

|                                                                                                                                                                                   |  |  |  |                                                    |  |  |  |                                                                              |  |  |  |             |  |        |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|----------------------------------------------------|--|--|--|------------------------------------------------------------------------------|--|--|--|-------------|--|--------|--|
| Client Contact Information                                                                                                                                                        |  |  |  | Bottle Order ID : <b>B2508016</b>                  |  |  |  | Courier : <b>FGALDUN</b>                                                     |  |  |  | 1 of 3 COCs |  |        |  |
| Client ID : <b>GFEL01</b>                                                                                                                                                         |  |  |  | Project ID : <b>722 West End Ave, Brooklyn, NY</b> |  |  |  | Sampler Name(s) : <b>FRANK GALDUN</b>                                        |  |  |  | Analysis    |  | Matrix |  |
| Customer Name : <b>GFE LLC</b><br><br>Address : <b>58 Nokomis Ave</b><br><br>City : <b>Lake Hiawatha</b><br><br>State : <b>NJ</b><br><br>Zip Code : <b>07034</b><br><br>Country : |  |  |  | Project Manager : <b>FRANK GALDUN</b>              |  |  |  | <b>AIR ANALYSIS</b><br><b>CHAIN-OF-CUSTODY</b><br><br><b>Batch Certified</b> |  |  |  |             |  |        |  |
|                                                                                                                                                                                   |  |  |  | Phone Number : <b>646-542-3465</b>                 |  |  |  |                                                                              |  |  |  |             |  |        |  |
|                                                                                                                                                                                   |  |  |  | Fax Number : <b>973-334-1692</b>                   |  |  |  |                                                                              |  |  |  |             |  |        |  |
|                                                                                                                                                                                   |  |  |  | Site Details: <b>77-02 13TH AVE BROOKLYN, NY</b>   |  |  |  |                                                                              |  |  |  |             |  |        |  |
|                                                                                                                                                                                   |  |  |  | Analysis Turnaround Time <b>5 DAY</b>              |  |  |  | Data Package Type : <b>RESULTS ONLY</b>                                      |  |  |  |             |  |        |  |
|                                                                                                                                                                                   |  |  |  | Standard : <b>15 business days</b> OR              |  |  |  | EDD Type : <b>PDF</b>                                                        |  |  |  |             |  |        |  |
| Rush (Specify): <b>5 Days</b>                                                                                                                                                     |  |  |  |                                                    |  |  |  |                                                                              |  |  |  |             |  |        |  |

| Sample Identification | Sample Date(s) | Time Start (24 hr Clock) | Time Stop (24 hr Clock) | Can Vacuum in Field ("Hg) (Start) | Can Vacuum in Field ("Hg) (Stop)** | Interior Temp. (F) (Start) | Interior Temp. (F) (Stop) | Out going Can Pressure ("Hg)(Lab) | In coming Can Pressure ("Hg)(Lab) | Flow Reg. ID | Can ID |     | Flow Controller Readout (ml/min) | Can Cert ID | TO-15 | Indoor/Ambient Air | Soil Gas |
|-----------------------|----------------|--------------------------|-------------------------|-----------------------------------|------------------------------------|----------------------------|---------------------------|-----------------------------------|-----------------------------------|--------------|--------|-----|----------------------------------|-------------|-------|--------------------|----------|
| SVI                   | 8/14/25        | 11:01                    | 11:04                   | 30                                |                                    | 81                         | 83                        | -30                               | -75                               | 10649        | 10158  | 6 L | 50                               | VL042828.D  | 1     |                    |          |

| Temperature (Fahrenheit) |         |         |         |  | GC/MS Analyst Signature (TO-15) <span style="float: right; border: 1px solid black; padding: 5px;">Sut</span> |
|--------------------------|---------|---------|---------|--|---------------------------------------------------------------------------------------------------------------|
|                          | Ambient | Maximum | Minimum |  |                                                                                                               |
| Start                    | 81      |         |         |  |                                                                                                               |
| Stop                     | 83      |         |         |  |                                                                                                               |

| Pressure (Inches of Hg) |         |         |         |  | <p>** Submittal of this COC indicates approval of the analysis based on existing conditions.</p> <p><b>REPORT ONLY THOSE ANALYTES ON THE ATTACHED LIST</b></p> <p>Please follow the instructions on the back of this COC.</p> |
|-------------------------|---------|---------|---------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                         | Ambient | Maximum | Minimum |  |                                                                                                                                                                                                                               |
| Start                   |         |         |         |  |                                                                                                                                                                                                                               |
| Stop                    |         |         |         |  |                                                                                                                                                                                                                               |

