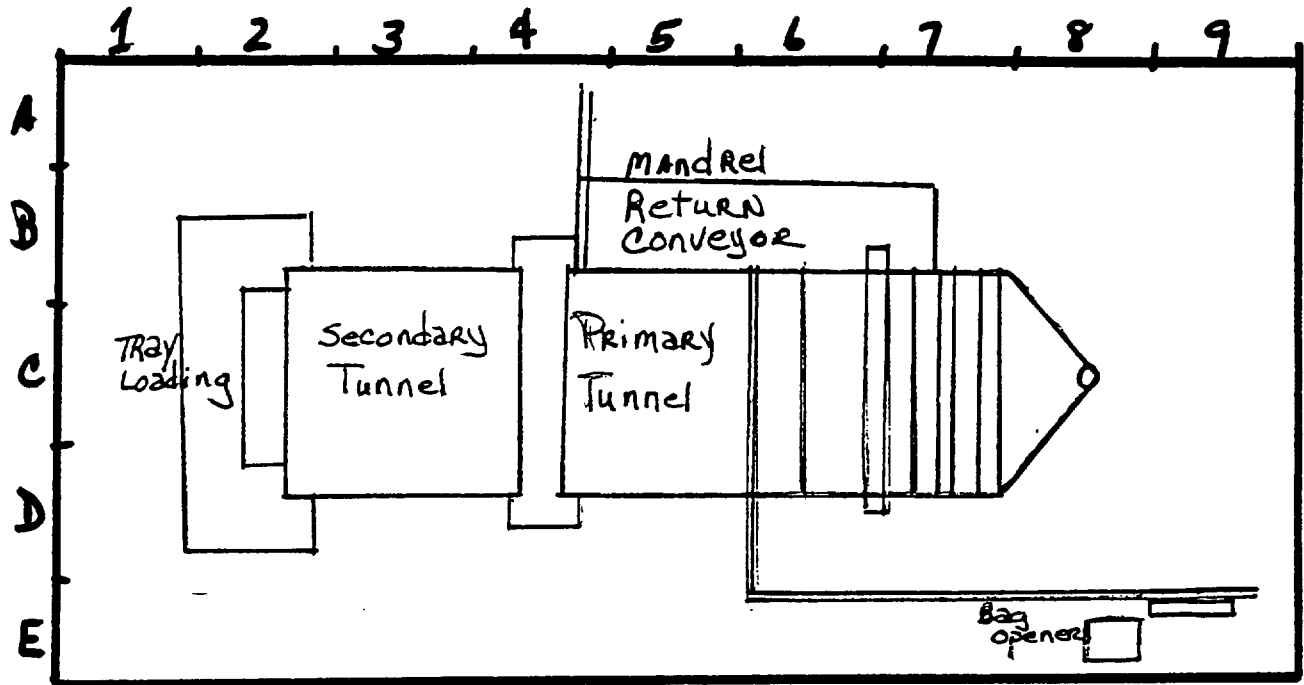
Total 05 48,30

✓





RIVERSIDE A/C PIPE PLANT  
PIPE MACHINE



C

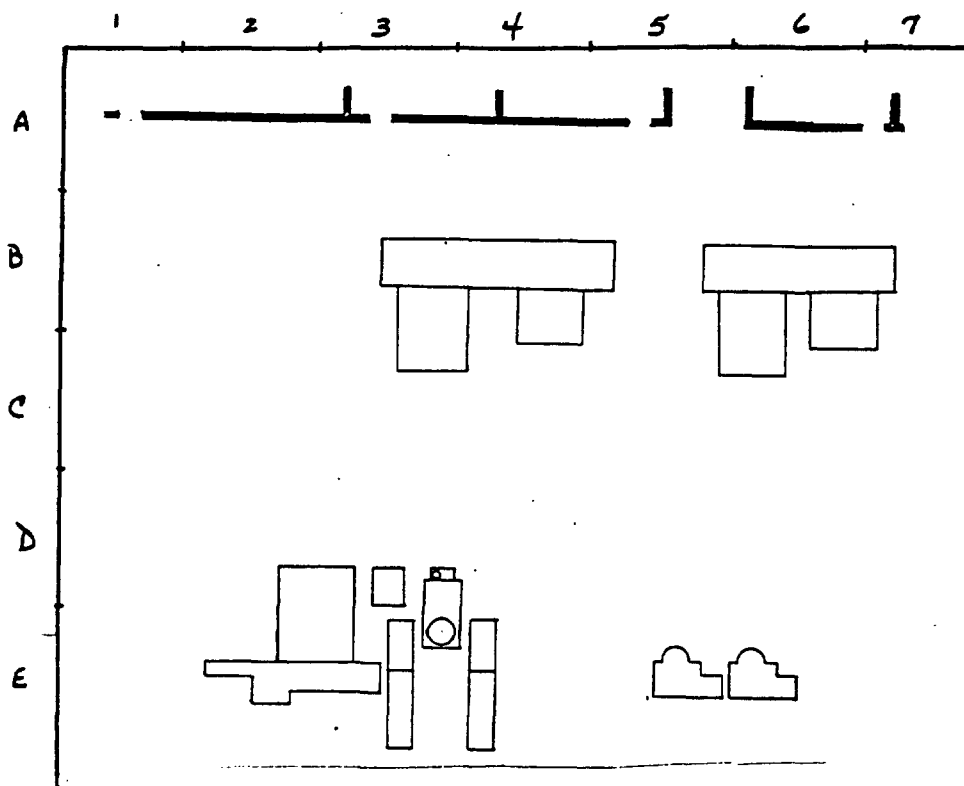
|                                     |          | SOUND PRESSURE LEVEL (dBA) |  | ESTIMATED dBA | DOSIMETER-TWA dBA                  | REMARKS |
|-------------------------------------|----------|----------------------------|--|---------------|------------------------------------|---------|
| POSITION                            | LOCATION |                            |  |               | 8000 Hz                            |         |
| Mixer Operator (3)                  | E 7-9    | 76-82                      |  |               | <del>85.9</del><br><del>85.7</del> | 4/86    |
| Machine Tender (3)                  | B-D 6-9  | 82-92                      |  |               | <del>89.9</del><br><del>88.9</del> | 4/86    |
| Press Operator (3)                  | D 6-7    | 82-85                      |  |               | <del>92.8</del><br><del>90.3</del> | 4/86    |
| Mandrel Handler (3)                 | B 6      | 84-86                      |  |               | <del>92.0</del><br><del>88.9</del> | 4/86    |
| Pipe Stripper (3)                   | A-E 4    | 74-79                      |  |               | 90.9                               | 11/84   |
| Tray Loader (3)                     | A-E 2    | 63-70                      |  |               | <del>82.5</del><br><del>85.2</del> | 4/86    |
| Relief Operator (3)                 | A-E 4-9  | Variable                   |  |               | <del>90.1</del><br><del>88.8</del> | 4/86    |
| Tray Loader /<br>Truck Operator (2) | A-E 1-4  | Variable                   |  |               | 95.4                               | 11/84   |
| Manufacturing<br>Supervisor (4)     | A-E 1-9  | Variable                   |  |               | <del>84.7</del><br><del>80.5</del> | 4/86    |

CTD021438

| 10/84                        |          |                            |     |               |    |    |
|------------------------------|----------|----------------------------|-----|---------------|----|----|
| POSITION                     | LOCATION | SOUND PRESSURE LEVEL (dBA) |     | DOSIMETER-TWA |    |    |
|                              |          | ESTIMATED                  | DBA | 80            | 85 | 90 |
| Mixer Operator (3)           | E 7-9    | 76-82                      |     | 95.7          |    |    |
| Machine Tender (3)           | B-D 6-9  | 82-92                      |     | 88.9          |    |    |
| Press Operator (3)           | D 6-7    | 82-85                      |     | 90.5          |    |    |
| Mandrel Handler (3)          | B 6      | 84-86                      |     | 88.9          |    |    |
| Pipe Stripper (3)            | A-E 4    | 74-79                      |     | 90.9          |    |    |
| Tray Loader (3)              | A-E 2    | 63-70                      |     | 85.2          |    |    |
| Relief Operator (3)          | A-E 4-9  | Variable                   |     | 95.8          |    |    |
| Truck Operator (2)           | A-E 1-4  | Variable                   |     | 95.4          |    |    |
| Manufacturing Supervisor (4) | A-E 1-9  | Variable                   |     | 89.5          |    |    |

CTD021439

RIVERSIDE A/C PIPE PLANT  
FITTINGS AREA



~~10/84~~

| POSITION                             | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA |            | REMARKS |
|--------------------------------------|----------|----------------------------------|------------------|----------------------|------------|---------|
|                                      |          |                                  |                  | 80                   | 85-DATE-90 |         |
| Boring Mill<br>Operator #1           | E 6      | 86-89                            |                  | 92.4                 | 10/83      |         |
| Boring Mill<br>Operator #2           | E 5      | 86-89                            |                  | 92.0                 | 11/84      |         |
| 42" Mill Operator                    | E 3-4    | 84-86                            | 93.0             | 93.7                 | 4/86       | 89.5    |
| Coupling Cut Off<br>Saw Operator (1) | E 2-3    | 85-92                            | 88.9             | 94.7                 | 4/86       |         |
| Saw Operator #1 (1)                  | B-C 6-7  | 81-84                            | 88.5             | 91.2                 | 4/86       |         |
| Saw Operator #2 (1)                  | B-C 3-4  | 81-84                            | 90.1             | 89.2                 | 4/80       |         |

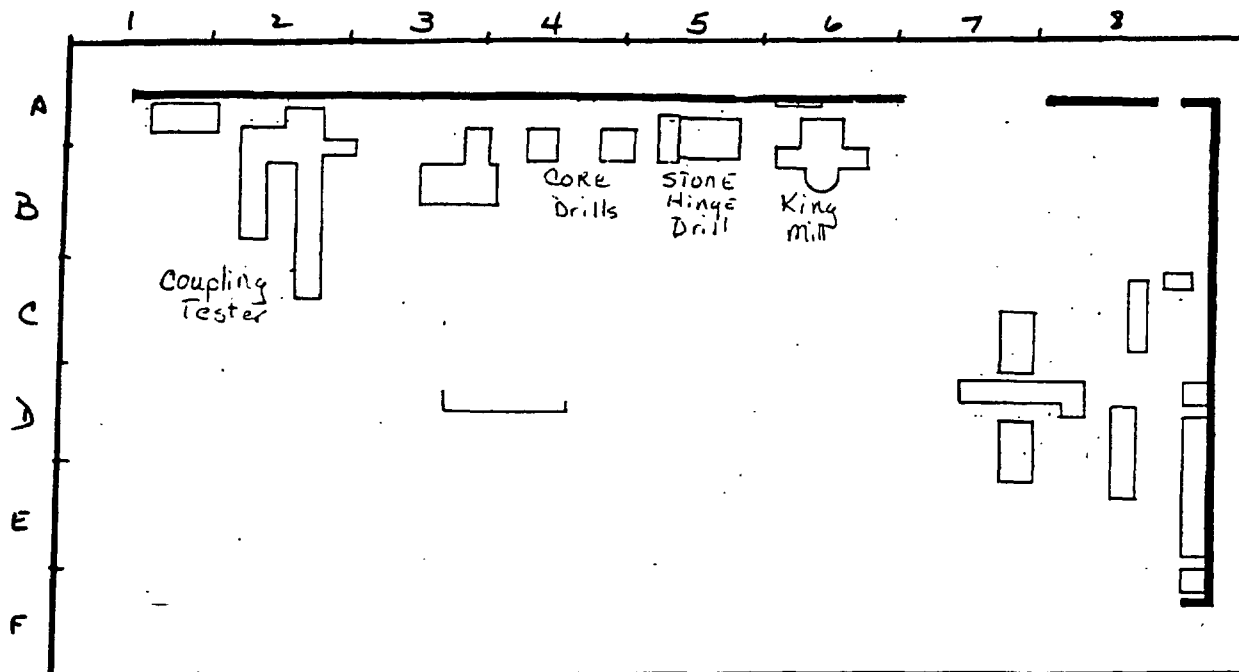
Saw Operators  
Rotate from  
#1 to #2

CTD021440

| 10/84                                |          |                                  |                  |                      |    |                                          |
|--------------------------------------|----------|----------------------------------|------------------|----------------------|----|------------------------------------------|
| POSITION                             | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA |    |                                          |
|                                      |          |                                  |                  | 80                   | 85 | 90                                       |
| Boring Mill<br>Operator #1           | E 6      | 86-89                            |                  | 92.4                 |    |                                          |
| Boring Mill<br>Operator #2           | E 5      | 86-89                            |                  | 92.0                 |    |                                          |
| 42" Mill Operator                    | E 3-4    | 84-86                            |                  | 93.7                 |    | 89.5                                     |
| Coupling Cut Off<br>Saw Operator (1) | E 2-3    | 85-92                            |                  | 94.1                 |    |                                          |
| Saw Operator #1 (1)                  | B-C 6-7  | 81-84                            |                  | 91.2                 |    | Saw Operators<br>Rotate from<br>#1 to #2 |
| Saw Operator #2 (1)                  | B-C 3-4  | 81-84                            |                  | 89.2                 |    |                                          |

