Landfill
Gas System Monitoring

Technician(s): _____ **Date(s):** _____

Date	Well ID.	Temp	Header Press (in. WC)	Well Press (in. WC)	Diff Press (in. WC)	CH4	CO2	O2	Balance	Comments - Well condition, piping, etc.; any initial field well pressure adjustments	Adjust WP (per engineer)

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Notes: