

<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM</b> WASTE MANAGEMENT 227, 427	1150718
1. Generator's Mailing Address & Phone Bonanza Creek SWM Sec 9 T4N R63W Kersey, CO 720 279-2330 <i>Boonville, MO</i>		Generator's Project Address	
		2. Bill to: CASH 2a. Account # COD	
		3. Transporter: Company Name	
2 water for park 34-114		3a. Transporter's Phone	
23691 Hwy 263 <i>Boonville, MO 64603</i>		4. Transporter: Company Name	
Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HHS "Hydrocarbon Impacted Soil"		
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ - _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name <i>Jeremy Kyte</i>		Signature (Full Name) <i>Jeremy Kyte</i>	
9. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year <i>6 4 11</i>	
Printed/Typed Full Name <i>Mack Padilla</i>		Signature (Full Name) <i>Mack Padilla</i>	
10. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year . . .	
Printed/Typed Full Name		Signature (Full Name)	
11. Discrepancy indication Space		12. Ticket # <i>844009</i>	
Initials of Person noting discrepancy _____ Date _____			
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds			
Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name <i>JACK EPPLE</i>		Signature (Full Name) <i>Jack Epple</i>	
		Month Day Year <i>6 11</i>	

GENERATOR

TRANSPORTER

FACTORY

<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM</b> WASTE MANAGEMENT	227, 427	1150719
1. Generator's Mailing Address & Phone Bonanza Creek SMHD Sec 9 T4H R63W Kersey, CO 720 279-2330		Generator's Project Address <i>Wetco Tunnel Park</i>		2. Bill to: ART GATSON 2a. Account # COD
3. Transporter: Company Name <i>BUSHER oil services</i>		3a. Transporter's Phone		4. Transporter: Company Name
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218		
6. Waste Code/Profile #	Waste Description	Quantity	Units	
100408C0	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"		15	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)				
Waste Code/Profile #	Waste Description	Quantity	Units or Drums	
	Non-Friable Asbestos			
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ _ - _ _ _ _		
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.				
8a. Contractor/Generator				
Printed/Typed Full Name <i>Mark Springer</i>		Signature (Full Name) <i>Mark Springer</i>		Month Day Year <i>16 9 11</i>
9. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Full Name <i>John Albert</i>		Signature (Full Name) <i>John Albert</i>		Month Day Year . . .
10. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Full Name		Signature (Full Name)		Month Day Year . . .
11. Discrepancy indication Space			12. Ticket #	
Initials of Person noting discrepancy _____ Date _____			844029	
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds				
Grid Location (if applicable): _____				
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.				
Printed/Typed Full Name <i>Sonyy Haddad</i>		Signature (Full Name) <i>Sonyy Haddad</i>		Month Day Year <i>06 10 11</i>

GENERATOR

TRANSPORTER

FACILITY

**NON-HAZARDOUS  
WASTE MANIFEST**



1150720

1. Generator's Mailing Address & Phone Bonanza Creek SWM Sec 9 T4N R63WKersey, CO <i>Bushes Hill</i> 720 279-2330		Generator's Project Address		2. Bill to: CASH	
		3. Transporter: Company Name		2a. Account # COD	
		<i>Water from Park 34-4 H</i>		3a. Transporter's Phone	
		4. Transporter: Company Name		4a. Transporter's Phone	
		<i>23691 Hwy 263 Greeley, CO 80631 970-378-8700</i>			
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643				5a. Facility's Phone (303) 732-0218	

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246	<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ - _ _
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8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator			
Printed/Typed Full Name <i>Mark Springer</i>	Signature (Full Name) <i>Mark Springer</i>	Month <i>6</i>	Day Year <i>4 11</i>
9. Transporter 1 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name <i>Mark P. ...</i>	Signature (Full Name) <i>Mark P. ...</i>	Month <i>6</i>	Day Year <i>4 11</i>
10. Transporter 2 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name	Signature (Full Name)	Month	Day Year