CTD021441

RIVERSIDE A/C PIPE PLANT  
FITTINGS AREA



~~10/84~~

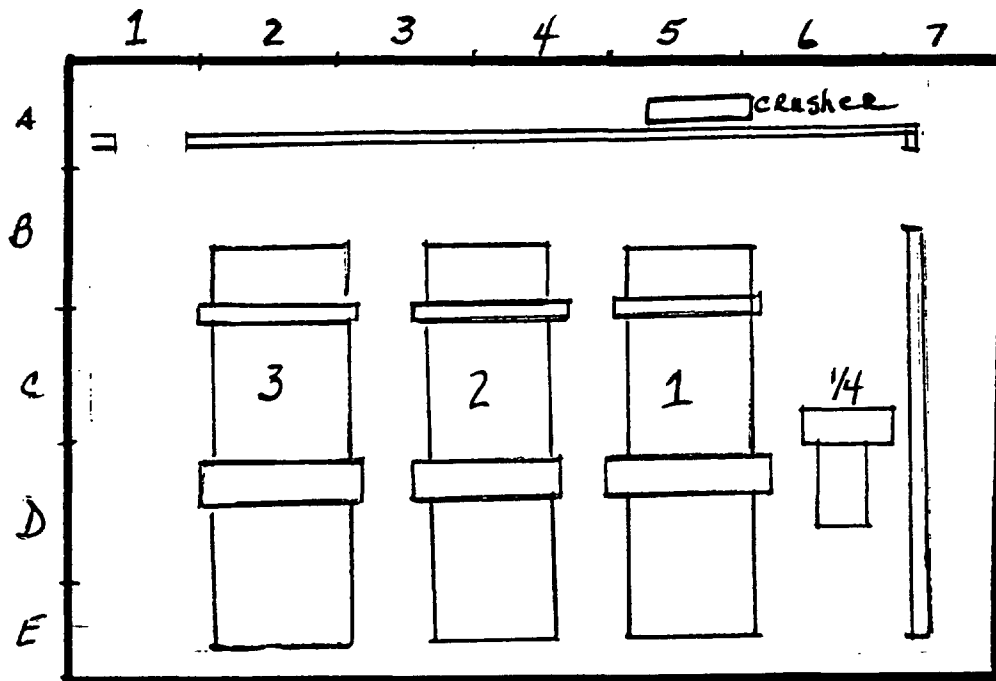
| POSITION                 | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA               |                       | REMARKS |
|--------------------------|----------|----------------------------------|------------------|------------------------------------|-----------------------|---------|
|                          |          |                                  |                  | 80                                 | <del>85</del> DATE 90 |         |
| Coupling Tester (1)      | A-C 1-2  | 84-88                            | 90.9             | <del>88.2</del>                    | 4/86                  |         |
| Fittings Maker (1)       | A-C 3-6  | 84-93                            |                  | 95.9                               | 11/84                 |         |
| F. M. Lathe Operator     | B-D 7-8  | 88-92                            |                  | 90.7                               | 10/83                 |         |
| Plastic Coupling Maker C | 8        | 86-89                            |                  | 89.6                               | 10/83                 |         |
| Fittings Inspector       | A-F 1-8  | 81-93                            |                  | <del>87.4</del><br><del>72.6</del> | 10/83                 |         |

CTD021442

| 10/84                    |          |                                  |                  |                      |    |    |         |
|--------------------------|----------|----------------------------------|------------------|----------------------|----|----|---------|
| POSITION                 | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA |    |    | REMARKS |
|                          |          |                                  |                  | 80                   | 85 | 90 |         |
| Coupling Tester (1)      | A-C 1-2  | 84-88                            |                  | 88.2                 |    |    |         |
| Fittings Maker (1)       | A-C 3-6  | 84-93                            |                  | 95.9                 |    |    |         |
| F. M. Lathe Operator     | B-D 7-8  | 88-92                            |                  | 90.7                 |    |    |         |
| Plastic Coupling Maker C | 8        | 86-89                            |                  | 89.6                 |    |    |         |
| Fittings Inspector       | A-F 1-8  | 81-93                            |                  | 72.6                 |    |    |         |

CTD021443

RIVERSIDE A/C PIPE PLANT  
FINISHING LINES



| POSITION                     |  | LOCATION | SOUND PRESSURE LEVEL (dBA) | ESTIMATED dBA | DOSIMETER-TWA dBA |       |    | REMARKS                                       |
|------------------------------|--|----------|----------------------------|---------------|-------------------|-------|----|-----------------------------------------------|
|                              |  |          |                            |               | 80                | 85    | 90 |                                               |
| Lathe Operator Line #1       |  | A-B 5-6  | 97-102                     |               | 92.2              | 11/84 |    | 3 Lathe Operators Rotate Between Lines        |
| Lathe Operator Line #2       |  | A-B 3-5  | 92-95                      | >90           |                   |       |    |                                               |
| Lathe Operator Line #3       |  | A-B 2-3  | 85-104                     |               | 100.2             | 10/83 |    |                                               |
| Lathe Asst. Line #1          |  | A-B 2-3  | 90-102                     |               | 90.6              | 11/84 |    | 3 Inspectors Rotate Between Lines             |
| Lathe Asst. Line #2          |  | A-B 3-4  |                            | 97.6          | 92.2              | 4/86  |    |                                               |
| Lathe Asst. Line #3          |  | A-B 2-3  |                            |               | 86.9              | 10/83 |    |                                               |
| Inspector Line #1            |  | B-E 5-6  | 87-107                     | >90           |                   |       |    | 3 Hydrotesters Operators Rotate Between Lines |
| Inspector Line #2            |  | B-E 3-5  | 87-95                      | >90           | 93.7              | 4/86  |    |                                               |
| Inspector Line #3            |  | B-E 2-3  |                            |               | 103.2             | 10/83 |    |                                               |
| Hydrotester Operator Line #1 |  | C-D 5-6  | 92-101                     |               | 94.1              | 11/84 |    | 6 Pipe Handlers Rotate Between Lines          |
| Hydrotester Operator Line #2 |  | C-D 3-5  | 90-95                      | 95.0          | 94.6              | 4/86  |    |                                               |
| Hydrotester Operator Line #3 |  | C-D 2-3  | 82-95                      |               | 93.2              | 10/83 |    |                                               |
| Pipe Handler Line #1         |  | D-E 5-6  |                            |               | 96.4              | 11/84 |    | 3 Tester Operator General Helper              |
| Pipe Handler Line #2         |  | D-E 3-5  | 87-90                      | 85-90         | 92.7              | 4/86  |    |                                               |
| Pipe Handler Line #3         |  | D-E 2-3  | 82-90                      |               | 92.7              | 10/83 |    |                                               |
| Crusher Operator (1)         |  | A 5-7    | 106-110                    | 93.4          | 90.6              | 4/86  |    | Finishing Supervisor(4)                       |
| Finishing Supervisor(4)      |  | A-E 1-7  | 80-95                      |               | 91.3              | 11/84 |    |                                               |
|                              |  |          |                            |               |                   |       |    |                                               |

CTD021444

| 10/84                           |          |                         |                  |       |    |                                                     |
|---------------------------------|----------|-------------------------|------------------|-------|----|-----------------------------------------------------|
| POSITION                        | LOCATION | SOUND                   | DOSIMETER-TWA    |       |    | REMARKS                                             |
|                                 |          | PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | 80    | 85 |                                                     |
| Lathe Operator Line #1          | A-B 5-6  | 97-102                  |                  | 92.2  |    | 3 Lathe Operators<br>Rotate Between<br>Lines        |
| Lathe Operator Line #2          | A-B 3-5  | 92-95                   | >90              |       |    |                                                     |
| Lathe Operator Line #3          | A-B 2-3  | 85-104                  |                  | 100.2 |    |                                                     |
| Lathe Asst. Line #1             | A-B 2-3  | 90-102                  |                  | 90.6  |    |                                                     |
| Lathe Asst. Line #2             | A-B 3-4  |                         |                  | 92.2  |    | 3 Inspectors<br>Rotate Between<br>Lines             |
| Lathe Asst. Line #3             | A-B 2-3  |                         |                  | 86.9  |    |                                                     |
| Inspector Line #1               | B-E 5-6  | 87-107                  | >90              |       |    |                                                     |
| Inspector Line #2               | B-E 3-5  | 87-95                   | >90              |       |    |                                                     |
| Inspector Line #3               | B-E 2-3  |                         |                  | 103.2 |    | 3 Hydrotesters<br>Operators Rotate<br>Between Lines |
| Hydrotester Operator<br>Line #1 | C-D 5-6  | 92-101                  |                  | 94.1  |    |                                                     |
| Hydrotester Operator<br>Line #2 | C-D 3-5  | 90-95                   |                  | 94.6  |    |                                                     |
| Hydrotester Operator<br>Line #3 | C-D 2-3  | 82-95                   |                  | 93.2  |    |                                                     |
| Pipe Handler Line #1            | D-E 5-6  | 87-90                   |                  | 96.4  |    | 6 Pipe Handlers<br>Rotate Between<br>Lines          |
| Pipe Handler Line #2            | D-E 3-5  | 82-90                   | 85-90            | 90.8  |    |                                                     |
| Pipe Handler Line #3            | D-E 2-3  | 87-90                   |                  | 92.6  |    |                                                     |
| Tester Operator                 | C-D 6-7  | Variable                |                  | 76.3  |    |                                                     |
| General Helper                  | A-E 1-7  |                         |                  |       |    |                                                     |

RIVERSIDE A/C PIPE PLANT  
MISCELLANEOUS JOB POSITIONS

| POSITION                      | LOCATION          | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA |       |       | REMARKS |
|-------------------------------|-------------------|----------------------------------|------------------|----------------------|-------|-------|---------|
|                               |                   |                                  |                  | 80                   | 85    | 90    |         |
| Loader (1)                    | Shipping          |                                  |                  | 85.0                 | 10/83 |       |         |
| Truck Operator (2)            | Shipping          |                                  | 85.0             | 84.8                 | 10/83 |       |         |
| Shipping Clerk (1)            | Shipping          |                                  | <85              |                      |       |       |         |
| Shipping<br>Supervisor (1)    | Shipping          |                                  |                  | 81.3                 | 10/83 |       |         |
| Storekeeper (1)               | Shipping          |                                  |                  | 73.4                 | 10/83 |       |         |
| Lab Inspector (1)             | Lab               |                                  |                  | 78.6                 | 10/83 |       |         |
| Q. C. Engineer (1)            | Plt.General       |                                  | <85              |                      |       |       |         |
| Boiler Operator               | Boiler Room       | 85-87                            |                  | 86.7                 | 11/84 |       |         |
| Mechanic (10)                 | Maintenance       |                                  | <85              | 85.6                 | 82.4  | 4/86  |         |
| <i>Truck Mechanic</i>         | <i>Truck Shop</i> |                                  |                  | 85.6                 | 4/86  |       |         |
| Shift Mechanic                | Maintenance       |                                  |                  | 84.8                 | 10/83 |       |         |
| Electrician (2)               | Maintenance       |                                  |                  | 80.8                 |       | 11/84 |         |
| Machinist (1)                 | Maintenance       |                                  |                  | 87.6                 | 11/84 |       |         |
| Oiler (1)                     | Plt.General       |                                  |                  | 87.9                 | 11/84 |       |         |
| Welder                        | Maintenance       |                                  |                  | 99.8                 | 10/83 |       |         |
| Maintenance<br>Supervisor (1) | Plt.General       |                                  |                  | 85.3                 | 10/83 |       |         |
| Industrial/Safety<br>Engineer | Plt.General       |                                  | <85              |                      |       |       |         |

CTD021446

10/84

CTD021447

| 10/84                           |          |                                  |                  | DOSIMETER-TWA   |  |  | REMARKS   |
|---------------------------------|----------|----------------------------------|------------------|-----------------|--|--|-----------|
| POSITION                        | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | dBA<br>80 85 90 |  |  |           |
| ✓ Mixer Operator (3)            | E 7-9    | 76-82                            |                  | 95.7            |  |  |           |
| ✓ Machine Tender (3)            | B-D 6-9  | 82-92                            |                  | 88.9            |  |  |           |
| ✓ Press Operator (3)            | D 6-7    | 82-85                            |                  | 90.5            |  |  |           |
| ✓ Mandrel Handler (3)           | B 6      | 84-86                            |                  | 88.9            |  |  |           |
| Pipe Stripper (3)               | A-E 4    | 74-79                            |                  | 90.9            |  |  |           |
| ✓ Tray Loader (3)               | A-E 2    | 63-70                            |                  | 85.2            |  |  |           |
| ✓ Relief Operator (3)           | A-E 4-9  | Variable 74-92                   |                  | 95.8            |  |  |           |
| Truck Operator (2)              | A-E 1-4  | Variable                         |                  | 95.4            |  |  |           |
| Manufacturing<br>Supervisor (4) | A-E 1-9  | Variable 74-92                   |                  | 89.5            |  |  |           |
|                                 |          |                                  |                  |                 |  |  | CTD021448 |

| POSITION                        | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | DOSIMETER-TWA<br>dBA |      |    | REMARKS                                             |
|---------------------------------|----------|----------------------------------|------------------|----------------------|------|----|-----------------------------------------------------|
|                                 |          |                                  |                  | 80                   | 85   | 90 |                                                     |
| Lathe Operator Line #1          | A-B 5-6  | 97-102                           |                  | 92.2                 |      |    | 3 Lathe Operators<br>Rotate Between<br>Lines        |
| Lathe Operator Line #2          | A-B 3-5  | 92-95                            | >90              |                      |      |    |                                                     |
| Lathe Operator Line #3          | A-B 2-3  | 85-104                           |                  | 100.2                |      |    |                                                     |
| Lathe Asst. Line #1             | A-B 2-3  | 90-102                           |                  | 90.6                 |      |    |                                                     |
| Lathe Asst. Line #2             | A-B 3-4  |                                  |                  | 92.2                 | 97.6 |    |                                                     |
| Lathe Asst. Line #3             | A-B 2-3  |                                  |                  | 86.9                 |      |    |                                                     |
| Inspector Line #1               | B-E 5-6  | 87-107                           | >90              |                      |      |    | 3 Inspectors<br>Rotate Between<br>Lines             |
| Inspector Line #2               | B-E 3-5  | 87-95                            | >90              | 93.7                 |      |    |                                                     |
| Inspector Line #3               | B-E 2-3  |                                  |                  | 103.2                |      |    |                                                     |
| Hydrotester Operator<br>Line #1 | C-D 5-6  | 92-101                           |                  | 94.1                 |      |    | 3 Hydrotesters<br>Operators Rotate<br>Between Lines |
| Hydrotester Operator<br>Line #2 | C-D 3-5  | 90-95                            |                  | 94.6                 | 95.0 |    |                                                     |
| Hydrotester Operator<br>Line #3 | C-D 2-3  | 82-95                            |                  | 93.2                 |      |    |                                                     |
| Pipe Handler Line #1            | D-E 5-6  |                                  |                  | 96.4                 |      |    |                                                     |
| Pipe Handler Line #2            | D-E 3-5  | 87-90                            | 85-90            | 91.2                 |      |    | 6 Pipe Handlers<br>Rotate Between<br>Lines          |
| Pipe Handler Line #3            | D-E 2-3  | 82-90                            |                  | 90.8                 |      |    |                                                     |
| Tester Operator                 | C-D 6-7  | 87-90                            |                  | 92.6                 | 96.6 |    |                                                     |
| General Helper                  | A-E 1-7  | Variable                         |                  | 76.3                 |      |    |                                                     |
| Truck Driver (4)                | A-E 1-7  | 80-90                            |                  | 91.3                 |      |    |                                                     |
| Crusher Operator (1)            | A 5-7    | 106-110                          |                  | 90.6                 |      |    |                                                     |
| Finishing Supervisor (4)        | A-E 1-7  | 80-95                            |                  | 91.3                 |      |    |                                                     |