Special Instructions/QC Requirements & Comments :

Suspected Contamination:      High      Medium      Low      PID Readings: 0.0

Sampling site (State):

Quick Connector required : No

|                                       |                           |                        |                                |
|---------------------------------------|---------------------------|------------------------|--------------------------------|
| Canisters Shipped by: <u>Sam</u>      | Date/Time: <u>8/14/25</u> | Canisters Received by: | Date/Time:                     |
| Samples Relinquished by: <u>Frank</u> | Date/Time: <u>8/15/25</u> | Received by: <u>SA</u> | Date/Time: <u>8/15/25 1045</u> |
| Relinquished by:                      | Date/Time:                | Received by:           | Date/Time:                     |

**B2508016 - 1**

|                                                                                                                                                                                                                                                                  |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------|-------------------------|------------------------------------------------------|------------------------------------|----------------------------|---------------------------|------------------------------------------------------------------------------|-----------------------------------|--------------|--------------|---------------------------|----------------------------------|-------------------|-----------|--------------------|----------|------|-----------|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| Client Contact Information                                                                                                                                                                                                                                       |                |                          |                         | Bottle Order ID : <b>B2508016</b>                    |                                    |                            |                           | Courier : <b>FGALDUN</b>                                                     |                                   |              |              | 2 of 3 COCs               |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Client ID : <b>GFEL01</b>                                                                                                                                                                                                                                        |                |                          |                         | Project ID : <b>739 Nostrand Ave, Brooklyn, NY</b>   |                                    |                            |                           | Sampler Name(s) : <b>FRANK GALDUN</b>                                        |                                   |              |              | Analysis                  |                                  | Matrix            |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Customer Name : <b>GFE LLC</b><br><br>Address : <b>58 Nokomis Ave</b><br><br>City : <b>Lake Hiawatha</b><br><br>State : <b>NJ</b><br><br>Zip Code : <b>07034</b><br><br>Country :                                                                                |                |                          |                         | Project Manager : <b>FRANK GALDUN</b>                |                                    |                            |                           | <b>AIR ANALYSIS</b><br><b>CHAIN-OF-CUSTODY</b><br><br><b>Batch Certified</b> |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Phone Number : <b>646-542-3465</b>                   |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Fax Number : <b>973-334-1692</b>                     |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Site Details: <b>77-02 13TH AVE<br/>BROOKLYN, NY</b> |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Analysis Turnaround Time <b>7 DAYS</b>               |                                    |                            |                           | Data Package Type : <b>RESULTS ONLY</b>                                      |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Standard : <b>10 business days</b> OR                |                                    |                            |                           | EDD Type : <b>PDF</b>                                                        |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  |                |                          |                         | Rush (Specify): <b>5 Days</b>                        |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Sample Identification                                                                                                                                                                                                                                            | Sample Date(s) | Time Start (24 hr Clock) | Time Stop (24 hr Clock) | Can Vacuum in Field ("Hg) (Start)                    | Can Vacuum in Field ("Hg) (Stop)** | Interior Temp. (F) (Start) | Interior Temp. (F) (Stop) | Out going Can Pressure ("Hg)(Lab)                                            | In coming Can Pressure ("Hg)(Lab) | Flow Reg. ID | Can ID       |                           | Flow Controller Readout (ml/min) | Can Cert ID       | TO-15     | Indoor/Ambient Air | Soil Gas |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| <b>SVZ</b>                                                                                                                                                                                                                                                       | <b>8/14/15</b> | <b>11:00</b>             | <b>1:00</b>             | <b>28</b>                                            | <b>28</b>                          |                            |                           | <b>-30</b>                                                                   | <b>-4.3</b>                       | <b>10185</b> | <b>10300</b> | <b>6 L</b>                | <b>50</b>                        | <b>VL042828.D</b> | <b>1</b>  |                    | <b>1</b> |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Temperature (Fahrenheit)<br><table border="1"> <tr> <td></td> <td>Ambient</td> <td>Maximum</td> <td>Minimum</td> </tr> <tr> <td>Start</td> <td><b>81</b></td> <td></td> <td></td> </tr> <tr> <td>Stop</td> <td><b>83</b></td> <td></td> <td></td> </tr> </table> |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              | Ambient      | Maximum                   | Minimum                          | Start             | <b>81</b> |                    |          | Stop | <b>83</b> |  |  | GC/MS Analyst Signature (TO-15)<br><div style="border: 1px solid black; padding: 5px; display: inline-block;"><b>Sut</b></div>                                                                                 |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  | Ambient        | Maximum                  | Minimum                 |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Start                                                                                                                                                                                                                                                            | <b>81</b>      |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Stop                                                                                                                                                                                                                                                             | <b>83</b>      |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Pressure (Inches of Hg)<br><table border="1"> <tr> <td></td> <td>Ambient</td> <td>Maximum</td> <td>Minimum</td> </tr> <tr> <td>Start</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Stop</td> <td></td> <td></td> <td></td> </tr> </table>                    |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              | Ambient      | Maximum                   | Minimum                          | Start             |           |                    |          | Stop |           |  |  | ** Submittal of this COC indicates approval of the analysis based on existing conditions.<br><b>REPORT ONLY THOSE ANALYTES ON THE ATTACHED LIST</b><br>Please follow the instructions on the back of this COC. |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                  | Ambient        | Maximum                  | Minimum                 |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Start                                                                                                                                                                                                                                                            |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Stop                                                                                                                                                                                                                                                             |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Special Instructions/QC Requirements & Comments :                                                                                                                                                                                                                |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Suspected Contamination: High Medium <b>Low</b> PID Readings: <b>0.0</b>                                                                                                                                                                                         |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Sampling site (State):                                                                                                                                                                                                                                           |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Quick Connector required : <b>NO</b>                                                                                                                                                                                                                             |                |                          |                         |                                                      |                                    |                            |                           |                                                                              |                                   |              |              |                           |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Canisters Shipped by: <b>Sam</b>                                                                                                                                                                                                                                 |                |                          |                         | Date/Time: <b>8/11/15</b>                            |                                    |                            |                           | Canisters Received by:                                                       |                                   |              |              | Date/Time:                |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Samples Relinquished by: <b>Sam</b>                                                                                                                                                                                                                              |                |                          |                         | Date/Time: <b>8/15/15</b>                            |                                    |                            |                           | Received by: <b>OK</b>                                                       |                                   |              |              | Date/Time: <b>8/15/15</b> |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |
| Relinquished by:                                                                                                                                                                                                                                                 |                |                          |                         | Date/Time:                                           |                                    |                            |                           | Received by:                                                                 |                                   |              |              | Date/Time:                |                                  |                   |           |                    |          |      |           |  |  |                                                                                                                                                                                                                |  |  |  |  |  |  |  |