11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____	12. Ticket # <i>844038</i>
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13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds  
Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name <i>Sonja Helder</i>	Signature (Full Name) <i>Sonja Helder</i>	Month Day Year <i>06 06 11</i>
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GENERATOR TRANSPORTER FACILITY

Please print or type  
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1150721

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek SWND Sec 9 T4N R63W Kersey, CO 720 279-2330		2. Bill to: CASH 2a. Account # COD	
3. Transporter: Company Name		3a. Transporter's Phone	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
10040800	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
Bonanza Creek 34-4			
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator		Signature (Full Name)	
Mark Springer Printed/Typed Full Name		[Signature] Signature (Full Name)	
		Month Day Year 6 8 11	
9. Transporter 1 Acknowledgement of Receipt of Materials		Signature (Full Name)	
Andres Solo Printed/Typed Full Name		[Signature] Signature (Full Name)	
		Month Day Year 6 10 11	
10. Transporter 2 Acknowledgement of Receipt of Materials		Signature (Full Name)	
		Month Day Year . . .	
11. Discrepancy indication Space			12. Ticket #
Initials of Person noting discrepancy _____ Date _____			841030
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds			
Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name		Signature (Full Name)	
Sonya Haldock		[Signature] Signature (Full Name)	
		Month Day Year 10 6 11	

GENERATOR TRANSPORTER FACILITY

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1150739

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek Wetoo Farm Park 34-4 S4444 Sec 9 T4N R63M Kersey, CO 720 279-2330		2. Bill to: CASH 2a. Account # COD	
Gusher Oilfield Services 23691 Hwy 263 Greeley Co, 80631		3. Transporter: Company Name 3a. Transporter's Phone 970-378-8888	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
10040800	Non Regulated Solid H1S "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator		Month Day Year	
Printed/Typed Full Name Mark Springer		Signature (Full Name) <i>Mark Springer</i>	
9. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year	
Printed/Typed Full Name Patricia Pearson		Signature (Full Name) # 102 <i>Patricia Pearson</i>	
10. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year	
Printed/Typed Full Name		Signature (Full Name)	
11. Discrepancy indication Space		12. Ticket #	
Initials of Person noting discrepancy _____ Date _____		8411033	
13. Management Method/Location		14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.	
<input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds			
Grid Location (if applicable): _____			
Printed/Typed Full Name Sonya Haddock		Signature (Full Name) <i>Sonya Haddock</i>	
		Month Day Year 01/01/11	

GENERATOR TRANSPORTER FACILITY

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<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM WASTE MANAGEMENT</b> 827, 427		1143419	
1. Generator's Mailing Address & Phone Bonanza Creek S14W Sec 9 T4N R63W Kersey, CO 720 879 2330 <i>Auster Oil Services</i>		Generator's Project Address <i>34-4</i>		2. Bill to: 2a. Account # <i>CASH COD</i>	
		3. Transporter: Company Name		3a. Transporter's Phone	
		4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643				5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units		
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	18			
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)					
Waste Code/Profile #	Waste Description	Quantity	Units or Drums		
	Non-Friable Asbestos				
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246			<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _		
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.					
8a. Contractor/Generator					
Printed/Typed Full Name <i>Jeremy Kute</i>		Signature (Full Name) <i>Jeremy Kute</i>		Month Day Year 6   3   11	
9. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Full Name <i>JOHN ARBERT</i>		Signature (Full Name) <i>John Albert</i>	
				Month Day Year 5   5   11	
10. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Full Name		Signature (Full Name)	
				Month Day Year .   .   .	
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____				12. Ticket # 843938	
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____					
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.					
Printed/Typed Full Name <i>Sony Hedder</i>		Signature (Full Name) <i>Sony Hedder</i>		Month Day Year .   .   .	