CTD021449

A hand-drawn site plan of a quarry layout, oriented with North at the top. The plan is divided into five horizontal sections labeled A, B, C, D, and E on the left side. A horizontal scale at the top is marked with numbers 1 through 7. Section A shows a long, narrow rectangular area with several vertical lines indicating boundaries or features. Section B contains two large, rectangular structures labeled "Saves" in cursive. Section C is mostly empty. Section D features a complex arrangement of structures, including a large rectangular area labeled "cplg cutoff" and a smaller structure labeled "B. Mill". Section E shows two small, rectangular structures labeled "B. Mills". The plan is drawn on a grid of dashed lines.

| 10/84                                  |          |                                  |                  | DOSIMETER-TWA<br>dBA |      |      | REMARKS                                  |
|----------------------------------------|----------|----------------------------------|------------------|----------------------|------|------|------------------------------------------|
| POSITION                               | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | 80                   | 85   | 90   |                                          |
| Boring Mill<br>Operator #1             | E 6      | 86-89                            |                  | 92.4                 |      |      | Saw Operators<br>Rotate from<br>#1 to #2 |
| Boring Mill<br>Operator #2             | E 5      | 86-89                            |                  | 92.0                 |      |      |                                          |
| ✓ 42" Mill Operator                    | E 3-4    | 84-86                            |                  | 93.7                 | 99.1 | 89.5 |                                          |
| ✓ Coupling Cut Off<br>Saw Operator (1) | E 2-3    | 85-92                            |                  | 94.1                 | 88.9 |      |                                          |
| ✓ Saw Operator #1 (1)                  | B-C 6-7  | 81-84                            |                  | 91.2                 | 88.5 |      |                                          |
| Saw Operator #2 (1)                    | B-C 3-4  | 81-84                            |                  | 89.2                 |      |      |                                          |

CTD021450

A hand-drawn floor plan of a workshop, oriented with a grid from 1 to 8 (horizontal) and A to F (vertical). The plan shows the following equipment and layout:

- Coupling Tester:** Located in the lower-left area, between grid lines 2 and 3, and A and B.
- Core Drills:** A group of three small rectangular blocks located between grid lines 3 and 4, and A and B.
- Stone Hinge Drill:** A rectangular block located between grid lines 4 and 5, and A and B.
- King Mill:** A cross-shaped block located between grid lines 5 and 6, and A and B.
- Large 7M lathe:** A large, complex shape located in the lower-right area, between grid lines 6 and 8, and C and F. It is labeled "Large 7M lathe" in cursive.

The plan also includes a long horizontal bar at the top (between A and B) and a vertical bar on the right side (between F and G).

|                          |          |                                  |                  |               |      |    |           |
|--------------------------|----------|----------------------------------|------------------|---------------|------|----|-----------|
| 10/84                    |          |                                  |                  | DOSIMETER-TWA |      |    | REMARKS   |
| POSITION                 | LOCATION | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA | dBA           |      |    |           |
|                          |          |                                  |                  | 80            | 85   | 90 |           |
| Coupling Tester (1)      | A-C 1-2  | 84-88                            |                  | 88.2          | 90.9 |    |           |
| Fittings Maker (1)       | A-C 3-6  | 84-93                            |                  | 95.9          |      |    |           |
| F. M. Lathe Operator     | B-D 7-8  | 88-92                            |                  | 90.7          |      |    |           |
| Plastic Coupling Maker C | 8        | 86-89                            |                  | 89.6          |      |    |           |
| Fittings Inspector       | A-F 1-8  | 81-93                            |                  | 72.6          |      |    |           |
|                          |          |                                  |                  |               |      |    | CTD021451 |

RIVERSIDE A/C PIPE PLANT  
MISCELLANEOUS JOB POSITIONS

| 10/84                         |             |                                  |                   |                      |    |    |         |
|-------------------------------|-------------|----------------------------------|-------------------|----------------------|----|----|---------|
| POSITION                      | LOCATION    | SOUND<br>PRESSURE<br>LEVEL (dBA) | ESTIMATED<br>dBA  | DOSIMETER-TWA<br>dBA |    |    | REMARKS |
|                               |             |                                  |                   | 80                   | 85 | 90 |         |
| Loader (1)                    | Shipping    |                                  |                   | 85.0                 |    |    |         |
| Truck Operator (2)            | Shipping    |                                  |                   | 89.9                 |    |    |         |
| Shipping Clerk (1)            | Shipping    |                                  | <85               |                      |    |    |         |
| Shipping<br>Supervisor (1)    | Shipping    |                                  |                   | 81.3                 |    |    |         |
| Storekeeper (1)               | Shipping    |                                  |                   | 73.4                 |    |    |         |
| Lab Inspector (1)             | Lab         |                                  |                   | 78.6                 |    |    |         |
| Q. C. Engineer (1)            | Plt.General |                                  | <85               |                      |    |    |         |
| Boiler Operator               | Boiler Room | 85-87                            |                   | 86.7                 |    |    |         |
| Mechanic (10)                 | Maintenance |                                  | <del>&lt;85</del> | 85.6                 |    |    |         |
| Shift Mechanic                | Maintenance |                                  |                   | 84.8                 |    |    |         |
| Electrician (2)               | Maintenance |                                  |                   | 80.8                 |    |    |         |
| Machinist (1)                 | Maintenance |                                  |                   | 87.6                 |    |    |         |
| Oiler (1)                     | Plt.General |                                  |                   | 87.9                 |    |    |         |
| Welder                        | Maintenance |                                  |                   | 89.8                 |    |    |         |
| Maintenance<br>Supervisor (1) | Plt.General |                                  |                   | 85.3                 |    |    |         |
| Industrial/Safety<br>Engineer | Plt.General |                                  | <85               |                      |    |    |         |

CTD021452

Monday 1st Shift *this survey*

|                 |        | <u>old</u>   |       |
|-----------------|--------|--------------|-------|
| Hydrotester #2  | 95dB ✓ | 94.6         | OK    |
| Asst Lathe #2   | 97.6 ✓ | 92.2         | HC +5 |
| Pipe Handler #2 | 92.7 ✓ | <del>—</del> | OK    |
| Inspector #2    | 93.7 / | <del>—</del> | OK    |

~~42~~

Tuesday 1st Shift

|               |        |                      |      |
|---------------|--------|----------------------|------|
| 42" Mill      | 99.1 ✓ | 93.0 / 93.7          | OK   |
| Cplg Tester   | 90.9 ✓ | 88.2                 | +2dB |
| Cplg Cut Off  | 88.9 ✓ | <del>88.5</del> 94.1 | -6.  |
| Rework Saw #1 | 88.5 ✓ | <del>88.5</del> 91.2 | -3   |
| 1/4 Lathe     | 96.6 ✓ | 92.6                 | +4   |
| 3M Lathe      |        |                      |      |

Weds

|           |        |      |     |
|-----------|--------|------|-----|
| Press Cap | 92.8 ✓ | 90.5 | +2  |
| Relief    | 90.1 ✓ | 95.8 | -5  |
| Mand Han  | 91.1 ✓ | 88.9 | +3  |
| Mix       | 85.9 ✓ | 95.7 | +10 |
| Tray      | 82.5 ✓ | 85.2 | -3  |
| Super     | 84.7 ✓ | 89.5 | -5  |
| M. Tender | 89.9 ✓ | 88.9 | +1  |

|          |      |      |    |
|----------|------|------|----|
| Crusher  | 93.4 | 90.6 | +3 |
| Forklift | 85.6 |      |    |
| Mech     | 82.4 | 85.6 | OK |

CTD021453

*Riverside A/C Pipe Plant Job Positions*  
RIVERSIDE A/C PIPE PLANT  
JOB TITLES

*Type only  
those  
highlighted*

| DEPT      | JOB TITLE/AREA                | DEPT          | JOB TITLE/AREA         |
|-----------|-------------------------------|---------------|------------------------|
| FINISHING | BORING MILL #1                | MAINTENANCE   | BOILER OPERATOR 10/83  |
|           | BORING MILL #1 OPERA 10/83    |               | ELECTRICIAN 12/85      |
|           | BORING MILL #2                |               | ELECTRICIAN (SHIFT)    |
|           | BORING MILL #2 OPERA 4/84     |               | MACHINIST 10/83        |
|           | BORING MILL 42"               |               | MECHANIC 8/84          |
|           | BORING MILL 42" OPER 5/85     |               | MECHANIC (SHIFT) 4/83  |
|           | CPLG CUT OFF                  |               | OILER 4/83             |
|           | CPLG CUT OFF OPERATO 3/86     | MANUFACTURING | BAG OPENER             |
|           | CRUSHER                       |               | GENERAL HELPER         |
|           | CRUSHER OPERATOR 6/85         |               | MACHINE TENDER 4/86    |
|           | FITTINGS MAKER 12/85          |               | MACHINE TENDERS AREA   |
|           | FM LATHE                      |               | MANDREL HANDLER 6/85   |
|           | FM LATHE OPERATOR 6/85        |               | MIXER OPERATOR 4/86    |
|           | HYDROTESTER #1                |               | MUNSON MIXER #2        |
|           | HYDROTESTER #1 OPERA 7/85     |               | MUNSON MIXER #4        |
|           | HYDROTESTER #2                |               | PRESS OPERATOR 3/86    |
|           | HYDROTESTER #2 OPERA 6/85     |               | RELIEF OPERATOR 6/85   |
|           | HYDROTESTER #3                |               | STRIPPER OPERATOR 5/85 |
|           | HYDROTESTER #3 OPERA 4/82     |               | SUPERVISOR             |
|           | INSPECTOR FITTINGS 7/85       |               | TRAY LOADER 8/84       |
|           | INSPECTOR #1 10/83            |               | TRAY LOADER/TRUCK 6/85 |
|           | INSPECTOR #2 6/84             |               | WAREHOUSE              |
|           | INSPECTOR #3 11/81            |               |                        |
|           | <del>INSPECTOR-FITTINGS</del> |               |                        |
|           | KING MILL                     | SHIPPING      | LOADER 12/85           |
|           | LATHE #1                      |               | SUPERVISOR 12/81       |
|           | LATHE #1 ASST. OPERA 6/85     |               | TRUCK OPERATOR 10/83   |
|           | LATHE #1 OPERATOR 6/85        |               |                        |
|           | LATHE #2                      |               |                        |
|           | LATHE #2 ASST. OPERA 3/83     |               |                        |
|           | LATHE #2 OPERATOR 6/85        |               |                        |
|           | LATHE #3                      |               |                        |
|           | LATHE #3 ASST. OPERA 4/81     |               |                        |
|           | LATHE #3 OPERATOR 4/82        |               |                        |
|           | LATHE 1/2 OPERATOR 6/85       |               |                        |
|           | PIPE HANDLER #1 10/83         |               |                        |
|           | PIPE HANDLER #2 6/85          |               |                        |
|           | PIPE HANDLER #3 4/83          |               |                        |
|           | PLASTIC CPLG MAKER 10/83      |               |                        |
|           | SAW #1                        |               |                        |
|           | SAW #1 OPERATOR 6/85          |               |                        |
|           | SAW #2                        |               |                        |
|           | SAW #2 OPERATOR 6/85          |               |                        |
|           | SAW AREA                      |               |                        |
|           | SAWS OPERATOR                 |               |                        |
|           | SUPERVISOR 12/81              |               |                        |
|           | TRUCK OPERATOR - FIT 7/85     |               |                        |
|           | TRUCK OPERATOR - FIN 6/85     |               |                        |
|           | WET TESTER 5/85               |               |                        |