|                                                                                                                                                                                   |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------|-------------------------|---------------------------------------------------|------------------------------------|----------------------------|---------------------------|------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------|----------------------------------|-------------------|----------|---------------------|----------|
| Client Contact Information                                                                                                                                                        |                |                          |                         | Bottle Order ID : <b>B2508016</b>                 |                                    |                            |                           | Courier : <b>FGALDUN</b>                                                     |                                   |                                                                                                                                                                                                                |              | <u>3</u> of <u>3</u> COCs |                                  |                   |          |                     |          |
| Client ID : <b>GFEL01</b> Project ID : <b>739 Nostrand Ave, Brooklyn, NY</b>                                                                                                      |                |                          |                         | Sampler Name(s) : <b>FRANK GALDUN</b>             |                                    |                            |                           | Analysis                                                                     |                                   |                                                                                                                                                                                                                |              | Matrix                    |                                  |                   |          |                     |          |
| Customer Name : <b>GFE LLC</b><br><br>Address : <b>58 Nokomis Ave</b><br><br>City : <b>Lake Hiawatha</b><br><br>State : <b>NJ</b><br><br>Zip Code : <b>07034</b><br><br>Country : |                |                          |                         | Project Manager : <b>FRANK GALDUN</b>             |                                    |                            |                           | <b>AIR ANALYSIS</b><br><b>CHAIN-OF-CUSTODY</b><br><br><b>Batch Certified</b> |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                |                          |                         | Phone Number : <b>646-542-3465</b>                |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                |                          |                         | Fax Number : <b>973-334-1692</b>                  |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                |                          |                         | Site Details: <b>77-02 13TH AVE, BROOKLYN, NY</b> |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                |                          |                         | Analysis Turnaround Time <b>7 DAY</b>             |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Standard : <b>10 business days</b> OR                                                                                                                                             |                |                          |                         | Data Package Type : <b>RESULTS ONLY</b>           |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Rush (Specify): <b>15 Days</b>                                                                                                                                                    |                |                          |                         | EDD Type : <b>PDF</b>                             |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Sample Identification                                                                                                                                                             | Sample Date(s) | Time Start (24 hr Clock) | Time Stop (24 hr Clock) | Can Vacuum in Field ("Hg) (Start)                 | Can Vacuum in Field ("Hg) (Stop)** | Interior Temp. (F) (Start) | Interior Temp. (F) (Stop) | Out going Can Pressure ("Hg)(Lab)                                            | In coming Can Pressure ("Hg)(Lab) | Flow Reg. ID                                                                                                                                                                                                   | Can ID       |                           | Flow Controller Readout (ml/min) | Can Cert ID       | TO-15    | Indoor/ Ambient Air | Soil Gas |
| <b>IA1</b>                                                                                                                                                                        | <b>8/14/25</b> | <b>10:48</b>             | <b>12:48</b>            | <b>OVER 30</b>                                    | <b>5.5</b>                         | <b>70</b>                  | <b>70</b>                 | <b>-30</b>                                                                   | <b>-5.5</b>                       | <b>10707</b>                                                                                                                                                                                                   | <b>10607</b> | <b>6 L</b>                | <b>50</b>                        | <b>VL042828.D</b> | <b>1</b> | <b>1</b>            |          |
| Temperature (Fahrenheit)                                                                                                                                                          |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   | GC/MS Analyst Signature (TO-15) <span style="border: 1px solid black; padding: 5px; display: inline-block;"></span>                                                                                            |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                | Ambient                  | Maximum                 | Minimum                                           |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Start                                                                                                                                                                             |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Stop                                                                                                                                                                              |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Pressure (Inches of Hg)                                                                                                                                                           |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   | ** Submittal of this COC indicates approval of the analysis based on existing conditions.<br><b>REPORT ONLY THOSE ANALYTES ON THE ATTACHED LIST</b><br>Please follow the instructions on the back of this COC. |              |                           |                                  |                   |          |                     |          |
|                                                                                                                                                                                   |                | Ambient                  | Maximum                 | Minimum                                           |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Start                                                                                                                                                                             |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Stop                                                                                                                                                                              |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Special Instructions/QC Requirements & Comments :                                                                                                                                 |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Suspected Contamination: High Medium <u>Low</u> PID Readings: <u>0.0</u>                                                                                                          |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Sampling site (State):                                                                                                                                                            |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Quick Connector required : <u>NO</u>                                                                                                                                              |                |                          |                         |                                                   |                                    |                            |                           |                                                                              |                                   |                                                                                                                                                                                                                |              |                           |                                  |                   |          |                     |          |
| Canisters Shipped by: <u>Sam</u>                                                                                                                                                  |                |                          |                         | Date/Time: <u>8/14/25</u>                         |                                    |                            |                           | Canisters Received by:                                                       |                                   |                                                                                                                                                                                                                |              | Date/Time:                |                                  |                   |          |                     |          |
| Samples Relinquished by: <u>FG</u>                                                                                                                                                |                |                          |                         | Date/Time: <u>8/15/25</u>                         |                                    |                            |                           | Received by: <u>SA</u>                                                       |                                   |                                                                                                                                                                                                                |              | Date/Time: <u>8/15/25</u> |                                  |                   |          |                     |          |
| Relinquished by:                                                                                                                                                                  |                |                          |                         | Date/Time:                                        |                                    |                            |                           | Received by:                                                                 |                                   |                                                                                                                                                                                                                |              | Date/Time:                |                                  |                   |          |                     |          |

PCE

TCE

cis-1,2-DCE

1,1-DCE

1,1,1-TCA

vinyl chloride

benzene

ethylbenzene

1,4-dichlorobenzene

cyclohexane

2,2,4-trimethylpentane

1,2,4-trimethylbenzene

1,3,5-trimethylbenzene

o-xylene

m,p-xylene

heptane

hexane

toluene