GENERATOR  
TRANSPORTER  
FACILITY

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Please print or type  
(Form designed for use on elite (12-pitch typewriter.)

<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM</b> WASTE MANAGEMENT 227, 427	1143420
1. Generator's Mailing Address & Phone Bonanza Creek SWNW Sec 9 T4N R63W Kersey, CO 720 279-2330		Generator's Project Address AKT	
2. Bill to: CASH		2a. Account # COD	
3. Transporter: Company Name MUSHER OIL SERVICES		3a. Transporter's Phone	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"		15
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b>  ( _ _ _ ) _ _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Don Spinger		Signature (Full Name) <i>Mark Don Spinger</i>	
		Month Day Year 6 4 11	
9. Transporter 1 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name JOHN ALBERT		Signature (Full Name) <i>John Albert</i>	
		Month Day Year 6 4 11	
10. Transporter 2 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name		Signature (Full Name)	
		Month Day Year . . .	
11. Discrepancy indication Space  Initials of Person noting discrepancy _____ Date _____			12. Ticket #
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds  Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name		Signature (Full Name)	
		Month Day Year . . .	

GENERATOR

TRANSPORTER

FACILITY

CONTRACTOR'S COPY



1143421

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek <i>WETCO FARMS PARK</i> SNM Sec 9 T4H R63W Kersey, CO 720 279-2330		2. Bill to: 2a. Account # <i>CASH</i> <i>34-4</i> <i>COD</i>	
3. Transporter: Company Name <i>Gusher Oilfield Services</i> <i>23691 Hwy 263 Greeley Co,</i>		3a. Transporter's Phone <i>80631</i> <i>970-378-8888</i>	
4. Transporter: Company Name		4a. Transporter's Phone	

5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone <i>(303) 732-0218</i>	
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6. Waste Code/Profile #	Waste Description	Quantity	Units
<i>100408C0</i>	<i>Non Regulated Solid HIS</i> <i>"Hydrocarbon Impacted Soil"</i>		

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	<i>Non-Friable Asbestos</i>		

7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246	<b>24 HOUR EMERGENCY PHONE NUMBER</b> <i>( _ _ _ ) _ _ _ - _ _ _ _</i>
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8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator <i>Mark Don</i> Printed/Typed Full Name	<i>[Signature]</i> Signature (Full Name)	<i>6 4 11</i> Month Day Year
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9. Transporter 1 Acknowledgement of Receipt of Materials <i>Patricia Pearson</i> Printed/Typed Full Name	<i>Patricia Pearson #102</i> Signature (Full Name)	<i>6 4 11</i> Month Day Year
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10. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Full Name	Signature (Full Name)	<i>8 4 2011</i> Month Day Year
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11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____	12. Ticket # <i>0411</i>
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13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds
Grid Location (if applicable): _____

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11. <i>Tack Epplo</i> Printed/Typed Full Name	<i>[Signature]</i> Signature (Full Name)	<i>6 4 11</i> Month Day Year
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**NON-HAZARDOUS  
WASTE MANIFEST**



1143422

1. Generator's Mailing Address & Phone Bonanza Creek SNNW Sec 9 T4N R63WKersey, CO 720 279-2330		Generator's Project Address <i>Brush oil</i>		2. Bill to: CASH
		3. Transporter: Company Name <i>23691 Hwy 263 Brushy Cole 80671 970-378-8888</i>		2a. Account # COD
		4. Transporter: Company Name		3a. Transporter's Phone
		5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		4a. Transporter's Phone
				5a. Facility's Phone (303) 732-0218

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"		

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246	<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _
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8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator				
Printed/Typed Full Name <i>Mark Dan Springer</i>	Signature (Full Name) <i>Mark Dan Springer</i>	Month <i>6</i>	Day <i>4</i>	Year <i>11</i>
9. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Full Name <i>Miss Ruth</i>	Signature (Full Name) <i>Miss Ruth</i>	Month <i>6</i>	Day <i>4</i>	Year <i>11</i>
10. Transporter 2 Acknowledgement of Receipt of Materials				
Printed/Typed Full Name	Signature (Full Name)	Month	Day	Year