*36  
38  
2  
78*

|        |                 |     |
|--------|-----------------|-----|
| 0.11 ✓ | 0.03            | .01 |
| 0.23 ✓ | 0.01            | .03 |
| 0.25 ✓ | 0.03            | .01 |
| 0.31 ✓ | 0.09            | .03 |
| 0.06   | 0.07            | .01 |
| 0.17 ✓ | 0.03            | .01 |
| 0.04   | 0.15 ✓          | /6  |
| 0.09   | <               |     |
| 0.01   | 0.10 ✓          |     |
| 0.02   | 0.07            |     |
| 0.08   | 0.10 ✓          |     |
| 0.08   | 0.31 ✓          |     |
| 0.04   | 0.15 ✓          |     |
| 0.06   | 0.15 ✓          |     |
| 0.13 ✓ | 0.06            |     |
| 0.07   | 0.01            |     |
| 0.07   | 0.02            |     |
| 0.21 ✓ | <del>0.01</del> |     |
| 0.10 ✓ | 0.02/8          |     |
| 0.15 ✓ |                 |     |
| /20    |                 |     |

Table I Rese  
 II sum  
 III comp  
 IV cply  
 V Rese

Ap II Rese

|         | 10/84       | 4/86 |
|---------|-------------|------|
| #2 Rese | 0.24 - 0.42 | 0.52 |
| #4 Rese | 0.16 - 0.39 | 0.13 |

1986

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CTD021457

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3.18✓

0.12✓

0.03

0.03

~~0.06~~  
✓

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0.12✓

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0.32✓

0.08

0.05

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0.09

0.11✓

0.21✓

0.19✓

3.09

~~0.03~~  
14

(22)

0.03

RIVERSIDE A/C PIPE PLANT  
JOB TITLES

| <u>DEPT</u>               | <u>JOB TITLE/AREA</u>      | <u>DEPT</u>               | <u>JOB TITLE/AREA</u>     |                      |
|---------------------------|----------------------------|---------------------------|---------------------------|----------------------|
| FINISHING                 | BORING MILL #1             | MAINTENANCE               | BOILER OPERATOR 10/84     |                      |
|                           | BORING MILL #1 OPERA 4/86  |                           | ELECTRICIAN 12/85         |                      |
|                           | BORING MILL #2             |                           | ELECTRICIAN (SHIFT) 10/83 |                      |
|                           | BORING MILL #2 OPERA 11/84 |                           | MACHINIST 10/84           |                      |
|                           | BORING MILL 42"            |                           | MECHANIC 4/86             |                      |
|                           | BORING MILL 42" OPER 4/86  |                           | MECHANIC (SHIFT) 10/84    |                      |
|                           | CPLG CUT OFF               |                           | OILER 10/84               |                      |
|                           | CPLG CUT OFF OPERATO 4/86  |                           |                           |                      |
|                           | CRUSHER                    |                           | MANUFACTURING             | BAG OPENER 4/86      |
|                           | CRUSHER OPERATOR 6/85      |                           |                           | GENERAL HELPER 11/84 |
|                           | FITTINGS MAKER 12/85       | MACHINE TENDER 4/86       |                           |                      |
|                           | FM LATHE                   | MACHINE TENDERS AREA 4/86 |                           |                      |
|                           | FM LATHE OPERATOR 4/86     | MANDREL HANDLER 4/86      |                           |                      |
|                           | HYDROTESTER #1             | MIXER OPERATOR 4/86       |                           |                      |
|                           | HYDROTESTER #1 OPERA 7/85  | MUNSON MIXER #2 4/86      |                           |                      |
|                           | HYDROTESTER #2             | MUNSON MIXER #4 4/86      |                           |                      |
|                           | HYDROTESTER #2 OPERA 4/86  | PRESS OPERATOR 4/86       |                           |                      |
|                           | HYDROTESTER #3             | RELIEF OPERATOR 4/86      |                           |                      |
|                           | HYDROTESTER #3 OPERA 4/82  | STRIPPER OPERATOR 5/85    |                           |                      |
|                           | INSPECTOR FITTINGS 4/86    | SUPERVISOR 4/86           |                           |                      |
|                           | INSPECTOR #1 10/84         | TRAY LOADER 4/86          |                           |                      |
|                           | INSPECTOR #2 4/86          | TRAY LOADER/TRUCK 6/85    |                           |                      |
|                           | INSPECTOR #3 11/81         | WAREHOUSE 10/83           |                           |                      |
|                           | INSPECTOR-FITTINGS 4/86    |                           |                           |                      |
|                           | KING MILL                  | SHIPPING                  | LOADER 12/85              |                      |
|                           | LATHE #1                   |                           | SUPERVISOR 12/81          |                      |
|                           | LATHE #1 ASST. OPERA 6/85  |                           | TRUCK OPERATOR 10/83      |                      |
|                           | LATHE #1 OPERATOR 6/85     |                           |                           |                      |
|                           | LATHE #2                   |                           |                           |                      |
|                           | LATHE #2 ASST. OPERA 4/86  |                           |                           |                      |
|                           | LATHE #2 OPERATOR 4/86     |                           |                           |                      |
|                           | LATHE #3                   |                           |                           |                      |
|                           | LATHE #3 ASST. OPERA 4/81  |                           |                           |                      |
|                           | LATHE #3 OPERATOR 4/82     |                           |                           |                      |
| LATHE 1/2 OPERATOR 4/86   |                            |                           |                           |                      |
| PIPE HANDLER #1 10/84     |                            |                           |                           |                      |
| PIPE HANDLER #2 4/86      |                            |                           |                           |                      |
| PIPE HANDLER #3 4/83      |                            |                           |                           |                      |
| PLASTIC CPLG MAKER 10/84  |                            |                           |                           |                      |
| SAW #1                    |                            |                           |                           |                      |
| SAW #1 OPERATOR 4/86      |                            |                           |                           |                      |
| SAW #2                    |                            |                           |                           |                      |
| SAW #2 OPERATOR 10/84     |                            |                           |                           |                      |
| SAW AREA                  |                            |                           |                           |                      |
| SAWS OPERATOR             |                            |                           |                           |                      |
| SUPERVISOR 10/84          |                            |                           |                           |                      |
| TRUCK OPERATOR - FIT 7/85 |                            |                           |                           |                      |
| TRUCK OPERATOR - FIN 6/85 |                            |                           |                           |                      |
| WET TESTER 4/86           |                            |                           |                           |                      |

CTD021459

I results

I summary

~~II~~ Munson

III compar

~~IV~~ Cplg

V

~~VI~~ Noise

VI

Appendix II - Samples

CTD021460

# Pipe Sps Goal?

In report

nw Bag cleaner in Bag Open  
cplg cut off dirt  
places need sampling

Line 3

nw people

H P - good

Microscope comparison

.06 plant  
.05 Corp

Bag Com  
used felts

~~# samples~~  
49  
154  
102

85  
84

> frequency

Aimed samples all .1 especially those  
with no follow up

.5

.1

0.059  
0.051

| year  | # that haven't been sampled since | Positions |
|-------|-----------------------------------|-----------|
| 81    | —                                 | 3         |
| 82    | —                                 | 3         |
| 83    | 20                                | 15        |
| 84    | 26                                | 31        |
| 85    | 46                                | 44        |
| never | 8                                 | 4%        |

0.39  
0.37  
0.27  
0.21

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Asbestos Unit Program Page D-211

IV 2

Each work position where exposure to asbestos is possible must be monitored at least every 6 months.

57

|    | Positions | #  | %    |
|----|-----------|----|------|
| 86 |           | 26 | 46   |
| 85 |           | 11 | 19   |
| 84 |           | 11 | 19   |
| 83 |           | 4  | 7    |
| 82 |           | 2  | 4    |
| 81 |           | 3  | 5    |
|    |           | 57 | 100% |

# Employees

|       |  |  |  |  |   |    |    |
|-------|--|--|--|--|---|----|----|
| 86    |  |  |  |  | 4 | 24 | 31 |
| 85    |  |  |  |  |   | 23 | 29 |
| 84    |  |  |  |  |   | 15 | 19 |
| 83    |  |  |  |  |   | 12 | 15 |
| 82    |  |  |  |  |   |    |    |
| 81    |  |  |  |  |   |    |    |
| newer |  |  |  |  |   | 4  | 5  |

78  
employees

99

## ~~Positions~~

|               |                  |                 |                 |               |                 |               |               |                  |                 |
|---------------|------------------|-----------------|-----------------|---------------|-----------------|---------------|---------------|------------------|-----------------|
| <del>86</del> | <del>     </del> | <del>    </del> | <del>    </del> | <del>86</del> | <del>    </del> | <del>1</del>  | <del>86</del> | <del>     </del> | <del>    </del> |
| <del>85</del> | <del>    </del>  | <del>    </del> | <del>    </del> | <del>85</del> | <del>1</del>    | <del>85</del> | <del>11</del> | <del>85</del>    | <del>11</del>   |
| <del>84</del> | <del>    </del>  | <del>    </del> | <del>    </del> | <del>84</del> | <del>1</del>    | <del>84</del> | <del>11</del> | <del>84</del>    | <del>11</del>   |
| <del>83</del> | <del>    </del>  | <del>    </del> | <del>    </del> | <del>83</del> | <del>1</del>    | <del>83</del> | <del>11</del> | <del>83</del>    | <del>11</del>   |
| <del>82</del> | <del>    </del>  | <del>    </del> | <del>    </del> | <del>82</del> | <del>1</del>    | <del>82</del> | <del>11</del> | <del>82</del>    | <del>11</del>   |
| <del>81</del> | <del>    </del>  | <del>    </del> | <del>    </del> | <del>81</del> | <del>1</del>    | <del>81</del> | <del>11</del> | <del>81</del>    | <del>11</del>   |

RIVERSIDE A/C PIPE PLANT  
JOB TITLES

| DEPT                               | JOB TITLE/AREA                       |                        |
|------------------------------------|--------------------------------------|------------------------|
| Finishing (FIN)-                   | <del>1/4 LATHE OPERATOR</del>        | Maintenance<br>(MAINT) |
|                                    | <del>ASST. LATHE #1 OPERA</del>      |                        |
|                                    | <del>ASST. LATHE #2 OPERA</del>      |                        |
|                                    | BORING MILL #1                       |                        |
|                                    | BORING MILL #1 OPERA                 |                        |
|                                    | BORING MILL #2                       |                        |
|                                    | BORING MILL #2 OPERA                 |                        |
|                                    | BORING MILL 42"                      |                        |
|                                    | BORING MILL 42" OPER                 |                        |
|                                    | <del>COUPLING CUT OFF</del>          |                        |
|                                    | <del>COUPLING CUT OFF OPERATOR</del> |                        |
|                                    | CRUSHER                              |                        |
|                                    | CRUSHER OPERATOR                     |                        |
|                                    | FITTINGS MAKER                       |                        |
|                                    | FM LATHE                             |                        |
| FM LATHE OPERATOR                  |                                      |                        |
| HYDROTESTER #1                     |                                      |                        |
| HYDROTESTER #2                     |                                      |                        |
| HYDROTESTER #2 OPERA               |                                      |                        |
| HYDROTESTER #3                     |                                      |                        |
| INSPECTOR <del>WALL</del> Fittings |                                      |                        |
| INSPECTOR #1                       |                                      |                        |
| INSPECTOR #3                       |                                      |                        |
| KING MILL                          |                                      |                        |
| <del>LARGE FM LATHE OPER</del>     |                                      |                        |
| LATHE #1                           |                                      |                        |
| LATHE #1 OPERATOR                  |                                      |                        |
| LATHE #2                           |                                      |                        |
| LATHE #2 OPERATOR                  |                                      |                        |
| LATHE #3                           |                                      |                        |
| LATHE #3 OPERATOR                  |                                      |                        |
| PIPE HANDLER #1                    |                                      |                        |
| PIPE HANDLER #2                    |                                      |                        |
| PIPE HANDLER #3                    |                                      |                        |
| PLASTIC CPLG MAKER                 |                                      |                        |
| <del>REWORK SAW #1</del>           | Shipping<br>(SHP)                    |                        |
| <del>REWORK SAW #2</del>           |                                      |                        |
| <del>REWORK SAW AREA</del>         |                                      |                        |
| SAW #1 OPERATOR                    |                                      |                        |
| SUPERVISOR                         |                                      |                        |
| TRUCK OPERATOR - FIT               | 1/4                                  |                        |
| TRUCK OPERATOR - FIN               |                                      |                        |
| WET TESTER                         |                                      |                        |

CTD021466

W.P.: Joint Type

Large Rework Saw is Saw #2  
Small boring mill is same  
as 30" Boring Mill & can be  
Large FM lathe is FM  
it can do 1/8 - 1/2 lengths  
MEO's FMS  
1/4's & also test MEO's

RIVERSIDE A/C PIPE PLANT  
1972-1986 ASBESTOS MONITORING SAMPLE RESULTS

| PER/<br>DEPT | TEST<br>AREA | DATE      | JOB TITLE/AREA       | EMPLOYEE NAME  | SAMP<br>NO. | SAMP<br>START | SAMP<br>STOP | SAMP<br>MINS | SAMP<br>F/CC | TWA<br>START | TWA<br>STOP | TWA<br>MIN | TWA<br>F/CC | RESP. | SAMPLED<br>BY |
|--------------|--------------|-----------|----------------------|----------------|-------------|---------------|--------------|--------------|--------------|--------------|-------------|------------|-------------|-------|---------------|
| FIN          | A            | 11/ / 72  | CPLG CUT OFF         |                |             |               |              |              | .06          |              |             |            |             |       | TRAVELERS     |
| FIN          | A            | 11/ / 72  | CPLG CUT OFF         |                |             |               |              |              | .22          |              |             |            |             |       | TRAVELERS     |
| FIN          |              | 04/ / 74  | CPLG CUT OFF         |                |             |               |              |              | .75          |              |             |            |             |       | PLANT         |
| FIN          |              | 01/ / 75  | CPLG CUT OFF         |                |             |               |              |              | .48          |              |             |            |             |       | PLANT         |
| FIN          |              | 08/08/ 75 | CPLG CUT OFF         |                |             |               |              |              | .07          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/28/ 76 | CPLG CUT OFF         |                |             |               |              |              | 1.37         |              |             |            |             |       | PLANT         |
| FIN          |              | 08/07/ 76 | CPLG CUT OFF         |                |             |               |              |              | .06          |              |             |            |             |       | PLANT         |
| FIN          |              | 01/16/ 77 | CPLG CUT OFF         |                |             |               |              |              | .33          |              |             |            |             |       | PLANT         |
| FIN          | A            | 01/16/ 77 | CPLG CUT OFF         |                |             |               |              |              | .17          |              |             |            |             |       | PLANT         |
| FIN          |              | 05/09/ 77 | CPLG CUT OFF         |                |             |               |              |              | .34          |              |             |            |             |       | PLANT         |
| FIN          | A            | 11/16/ 77 | CPLG CUT OFF         |                |             |               |              |              | .24          |              |             |            |             |       | PLANT         |
| FIN          |              | 02/07/ 78 | CPLG CUT OFF         |                |             |               |              |              | .44          |              |             |            |             |       | PLANT         |
| FIN          |              | 02/13/ 78 | CPLG CUT OFF         |                |             |               |              |              | .43          |              |             |            |             |       | PLANT         |
| FIN          |              | 02/14/ 78 | CPLG CUT OFF         |                |             |               |              |              | .49          |              |             |            |             |       | PLANT         |
| FIN          |              | 07/17/ 79 | CPLG CUT OFF         |                |             |               |              |              | .17          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/13/ 84 | CPLG CUT OFF         |                | 534         | 0804          | 1526         | 442          | .03          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/14/ 84 | CPLG CUT OFF         |                | 600         | 0803          | 1523         | 440          | .05          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/15/ 84 | CPLG CUT OFF         |                | 616         | 0831          | 1651         | 500          | .03          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/16/ 84 | CPLG CUT OFF         |                | 624         | 0810          | 1512         | 422          | .04          |              |             |            |             |       | PLANT         |
| FIN          | A            | 03/22/ 84 | CPLG CUT OFF         |                | 711         |               |              | 425          | .10          |              |             |            |             |       | PLANT         |
| FIN          | A            | 08/02/ 84 | CPLG CUT OFF         |                | 732         | 0900          | 1534         | 394          | .12          |              |             |            |             |       | PLANT         |
| FIN          | A            | 08/26/ 85 | CPLG CUT OFF         |                | 0627        | 0945          | 1525         | 340          | .07          |              |             |            |             | N     | PLANT         |
| FIN          | A            | 09/13/ 85 | CPLG CUT OFF         |                | 0633        | 0840          | 1338         | 298          | .10          |              |             |            |             | N     | PLANT         |
| FIN          | E            | 04/10/ 86 | CPLG CUT OFF         |                | 86029       | 1416          | 1515         | 59           | .09          |              |             |            |             |       | CORPORATE     |
| FIN          | P            | 01/30/ 75 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              | 60           | .48          |              |             |            |             |       | PLANT         |
| FIN          | P            | 03/28/ 80 | CPLG CUT OFF OPERATO | BUENROSTRO, A. |             |               |              |              | .40          |              |             |            |             |       | PLANT         |
| FIN          | P            | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     | 0563        | 0736          | 1100         | 204          | .28          |              |             |            |             | S     | PLANT         |
| FIN          | P            | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     | 0564        | 1134          | 1458         | 204          | .33          |              |             |            |             | S     | PLANT         |
| FIN          | P            | 05/22/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              |              |              | 0736         | 1458        | 408        | .30         | S     | PLANT         |
| FIN          | P            | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     | 00589       | 0854          | 1233         | 219          | .16          |              |             |            |             | S     | PLANT         |
| FIN          | P            | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     | 00590       | 1233          | 1414         | 101          | .34          |              |             |            |             | S     | PLANT         |
| FIN          | P            | 11/23/ 81 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              |              |              | 0854         | 1414        | 320        | .22         | S     | PLANT         |
| FIN          | P            | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.   | 82019       | 0732          | 1048         | 196          | .05          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.   | 82020       | 1145          | 1452         | 187          | .04          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 05/26/ 82 | CPLG CUT OFF OPERATO | PALOMARA, G.   |             |               |              |              |              | 0732         | 1452        | 383        | .05         | N     | CORPORATE     |
| FIN          | P            | 03/23/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     | 8314        | 0824          | 1100         | 156          | .29          |              |             |            |             | Y     | PLANT         |
| FIN          | P            | 03/24/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     | 8320        | 0750          | 1133         | 223          | .28          |              |             |            |             | S     | PLANT         |
| FIN          | P            | 04/05/ 83 | CPLG CUT OFF OPERATO | ATENCIO, S.    | 8351        | 0805          | 1521         | 436          | .05          | 0805         | 1521        | 436        | .05         | Y     | PLANT         |
| FIN          | P            | 10/13/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     | 8392        | 0910          | 1501         | 351          | .21          | 0910         | 1501        | 351        | .21         | S     | PLANT         |
| FIN          | P            | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     | 83055       | 0730          | 1235         | 305          | .16          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     | 83056       | 1235          | 1520         | 165          | .16          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 10/26/ 83 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              |              |              | 0730         | 1520        | 470        | .16         | N     | CORPORATE     |
| FIN          | P            | 03/12/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 528         | 0816          | 1512         | 425          | .20          | 0816         | 1521        | 425        | .20         | Y     | PLANT         |
| FIN          | P            | 03/13/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 536         | 0803          | 1526         | 443          | .21          | 0803         | 1526        | 443        | .21         | S     | PLANT         |
| FIN          | P            | 03/14/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 608         | 0759          | 1515         | 436          | .14          | 0759         | 1515        | 436        | .14         | S     | PLANT         |
| FIN          | P            | 03/15/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 603         | 0821          | 1521         | 420          | .23          | 0821         | 1521        | 420        | .23         | S     | PLANT         |
| FIN          | P            | 03/16/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 621         | 0759          | 1503         | 424          | .15          | 0759         | 1503        | 424        | .15         | S     | PLANT         |
| FIN          | P            | 03/22/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 708         | 0750          | 1456         | 426          | .16          | 0750         | 1456        | 426        | .16         | S     | PLANT         |
| FIN          | P            | 03/23/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 714         | 0750          | 1450         | 420          | .32          | 0750         | 1450        | 420        | .32         | S     | PLANT         |
| FIN          | P            | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 84062       | 0714          | 1027         | 194          | .29          |              |             |            |             | Y     | CORPORATE     |
| FIN          | P            | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     | 85063       | 1027          | 1502         | 275          | .32          |              |             |            |             | Y     | CORPORATE     |
| FIN          | P            | 10/30/ 84 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              |              |              | 0714         | 1502        | 469        | .31         | Y     | CORPORATE     |
| FIN          | P            | 02/06/ 85 | CPLG CUT OFF OPERATO | COOLEY, D.     | 002         | 0814          | 1516         | 422          | .26          | 0814         | 1516        | 422        | .26         | Y     | PLANT         |
| FIN          | P            | 09/13/ 85 | CPLG CUT OFF OPERATO | GOODWIN, L.    | 0628        | 0835          | 1338         | 303          | .11          | 0835         | 1338        | 303        | .11         | N     | PLANT         |
| FIN          | P            | 03/27/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     | 0645        | 0846          | 1451         | 365          | .25          | 0846         | 1451        | 365        | .25         | S     | PLANT         |
| FIN          | P            | 04/08/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     | 86025       | 0715          | 1029         | 194          | .39          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 04/08/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     | 86026       | 1029          | 1046         | 17           | .37          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 04/08/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     | 86027       | 1046          | 1520         | 264          | .27          |              |             |            |             | N     | CORPORATE     |
| FIN          | P            | 04/08/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     |             |               |              |              |              | 0715         | 1520        | 475        | .32         | N     | CORPORATE     |
| FIN          | P            | 04/10/ 86 | CPLG CUT OFF OPERATO | COOLEY, D.     | 86028       | 1417          | 1515         | 58           | .21          |              |             |            |             |       | CORPORATE     |

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Appendix 83

|                                    |  |  |  |  |  |  |  |  |  |                                  |  |                                            |  |      |
|------------------------------------|--|--|--|--|--|--|--|--|--|----------------------------------|--|--------------------------------------------|--|------|
| PLANT<br><i>Hillboro</i>           |  |  |  |  |  |  |  |  |  | PLANT                            |  | DATE OF TEST<br><i>2/57/12/07/08</i>       |  |      |
| EMPLOYEE NAME<br><i>RAVELKA R</i>  |  |  |  |  |  |  |  |  |  | PAYROLL NUMBER<br><i>294</i>     |  | JOB TITLE<br><i>PRESS OPERATOR R PLANT</i> |  | CODE |
| PUMP MANUFACTURER<br><i>EMERIX</i> |  |  |  |  |  |  |  |  |  | SERIAL NUMBER<br><i>CR-78-94</i> |  | FLOW RATE (lpm)<br><i>1.75</i>             |  |      |

| SAMPLE NUMBER | START       | TIME STOP   | ACTIVITY DURING SAMPLING PERIOD | CODE |
|---------------|-------------|-------------|---------------------------------|------|
| <i>N826</i>   | <i>0833</i> | <i>1149</i> | <i>Press Operator</i>           |      |
| <i>N879</i>   | <i>1149</i> | <i>1542</i> | <i>Press Operator</i>           |      |
|               |             |             |                                 |      |
|               |             |             |                                 |      |
|               |             |             |                                 |      |
|               |             |             |                                 |      |

|                                                                                                        |                         |         |
|--------------------------------------------------------------------------------------------------------|-------------------------|---------|
| DID EMPLOYEE WEAR RESPIRATOR?                                                                          | RESPIRATOR TYPE & MODEL | REMARKS |
| <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |                         |         |

|                                                                   |      |
|-------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) | CODE |
| <i>Manufacturing 12"-150 pipe</i>                                 |      |

|                                                                                                            |         |
|------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS                                                                                    | REMARKS |
| <input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |         |

|                                                                                                                                                                                                                                                                    |                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| WEATHER CONDITIONS (AVERAGE)                                                                                                                                                                                                                                       | SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN <input type="checkbox"/> |
| OUTSIDE TEMPERATURE °F. <input type="checkbox"/> WIND DIRECTION <input type="checkbox"/> WIND VELOCITY <input type="checkbox"/> PARTLY CLOUDY <input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> |                                                                                                                             |

|                                                     |                         |                  |                                                                                         |
|-----------------------------------------------------|-------------------------|------------------|-----------------------------------------------------------------------------------------|
| BLANK FIBER COUNT <i>N825</i>                       | MICROSCOPE MAKE & MODEL | FIELD AREA       | CONSTANT                                                                                |
| <i>0</i> FIBERS IN <i>100</i> FIELDS = <i>0 f/f</i> | <i>NIKON PC</i>         | <i>0.013 mm²</i> | $K = \frac{856}{\text{FIELD AREA} \times 1000} = \frac{856}{0.013 \times 1000} = 65.77$ |

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (L)     | CORRECTED f/f + VOLUME x K = f/cc                  | TOTAL SAMPLE TIME (MIN) | f/cc x MIN.            |
|---------------|--------------|----------------|------------------|------------------------------|-----------------------------|----------------------------------------------------|-------------------------|------------------------|
| <i>N836</i>   | <i>11</i>    | <i>100</i>     | <i>0.11</i>      | <i>0.11</i>                  | <i>343</i><br><i>196</i>    | <i>0.11 f/f x K =</i><br><i>LITERS</i> <i>0.04</i> | <i>196</i>              | <i>7.84</i>            |
| <i>N879</i>   | <i>32.5</i>  | <i>100</i>     | <i>0.325</i>     | <i>0.325</i>                 | <i>407.75</i><br><i>233</i> | <i>0.325</i><br><i>407.75</i> <i>0.05</i>          | <i>233</i>              | <i>12.2</i>            |
|               |              |                |                  |                              |                             |                                                    |                         |                        |
|               |              |                |                  |                              |                             |                                                    |                         |                        |
|               |              |                |                  |                              |                             |                                                    |                         |                        |
| TOTALS        |              |                |                  |                              |                             |                                                    |                         | <i>429</i> <i>2005</i> |

|                       |
|-----------------------|
| TIME WEIGHTED AVERAGE |
| TOTAL f/cc x MIN. TWA |
| TOTAL MIN. TWA        |
| <i>0.047 f/cc</i>     |

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
|                      |                      |



Pipe and Plastic Group

## ASBESTOS MONITORING DATA SHEET

NO.

|                                  |                           |                             |                          |
|----------------------------------|---------------------------|-----------------------------|--------------------------|
| PLANT<br>HILLSBORO               |                           | PLANT<br>237                | DATE OF TEST<br>12/07/11 |
| EMPLOYEE NAME<br>CHAMBERS JOHNNY | PAYROLL NUMBER<br>343     | JOB TITLE<br>PRESS OPERATOR | CODE                     |
| PUMP MANUFACTURER<br>MEA         | SERIAL NUMBER<br>K51-5407 | FLOW RATE (lpm)<br>2.00     |                          |

| SAMPLE NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD | CODE |
|---------------|-------|------|---------------------------------|------|
|               | START | STOP |                                 |      |
| N811          | 0830  | 1145 | Pump Operator                   |      |
| N817          | 1145  | 1539 | Pump Operator                   |      |
|               |       |      |                                 |      |
|               |       |      |                                 |      |
|               |       |      |                                 |      |
|               |       |      |                                 |      |

|                                                                                                                                         |                         |                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------------------------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL | REMARKS<br>N817 Heavy deposit of particulates / asbestos |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------------------------|

|                                                                                                |      |
|------------------------------------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.)<br>Manufacturing 8"-150 pipe | CODE |
|------------------------------------------------------------------------------------------------|------|

|                                                                                                                                       |         |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS<br><input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY | REMARKS |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|

|                                                                                                                          |           |                                                                  |                                                                 |                                                                                                                             |                                                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| WEATHER CONDITIONS<br>OUTSIDE TEMPERATURE °F. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | (AVERAGE) | WIND DIRECTION <input type="checkbox"/> <input type="checkbox"/> | WIND VELOCITY <input type="checkbox"/> <input type="checkbox"/> | SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN <input type="checkbox"/> | PARTLY CLOUDY <input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

|                                                     |      |                                     |                                     |                                                  |
|-----------------------------------------------------|------|-------------------------------------|-------------------------------------|--------------------------------------------------|
| BLANK FIBER COUNT<br>0 FIBERS IN 100 FIELDS = 0 f/f | N825 | MICROSCOPE MAKE & MODEL<br>NIKON PC | FIELD AREA<br>0.013 mm <sup>2</sup> | CONSTANT<br>K = 856<br>FIELD AREA x 1000 = 65.77 |
|-----------------------------------------------------|------|-------------------------------------|-------------------------------------|--------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (l) | CORRECTED f/f + VOLUME x K = f/cc | TOTAL SAMPLE TIME (MIN) | f/cc x MIN. |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|-----------------------------------|-------------------------|-------------|
| N811          | 100          | 75             | 1.33             | 1.33                         | 390                     | 1.33 f/f x K = 107.22 LITERS      | 195                     | 43.8        |
| N817          | 102          | 24             | 4.25             | 4.25                         | 468                     | 4.25 / 468 = 0.59                 | 234                     | 139.8       |
|               |              |                |                  |                              |                         |                                   |                         |             |
|               |              |                |                  |                              |                         |                                   |                         |             |
| TOTALS        |              |                |                  |                              |                         | 429                               | 183                     | 6           |

|                       |
|-----------------------|
| TIME WEIGHTED AVERAGE |
| TOTAL f/cc MIN. = TWA |
| TOTAL MIN. =          |
| 0.43 f/cc             |

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
|----------------------|----------------------|

DISTRIBUTION: WHITE PINE CO. / LEADERSHIP CORP. HEALTH &amp; SAFETY / PINK PONY PERSONNEL / LEADERSHIP CORP. / GOLDENROD TEMPORARY PLANT CORP.

|                             |  |  |  |  |                            |  |                                  |                         |  |       |  |                             |  |
|-----------------------------|--|--|--|--|----------------------------|--|----------------------------------|-------------------------|--|-------|--|-----------------------------|--|
| PLANT<br>Hillsboro          |  |  |  |  |                            |  |                                  |                         |  | PLANT |  | DATE OF TEST<br>25712/07/83 |  |
| EMPLOYEE NAME<br>BARTON R   |  |  |  |  | PAYROLL NUMBER<br>930      |  | JOB TITLE<br>MANDREL MAN B PLANT |                         |  | CODE  |  |                             |  |
| PUMP MANUFACTURER<br>BENDIX |  |  |  |  | SERIAL NUMBER<br>08-82-016 |  |                                  | FLOW RATE (lpm)<br>2.02 |  |       |  |                             |  |

| SAMPLE NUMBER | START | TIME STOP | ACTIVITY DURING SAMPLING PERIOD | CODE |
|---------------|-------|-----------|---------------------------------|------|
| N81508381151  |       |           | Mandrel Man                     |      |
| N86511511543  |       |           | Mandrel Man                     |      |
|               |       |           |                                 |      |
|               |       |           |                                 |      |
|               |       |           |                                 |      |

|                                                                                                        |                         |         |
|--------------------------------------------------------------------------------------------------------|-------------------------|---------|
| DID EMPLOYEE WEAR RESPIRATOR?                                                                          | RESPIRATOR TYPE & MODEL | REMARKS |
| <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |                         |         |

|                                                                                                 |      |
|-------------------------------------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.)<br>Manufacturing 12"-150 pipe | CODE |
|-------------------------------------------------------------------------------------------------|------|

|                                                                                                            |         |
|------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS                                                                                    | REMARKS |
| <input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY |         |

|                         |                |               |               |       |         |
|-------------------------|----------------|---------------|---------------|-------|---------|
| WEATHER CONDITIONS      | (AVERAGE)      | SUNNY         | CLOUDY        | HUMID | RAIN    |
| OUTSIDE TEMPERATURE °F. | WIND DIRECTION | WIND VELOCITY | PARTLY CLOUDY | FOG   | SHOWERS |
|                         |                |               |               |       | SNOW    |

|                                                     |                                     |                                     |                                                                     |
|-----------------------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------|
| BLANK FIBER COUNT<br>0 FIBERS IN 100 FIELDS = 0 f/f | MICROSCOPE MAKE & MODEL<br>NIKON PC | FIELD AREA<br>0.013 mm <sup>2</sup> | CONSTANT<br>K = $\frac{855}{\text{FIELD AREA} \times 1000} = 65.77$ |
|-----------------------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (L) | CORRECTED f/f + VOLUME x K = f/cc                          | TOTAL SAMPLE TIME (MIN) | f/cc x MIN. |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|------------------------------------------------------------|-------------------------|-------------|
| N815          | 32.5         | 100            | 0.325            | 0.325                        | 389.86                  | $\frac{0.325 \text{ f/f} \times K}{\text{LITERS}}$<br>0.05 | 193                     | 10.58       |
| N865          | 100          | 97             | 1.03             | 1.03                         | 468.64                  | $\frac{1.03 \text{ f/f} \times K}{468.64}$<br>0.14         | 232                     | 32.48       |
|               |              |                |                  |                              |                         |                                                            |                         |             |
|               |              |                |                  |                              |                         |                                                            |                         |             |
| TOTALS        |              |                |                  |                              |                         |                                                            | 425                     | 43.06       |

|                       |
|-----------------------|
| TIME WEIGHTED AVERAGE |
| TOTAL f/cc x MIN      |
| TOTAL MIN x TWA       |
| 0.10 f/cc             |

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
|----------------------|----------------------|

To P NORRIS  
CORP HEALTH & SAFETY

From B W NAIEN Housboro P&PG

| FILE | SAMPLE NO  | TIME           | min | LPM  | LOCATION        | Vol    |
|------|------------|----------------|-----|------|-----------------|--------|
| 5    | 0.47 N 685 | 07:39 to 11:50 | 251 | 2.01 | REWORK SAW      | 504.51 |
|      | 0.53 N 746 | 11:50 to 15:53 | 243 |      | " "             | 488.43 |
|      | 0.76 N 723 | 07:37 to 11:52 | 255 | 1.99 | CPLG CUTOFF SAW | 507.45 |
| 81   | 0.86 N 559 | 11:52 to 15:54 | 242 |      | " " "           | 481.58 |
| 26   | 0.27 P 004 | 07:29 to 11:00 | 209 | 1.74 | SM CPLG TESTER  | 363.66 |
| 2    | 0.23 N 691 | 14:02 to 15:38 | 96  |      | " " "           | 167.04 |

\* NOT ON SMALL CPLG TESTER 11:00 to 14:00

BLANK N 733 - 0.01 f/f

PLANT 257

11-30-83

Same as 11-28-83

CTD021471

To P. NORRIS  
(CORP. HEALTH & SAFETY)

FROM BOWHAUGH HILLSBORO PLANT PAPER

| 7WA  | 7/CC | SAMPLE NO | COND | TIME   | LPM            | LOCATION            |
|------|------|-----------|------|--------|----------------|---------------------|
| 0.38 | <    | 0.30      | 738  | SMOKER | 7:25 to 11:54  | 1.71 SM CPIC TESTER |
|      |      | 0.48      | 677  | COND   | 11:54 to 15:48 | 1.71 " "            |
|      |      | 0.64      | 802  | COND   | 11:53 to 15:48 | 2.18 REWORK SAW     |
|      |      | VOID      | 798  | " "    | 11:53 to 15:48 | 2.18 " "            |
|      |      |           | 733  | BLANK  |                | VOIDED              |

PLANT 257

11-28-83

CURTAIN INSTALLED BETWEEN  
REWORK SAW & OPEN DOOR  
RIGHTSIDE

|                             |                            |                                  |                             |
|-----------------------------|----------------------------|----------------------------------|-----------------------------|
| PLANT<br>HILLSBORO TX       |                            | PLANT<br>25706/02/93             | DATE OF TEST<br>25706/02/93 |
| EMPLOYEE NAME<br>SALINAS C  | PAYROLL NUMBER<br>703      | JOB TITLE<br>FIBER MIXER B PLANT | CODE                        |
| PUMP MANUFACTURER<br>Bendix | SERIAL NUMBER<br>08-82-016 | FLOW RATE (lpm)<br>2.08          |                             |

| SAMPLE NUMBER | START | TIME STOP | ACTIVITY DURING SAMPLING PERIOD | CODE |
|---------------|-------|-----------|---------------------------------|------|
| 1084          | 0758  |           | DO NOT USE PUMP STOPPED         |      |
| 1074          | 1005  | 1121      | Dumping FIBER                   |      |
| 1080          | 1121  | 1130      | Dumping FIBER                   |      |
| 1075          |       |           | BLANK                           |      |

|                                                                                                                                         |                                   |                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL<br>3M8710 | REMARKS<br>MECH. PROBLEMS on EQUIPMENT (PUMP) |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------|

|                                                                   |      |
|-------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) | CODE |
|-------------------------------------------------------------------|------|

|                                                                                                                                       |         |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS<br><input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY | REMARKS |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|

|                                                                   |                          |                         |                                                                                                                                               |
|-------------------------------------------------------------------|--------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| WEATHER CONDITIONS<br>OUTSIDE TEMPERATURE °F. <u>84</u> (AVERAGE) | WIND DIRECTION <u>SE</u> | WIND VELOCITY <u>12</u> | SUNNY <input type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN <input type="checkbox"/>                   |
|                                                                   |                          |                         | PARTLY CLOUDY <input checked="" type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> |

|                                                                             |                                |                                             |                                                                    |
|-----------------------------------------------------------------------------|--------------------------------|---------------------------------------------|--------------------------------------------------------------------|
| BLANK FIBER COUNT<br><u>0</u> FIBERS IN <u>100</u> FIELDS = <u>.000 f/f</u> | MICROSCOPE MAKE & MODEL<br>B&L | FIELD AREA<br><u>.00625</u> mm <sup>2</sup> | CONSTANT<br>K = $\frac{855}{\text{FIELD AREA} \times 1000} = 1360$ |
|-----------------------------------------------------------------------------|--------------------------------|---------------------------------------------|--------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (l) | CORRECTED f/f + VOLUME x K = f/cc                         | TOTAL SAMPLE TIME (MIN) | f/cc x MIN. |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|-----------------------------------------------------------|-------------------------|-------------|
| 1074          | 35.5         | 100            | .355             | .355                         | 158.08                  | $\frac{\text{f/f} \times \text{K}}{\text{LITERS}} = .307$ | 76                      | 23.332      |
| 1080          | 16.5         | 100            | .165             | .165                         | 220.48                  | $.1102$                                                   | 106                     | 10.812      |
|               |              |                |                  |                              |                         |                                                           |                         |             |
|               |              |                |                  |                              |                         |                                                           |                         |             |
|               |              |                |                  |                              |                         |                                                           |                         |             |
| TOTALS        |              |                |                  |                              |                         | 232                                                       | 34.144                  |             |

|                                                                      |
|----------------------------------------------------------------------|
| TIME WEIGHTED AVERAGE<br>TOTAL f/cc x MIN. / TWA<br>TOTAL MIN. / TWA |
|----------------------------------------------------------------------|

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
|----------------------|----------------------|

DISTRIBUTION: WHITE PLANT: SAFETY / AL'S QUARTY CORP. HEALTH & SAFETY / DICK PLANT: PERSONNEL FILE / CORDERO'S TEMPORARY PLANT: COPY



|                             |  |  |  |  |  |  |  |  |  |                            |  |  |                            |  |              |           |                          |  |
|-----------------------------|--|--|--|--|--|--|--|--|--|----------------------------|--|--|----------------------------|--|--------------|-----------|--------------------------|--|
| PLANT<br>HILLSBORO TX       |  |  |  |  |  |  |  |  |  |                            |  |  |                            |  | PLANT<br>257 |           | DATE OF TEST<br>05/27/83 |  |
| EMPLOYEE NAME<br>CLAY D     |  |  |  |  |  |  |  |  |  | PAYROLL NUMBER<br>867      |  |  | JOB TITLE<br>TRAY TAKE OFF |  |              | CODE<br>A |                          |  |
| PUMP MANUFACTURER<br>BENDIX |  |  |  |  |  |  |  |  |  | SERIAL NUMBER<br>08-82-016 |  |  | FLOW RATE (lpm)<br>2.11    |  |              |           |                          |  |

| SAMPLE<br>NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD | CODE |
|------------------|-------|------|---------------------------------|------|
|                  | START | STOP |                                 |      |
| 1064             | 0855  | 1136 | Loading Pipe                    |      |
| 1065             | 1137  | 1430 | Loading Pipe                    |      |
|                  |       |      |                                 |      |
|                  |       |      |                                 |      |
| 1069             |       |      | Blank                           |      |

|                                                                                                                                         |                         |         |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL | REMARKS |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------|

| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) |  | CODE |
|-------------------------------------------------------------------|--|------|
|                                                                   |  |      |

| EXHAUST CONTROL SYSTEMS                                  |                                                   | REMARKS |
|----------------------------------------------------------|---------------------------------------------------|---------|
| <input checked="" type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |         |

WEATHER CONDITIONS (AVERAGE) 

|  |   |   |
|--|---|---|
|  | 8 | 8 |
|--|---|---|

 WIND DIRECTION 

|  |   |
|--|---|
|  | S |
|--|---|

 WIND VELOCITY 

|  |   |
|--|---|
|  | 4 |
|--|---|

 SUNNY ☒ CLOUDY ☐ HUMID ☐ RAIN ☐  
OUTSIDE TEMPERATURE °F PARTLY CLOUDY ☐ FOG ☐ SHOWERS ☐ SNOW ☐

|                                                                            |                                       |                                             |                                                                                                      |
|----------------------------------------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------|
| BLANK FIBER COUNT<br><u>0</u> FIBERS IN <u>100</u> FIELDS = <u>0.0 f/f</u> | MICROSCOPE MAKE & MODEL<br><u>BEI</u> | FIELD AREA<br><u>.00625</u> mm <sup>2</sup> | CONSTANT<br>$K = \frac{855}{\text{FIELD AREA} \times 1000} = \frac{855}{.00625 \times 1000} = 136.8$ |
|----------------------------------------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------|

| SAMPLE<br>NUMBER | TOTAL<br>FIBERS | FIELDS<br>COUNTED = | FIBERS PER<br>FIELD | CORRECT BY<br>SUBTRACTING<br>BLANK | TOTAL<br>SAMPLE<br>VOLUME (l) | CORRECTED f/f + VOLUME x K = f/cc                                                                       | TOTAL<br>SAMPLE<br>TIME (MIN) | f/cc x MIN |
|------------------|-----------------|---------------------|---------------------|------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------|------------|
| 1064             | 4.5             | 100                 | .045                | .045                               | 339.71                        | <div><div><div>f/f x K =</div><div>LITERS</div></div><div><div></div><div></div><div></div></div></div> | 161                           | 2.898      |
| 1065             | 9               | 100                 | .090                | .090                               | 365.03                        | <div><div></div><div></div></div> <div><div></div><div></div><div></div></div>                          | 173                           | 7.439      |
|                  |                 |                     |                     |                                    |                               | <div><div></div><div></div></div> <div><div></div><div></div><div></div></div>                          |                               |            |
|                  |                 |                     |                     |                                    |                               | <div><div></div><div></div></div> <div><div></div><div></div><div></div></div>                          |                               |            |
|                  |                 |                     |                     |                                    |                               | TOTALS                                                                                                  | 334                           | 10.337     |

|                                                                                       |   |     |      |   |   |   |      |
|---------------------------------------------------------------------------------------|---|-----|------|---|---|---|------|
| TIME WEIGHTED AVERAGE                                                                 |   |     |      |   |   |   |      |
| TOTAL $\text{f/cc} \times \text{MIN.}$                                                |   | TWA |      |   |   |   |      |
| TOTAL MIN.                                                                            |   |     |      |   |   |   |      |
| <table border="1"> <tr> <td>0</td> <td>3</td> <td>1</td> <td>f/cc</td> </tr> </table> |   |     |      | 0 | 3 | 1 | f/cc |
| 0                                                                                     | 3 | 1   | f/cc |   |   |   |      |

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
| <i>[Signature]</i>   | <i>[Signature]</i>   |

|                             |                           |                         |                              |
|-----------------------------|---------------------------|-------------------------|------------------------------|
| PLANT<br>Hillsboro TX       |                           | PLANT                   | DATE OF TEST<br>257 05/27/83 |
| EMPLOYEE NAME<br>PAVELKA R  | PAYROLL NUMBER<br>294     | JOB TITLE<br>RELIEF     | CODE<br>A                    |
| PUMP MANUFACTURER<br>Bendix | SERIAL NUMBER<br>08-78-94 | FLOW RATE (lpm)<br>1.81 |                              |

| SAMPLE NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD                           | CODE |
|---------------|-------|------|-----------------------------------------------------------|------|
|               | START | STOP |                                                           |      |
| 1071          | 0810  | 1133 | Relief for Back side, Traylor, Press Operator & Mixer Man |      |
| 1070          | 1134  | 1428 | " " " "                                                   |      |
|               |       |      |                                                           |      |
|               |       |      |                                                           |      |
| 1069          |       |      | Blank                                                     |      |

|                                                                                                                                         |                                   |                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL<br>3M8710 | REMARKS<br>When doing Mixer Man Job |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------|

|                                                                   |      |
|-------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) | CODE |
|-------------------------------------------------------------------|------|

|                                                                                                                                       |         |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS<br><input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY | REMARKS |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|

|                                                                                                        |                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WEATHER CONDITIONS<br>OUTSIDE TEMPERATURE °F. <u>68</u> WIND DIRECTION <u>S</u> WIND VELOCITY <u>4</u> | SUNNY <input type="checkbox"/> CLOUDY <input checked="" type="checkbox"/> HUMID <input type="checkbox"/> RAIN <input type="checkbox"/><br>PARTLY CLOUDY <input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                     |                                |                                      |                                                                     |
|-----------------------------------------------------|--------------------------------|--------------------------------------|---------------------------------------------------------------------|
| BLANK FIBER COUNT<br>0 FIBERS IN 100 FIELDS = 0.0 f | MICROSCOPE MAKE & MODEL<br>B&L | FIELD AREA<br>.00625 mm <sup>2</sup> | CONSTANT<br>K = $\frac{855}{\text{FIELD AREA} \times 1000} = 136.8$ |
|-----------------------------------------------------|--------------------------------|--------------------------------------|---------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (l) | CORRECTED f/f + VOLUME x K = f/cc                               | TOTAL SAMPLE TIME (MIN) | f/cc x MIN. |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|-----------------------------------------------------------------|-------------------------|-------------|
| 1071          | 33           | 100            | .330             | .330                         | 367.43                  | $\frac{f}{l} \times K = \frac{.330}{.00625} \times 136.8 = 723$ | 203                     | 24.969      |
| 1070          | 55           | 100            | .055             | .055                         | 34.94                   | $\frac{f}{l} \times K = \frac{.055}{.00625} \times 136.8 = 119$ | 174                     | 4.176       |
|               |              |                |                  |                              |                         |                                                                 |                         |             |
|               |              |                |                  |                              |                         |                                                                 |                         |             |
|               |              |                |                  |                              |                         |                                                                 |                         |             |
| TOTALS        |              |                |                  |                              |                         |                                                                 | 377                     | 29.145      |

|                                                                      |
|----------------------------------------------------------------------|
| TIME WEIGHTED AVERAGE<br>TOTAL f/cc x MIN. = TWA<br>TOTAL MIN. = TWA |
|----------------------------------------------------------------------|

|                                            |                                            |
|--------------------------------------------|--------------------------------------------|
| SIGNATURE OF SAMPLER<br><i>[Signature]</i> | SIGNATURE OF ANALYST<br><i>[Signature]</i> |
|--------------------------------------------|--------------------------------------------|

|                              |                            |                                |                        |
|------------------------------|----------------------------|--------------------------------|------------------------|
| PLANT<br>HILLSBORO           |                            | PLANT                          | DATE OF TEST<br>2/5/70 |
| EMPLOYEE NAME<br>SHUFFLEBURN | PAYROLL NUMBER<br>866      | JOB TITLE<br>MANDREL HANDLER A | CODE                   |
| PUMP MANUFACTURER<br>MSA     | SERIAL NUMBER<br>R-81-5407 | FLOW RATE (lpm)<br>1.93        |                        |

| SAMPLE NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD | CODE |
|---------------|-------|------|---------------------------------|------|
|               | START | STOP |                                 |      |
| 1068          | 0805  | 1130 | Backside of Press               |      |
| 1072          | 1131  | 1415 | " "                             |      |
|               |       |      |                                 |      |
|               |       |      |                                 |      |
| 1069          |       |      | Blank                           |      |

|                                                                                                                                         |                         |         |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL | REMARKS |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------|

|                                                                   |      |
|-------------------------------------------------------------------|------|
| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) | CODE |
|-------------------------------------------------------------------|------|

|                                                                                                                                       |         |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS<br><input checked="" type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY | REMARKS |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|

|                                                                                               |                                                                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WEATHER CONDITIONS (AVERAGE)<br>OUTSIDE TEMPERATURE °F: 88 WIND DIRECTION: S WIND VELOCITY: 4 | SUNNY <input checked="" type="checkbox"/> CLOUDY <input type="checkbox"/> HUMID <input type="checkbox"/> RAIN <input type="checkbox"/><br>PARTLY CLOUDY <input type="checkbox"/> FOG <input type="checkbox"/> SHOWERS <input type="checkbox"/> SNOW <input type="checkbox"/> |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                       |                                |                                      |                                                                     |
|-------------------------------------------------------|--------------------------------|--------------------------------------|---------------------------------------------------------------------|
| BLANK FIBER COUNT<br>0 FIBERS IN 100 FIELDS = 0.0 f/f | MICROSCOPE MAKE & MODEL<br>B&L | FIELD AREA<br>.00625 mm <sup>2</sup> | CONSTANT<br>K = $\frac{855}{\text{FIELD AREA} \times 1000} = 136.8$ |
|-------------------------------------------------------|--------------------------------|--------------------------------------|---------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (L) | CORRECTED f/f + VOLUME x K = f/cc           | TOTAL SAMPLE TIME (MIN) | f/cc x MIN. |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|---------------------------------------------|-------------------------|-------------|
| 1068          | 14           | 100            | .140             | .140                         | 395.65                  | $\frac{f/f \times K}{\text{LITERS}} = .048$ | 205                     | 9.840       |
| 1072          | 14           | 100            | .140             | .140                         | 316.52                  | $\frac{f/f \times K}{\text{LITERS}} = .061$ | 164                     | 10.004      |
|               |              |                |                  |                              |                         |                                             |                         |             |
|               |              |                |                  |                              |                         |                                             |                         |             |
| TOTALS        |              |                |                  |                              |                         |                                             | 369                     | 19.844      |

|                                                                                        |
|----------------------------------------------------------------------------------------|
| TIME WEIGHTED AVERAGE<br>TOTAL f/cc x MIN. = TWA<br>TOTAL MIN. = 54<br>TWA = 0.54 f/cc |
|----------------------------------------------------------------------------------------|

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
|----------------------|----------------------|

# ASBESTOS MONITORING DATA SHEET

|                    |  |  |  |  |  |  |  |  |  |                |  |  |  |  |                 |  |              |  |  |      |  |
|--------------------|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|-----------------|--|--------------|--|--|------|--|
| PLANT              |  |  |  |  |  |  |  |  |  |                |  |  |  |  | PLANT           |  | DATE OF TEST |  |  |      |  |
| HILLSBORO - TX     |  |  |  |  |  |  |  |  |  |                |  |  |  |  | 25705           |  | 27/83        |  |  |      |  |
| EMPLOYEE NAME      |  |  |  |  |  |  |  |  |  | PAYROLL NUMBER |  |  |  |  | JOB TITLE       |  |              |  |  | CODE |  |
| BAG DENNER B PLANT |  |  |  |  |  |  |  |  |  | -----          |  |  |  |  | Area Sample     |  |              |  |  |      |  |
| PUMP MANUFACTURER  |  |  |  |  |  |  |  |  |  | SERIAL NUMBER  |  |  |  |  | FLOW RATE (lpm) |  |              |  |  |      |  |
| MSA                |  |  |  |  |  |  |  |  |  | 02426          |  |  |  |  | 1.86            |  |              |  |  |      |  |

| SAMPLE<br>NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD | CODE |
|------------------|-------|------|---------------------------------|------|
|                  | START | STOP |                                 |      |
| 1060             | 0803  | 1128 | Placed on top of Control Panel  |      |
| 1073             | 1129  | 1506 | " " " " "                       |      |
|                  |       |      |                                 |      |
|                  |       |      |                                 |      |
| 1069             |       |      | Blank                           |      |

| DID EMPLOYEE WEAR RESPIRATOR?                                                               | RESPIRATOR TYPE & MODEL | REMARKS |
|---------------------------------------------------------------------------------------------|-------------------------|---------|
| <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SOMETIMES |                         |         |

| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) |  | CODE |
|-------------------------------------------------------------------|--|------|
|                                                                   |  |      |

| EXHAUST CONTROL SYSTEMS                                  |                                                   | REMARKS |
|----------------------------------------------------------|---------------------------------------------------|---------|
| <input checked="" type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |         |

|                        |                                                |                |                                               |               |                                               |                                     |                          |                          |                          |                          |                          |                          |                          |
|------------------------|------------------------------------------------|----------------|-----------------------------------------------|---------------|-----------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| WEATHER CONDITIONS     |                                                | (AVERAGE)      |                                               |               | SUNNY                                         | <input checked="" type="checkbox"/> | CLOUDY                   | <input type="checkbox"/> | HUMID                    | <input type="checkbox"/> | RAIN                     | <input type="checkbox"/> |                          |
| OUTSIDE TEMPERATURE °F | <div><div></div><div>28</div><div></div></div> | WIND DIRECTION | <div><div></div><div>S</div><div></div></div> | WIND VELOCITY | <div><div></div><div>4</div><div></div></div> | PARTLY CLOUDY                       | <input type="checkbox"/> | FOG                      | <input type="checkbox"/> | SHOWERS                  | <input type="checkbox"/> | SNOW                     | <input type="checkbox"/> |

|                                                                            |                                           |                                             |                                                                     |
|----------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|---------------------------------------------------------------------|
| BLANK FIBER COUNT<br><u>0</u> FIBERS IN <u>100</u> FIELDS = <u>0.0 f/f</u> | MICROSCOPE MAKE & MODEL<br><u>B&amp;L</u> | FIELD AREA<br><u>0.0025</u> mm <sup>2</sup> | CONSTANT<br>$K = \frac{855}{\text{FIELD AREA} \times 1000} = 136.8$ |
|----------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|---------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS ÷ COUNTED = FIELD | FIBERS PER | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (l) | CORRECTED $f/f + \text{VOLUME} \times K = f/cc$       | TOTAL SAMPLE TIME (MIN) | $f/cc \times \text{MIN.}$ |       |
|---------------|--------------|--------------------------|------------|------------------------------|-------------------------|-------------------------------------------------------|-------------------------|---------------------------|-------|
| 1060          | 3.5          | 100                      | .035       | .035                         | 381.30                  | $\frac{f/f \times K}{\text{LITERS}} =$<br>, 0   1   0 | 205                     | 2.05                      |       |
| 1073          | 12.5         | 100                      | .125       | .125                         | 403.62                  | . 0   4   2                                           | 217                     | 9.11                      |       |
|               |              |                          |            |                              |                         |                                                       |                         |                           |       |
|               |              |                          |            |                              |                         |                                                       |                         |                           |       |
| RECEIVED      |              |                          |            |                              |                         |                                                       | TOTALS                  | 422                       | 11.16 |

TIME WEIGHTED AVERAGE

$$\frac{\text{TOTAL } f_{\text{loc}} \times \text{MIN.}}{\text{TOTAL MIN.}} = \text{TWA}$$

|   |   |   |   |      |
|---|---|---|---|------|
| 1 | 0 | 2 | 6 | floc |
|---|---|---|---|------|

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
| <i>[Signature]</i>   | <i>[Signature]</i>   |

DISTRIBUTION WHITE PENT SAFETY FILE/CANARY CORP HEALTH SAFETY/RINK PLANT PERSONNEL FILE/GOLDENROD-TEMPORARY PLANT COPY

CTD021477

NO. 83-2516-4

### Pipe and Plastic Group

CTD021478

# ASBESTOS MONITORING DATA SHEET

|                   |  |  |  |  |  |  |  |  |  |                |  |  |  |  |                      |  |              |  |  |      |  |
|-------------------|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|----------------------|--|--------------|--|--|------|--|
| PLANT             |  |  |  |  |  |  |  |  |  |                |  |  |  |  | PLANT                |  | DATE OF TEST |  |  |      |  |
| WILLSBORO TX      |  |  |  |  |  |  |  |  |  |                |  |  |  |  | 257                  |  | 05/24/83     |  |  |      |  |
| EMPLOYEE NAME     |  |  |  |  |  |  |  |  |  | PAYROLL NUMBER |  |  |  |  | JOB TITLE            |  |              |  |  | CODE |  |
| J H N S J         |  |  |  |  |  |  |  |  |  | 3114           |  |  |  |  | MACHINE TENDER PLANT |  |              |  |  |      |  |
| PUMP MANUFACTURER |  |  |  |  |  |  |  |  |  | SERIAL NUMBER  |  |  |  |  | FLOW RATE (lpm)      |  |              |  |  |      |  |
| BERDIX            |  |  |  |  |  |  |  |  |  | 08-18-94       |  |  |  |  | 1.79                 |  |              |  |  |      |  |

| SAMPLE<br>NUMBER | TIME  |                 | ACTIVITY DURING SAMPLING PERIOD                      | CODE |
|------------------|-------|-----------------|------------------------------------------------------|------|
|                  | START | STOP            |                                                      |      |
| 1053             | 0808  | 1123            | Normal Duties                                        |      |
| 1066             | 1124  | <del>1124</del> | Do Not Use got wet shower, <sup>in</sup> sprayed him |      |
|                  |       |                 |                                                      |      |
| 1067             |       |                 | Blank                                                |      |

| DID EMPLOYEE WEAR RESPIRATOR?                                                                          | RESPIRATOR TYPE & MODEL | REMARKS |
|--------------------------------------------------------------------------------------------------------|-------------------------|---------|
| <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | David Hudson            | -       |

| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) |  | CODE |
|-------------------------------------------------------------------|--|------|
| 1.0000 1.0000 1.0000                                              |  |      |

| EXHAUST CONTROL SYSTEMS                       |                                                   | REMARKS |
|-----------------------------------------------|---------------------------------------------------|---------|
| <input type="checkbox"/> FUNCTIONING NORMALLY | <input type="checkbox"/> NOT FUNCTIONING NORMALLY |         |

|                         |                                                |                |    |               |                                                |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------|------------------------------------------------|----------------|----|---------------|------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| WEATHER CONDITIONS      |                                                | (AVERAGE)      |    |               | SUNNY                                          | <input type="checkbox"/> | CLOUDY                   | <input type="checkbox"/> | HUMID                    | <input type="checkbox"/> | RAIN                     | <input type="checkbox"/> |                          |
| OUTSIDE TEMPERATURE °F. | <div><div></div><div>78</div><div></div></div> | WIND DIRECTION | NE | WIND VELOCITY | <div><div></div><div>11</div><div></div></div> | PARTLY CLOUDY            | <input type="checkbox"/> | FOG                      | <input type="checkbox"/> | SHOWERS                  | <input type="checkbox"/> | SNOW                     | <input type="checkbox"/> |

|                                                                             |                                           |                                            |                                                                            |
|-----------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------|
| BLANK FIBER COUNT<br><u>2.5</u> FIBERS IN <u>100</u> FIELDS = <u>.025/f</u> | MICROSCOPE MAKE & MODEL<br><u>B&amp;L</u> | FIELD AREA<br><u>.0025</u> mm <sup>2</sup> | CONSTANT<br>K = $\frac{855}{\text{FIELD AREA} \times 1000}$ = <u>136.8</u> |
|-----------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------|

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS ÷ COUNTED = FIELD | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (l) | CORRECTED f/f → VOLUME × K = f/cc<br>LITERS | TOTAL SAMPLE TIME (MIN) | f/cc × MIN. |
|---------------|--------------|--------------------------|------------------|------------------------------|-------------------------|---------------------------------------------|-------------------------|-------------|
| 1053          | 59.5         | 100                      | .595             | .575                         | 349.05                  | $\frac{f}{f} \times K =$<br>.225            | 195                     | 43.875      |
| 1066          |              |                          |                  |                              |                         |                                             |                         |             |
|               |              |                          |                  |                              |                         |                                             |                         |             |
|               |              |                          |                  |                              |                         |                                             |                         |             |
|               |              |                          |                  |                              |                         |                                             |                         |             |
| <b>TOTALS</b> |              |                          |                  |                              |                         |                                             | 195                     | 43.875      |

TIME WEIGHTED AVERAGE  

$$\frac{\text{TOTAL } f_{loc} \times \text{MIN.}}{\text{TOTAL MIN.}} = \text{TWA}$$

|   |   |   |           |
|---|---|---|-----------|
| 2 | 2 | 5 | $f_{loc}$ |
|---|---|---|-----------|

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
| <i>[Signature]</i>   | <i>[Signature]</i>   |

DISTRIBUTION: WHITE PLANT, WHITE PLANT CANARY CORP. HEALTH SAFETY: BOK PLANT PERSONNEL FILE, GOLDENROD, TEMPORARY PLANT CORP.

44-51909-1020

CTD021479

# ASBESTOS MONITORING DATA SHEET

|                   |  |  |  |  |  |                |  |  |                      |  |  |      |       |  |              |  |
|-------------------|--|--|--|--|--|----------------|--|--|----------------------|--|--|------|-------|--|--------------|--|
| PLANT             |  |  |  |  |  |                |  |  |                      |  |  |      | PLANT |  | DATE OF TEST |  |
| HILLSBORO TX      |  |  |  |  |  |                |  |  |                      |  |  |      | 25705 |  | 24/63        |  |
| EMPLOYEE NAME     |  |  |  |  |  | PAYROLL NUMBER |  |  | JOB TITLE            |  |  | CODE |       |  |              |  |
| MADOTEN J         |  |  |  |  |  | 4412           |  |  | PRESS OPERATOR PLANT |  |  |      |       |  |              |  |
| PUMP MANUFACTURER |  |  |  |  |  | SERIAL NUMBER  |  |  | FLOW RATE (lpm)      |  |  |      |       |  |              |  |
| MEA               |  |  |  |  |  | K-81-5407      |  |  | 1.91                 |  |  |      |       |  |              |  |

| SAMPLE<br>NUMBER | TIME  |      | ACTIVITY DURING SAMPLING PERIOD           | CODE |
|------------------|-------|------|-------------------------------------------|------|
|                  | START | STOP |                                           |      |
| 1056             | 0805  | 1125 | Operation of Pippo Machine Press          |      |
| 1059             | 1126  | 1422 | Left Plant 12:20 to 12:40 turned off pump |      |
|                  |       |      |                                           |      |
| 1067             |       |      | Blank                                     |      |

|                                                                                                                                         |                                                    |                           |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------|
| DID EMPLOYEE WEAR RESPIRATOR?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SOMETIMES | RESPIRATOR TYPE & MODEL<br><i>Chemical Warfare</i> | REMARKS<br><i>6/10/53</i> |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------|

| MANUFACTURING INFORMATION (Size - Type of pipe - Downtime - Etc.) |  | CODE |
|-------------------------------------------------------------------|--|------|
| Lucas 4 1/2" VT and                                               |  |      |

|                                                                                                                            |         |
|----------------------------------------------------------------------------------------------------------------------------|---------|
| EXHAUST CONTROL SYSTEMS<br><input type="checkbox"/> FUNCTIONING NORMALLY <input type="checkbox"/> NOT FUNCTIONING NORMALLY | REMARKS |
|----------------------------------------------------------------------------------------------------------------------------|---------|

WEATHER CONDITIONS (AVERAGE) ☐ SUNNY ☐ CLOUDY ☐ HUMID ☐ RAIN ☐  
 OUTSIDE TEMPERATURE °F.  WIND DIRECTION  WIND VELOCITY  PARTLY CLOUDY ☐ FOG ☐ SHOWERS ☐ SNOW ☐

|                                   |                         |                       |                                                         |
|-----------------------------------|-------------------------|-----------------------|---------------------------------------------------------|
| BLANK FIBER COUNT                 | MICROSCOPE MAKE & MODEL | FIELD AREA            | CONSTANT                                                |
| 2.5 FIBERS IN 100 FIELDS = .025/f | B&L                     | .0025 mm <sup>2</sup> | K = $\frac{855}{\text{FIELD AREA} \times 1000} = 136.8$ |

| SAMPLE NUMBER | TOTAL FIBERS | FIELDS COUNTED | FIBERS PER FIELD | CORRECT BY SUBTRACTING BLANK | TOTAL SAMPLE VOLUME (L) | CORRECTED $\overline{ff} + \text{VOLUME} \times K = \overline{ffcc}$ | TOTAL SAMPLE TIME (MIN) | $\overline{ffcc} \times \text{MIN}$ |
|---------------|--------------|----------------|------------------|------------------------------|-------------------------|----------------------------------------------------------------------|-------------------------|-------------------------------------|
| 1056          | 33.5         | 100            | .335             | .315                         | 382.00                  | $\frac{\overline{ff}}{\text{LITERS}} \times K =$<br>[ ] [ ] [ ] [ ]  | 200                     | 22.600                              |
| 1059          | 11.5         | 100            | .115             | .095                         | 336.16                  | [ ] [ ] [ ] [ ]                                                      | 176                     | 6.864                               |
|               |              |                |                  |                              |                         | [ ] [ ] [ ] [ ]                                                      |                         |                                     |
|               |              |                |                  |                              |                         | [ ] [ ] [ ] [ ]                                                      |                         |                                     |
|               |              |                |                  |                              |                         | [ ] [ ] [ ] [ ]                                                      |                         |                                     |
| TOTALS        |              |                |                  |                              |                         |                                                                      | 376                     | 29.464                              |

|                                                                                   |                  |
|-----------------------------------------------------------------------------------|------------------|
| TIME WEIGHTED AVERAGE                                                             |                  |
| $\frac{\text{TOTAL } f_{acc} \times \text{MIN.}}{\text{TOTAL MIN.}} = \text{TWA}$ |                  |
| 0.078                                                                             | f <sub>acc</sub> |

|                      |                      |
|----------------------|----------------------|
| SIGNATURE OF SAMPLER | SIGNATURE OF ANALYST |
| <i>[Signature]</i>   | <i>[Signature]</i>   |

DISTRIBUTION: WHITE-PLANT SAFETY FILE/CANARY-CORP HEALTH & SAFETY/PINK-PLANT PERSONNEL FILE/GOLENDRO-TEMPORARY PLANT COPY

CTD021480

729.5.010 7430

NO. 85-257-1

### Pipe and Plastic Group

DISTRIBUTION: WHITE-PLANT SAFETY FILE/CANARY-CORP HEALTH & SAFETY/PINK-PLANT PERSONNEL FILE/GOLDENROD-TEMPORARY PLANT COPY

Riverside

April 1953