11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____	12. Ticket # <i>843908</i>
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13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds  
Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name <i>TANK EOPLE</i>	Signature (Full Name) <i>Tank Eople</i>	Month <i>6</i>	Day <i>4</i>	Year <i>11</i>
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GENERATOR TRANSPORTER FACILITY

Please print or type  
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1143423

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek SWNW Sec 9 T4N R63W Kersey, CO 720 279-2330		2. Bill to: 2a. Account # CASH COD	
WATCO Farms Park 34-4		3. Transporter: Company Name 3a. Transporter's Phone	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408C0	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Dan Springer		Signature (Full Name) <i>Mark Dan Springer</i>	Month Day Year 6   4   11
9. Transporter 1 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name James Andy Collins		Signature (Full Name) <i>James Andy Collins</i>	Month Day Year 6   4   11
10. Transporter 2 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name		Signature (Full Name)	Month Day Year .   .   .
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____			12. Ticket # 843997
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name Jack Epule		Signature (Full Name) <i>Jack Epule</i>	Month Day Year 6   .   .

GENERATOR

TRANSPORTER

FACILITY

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1143424

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek SWNW Sec 9 T4N R63WKersey, CO 720 279-2330		2. Bill to: CASH 2a. Account # COD	
3. Transporter: Company Name		3a. Transporter's Phone	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keesenburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"		
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ _ - _ _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Dan Springer		Signature (Full Name) <i>Mark Dan Springer</i>	
Month Day Year 16 4 11			
9. Transporter 1 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name Andres Solo		Signature (Full Name) <i>Andres Solo</i>	
Month Day Year 16 4 11			
10. Transporter 2 Acknowledgement of Receipt of Materials			
Printed/Typed Full Name		Signature (Full Name)	
Month Day Year			
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____			12. Ticket # 843990
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name Jack Epple		Signature (Full Name) <i>Jack Epple</i>	
Month Day Year 6 7 11			

GENERATOR

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**NON-HAZARDOUS  
WASTE MANIFEST**



227, 427

1143425

GENERATOR

1. Generator's Mailing Address & Phone

Bonanza Creek  
5WNW Sec 9 T4N R63W Kersey, CO  
720 279-2330

Generator's Project Address

2. Bill to:

2a. Account # CASH  
COD

3. Transporter: Company Name

3a. Transporter's Phone

Watco Farm Park 34-4

4. Transporter: Company Name

4a. Transporter's Phone

5. Designated Management Facility Name and Site Address

Buffalo Ridge Landfill  
11655 WCR 59  
Keenesburg, CO 80643

5a. Facility's Phone

(303) 732-0218

6. Waste Code/Profile #

Waste Description

Quantity

Units

100408CO

Non Regulated Solid HHS  
"Hydrocarbon Impacted Soil"

10

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #

Waste Description

Quantity

Units or Drums

Non-Friable Asbestos

7. Regulatory Agency:

Colorado Department of Public Health and Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246

**24 HOUR EMERGENCY PHONE NUMBER**

( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_

8. Contractor/Generator Certification:

I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

9a. Contractor/Generator

Mark D. Springer  
Printed/Typed Full Name

Mark D. Springer  
Signature (Full Name)

Month Day Year  
6 4 11

9. Transporter 1 Acknowledgement of Receipt of Materials

James A. Collins  
Printed/Typed Full Name

James A. Collins  
Signature (Full Name)

Month Day Year  
6 4 11

10. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Full Name

Signature (Full Name)

Month Day Year

11. Discrepancy indication Space

Initials of Person noting discrepancy \_\_\_\_\_ Date \_\_\_\_\_

12. Ticket #  
844015

13. Management Method/Location

Solidification

Monofill

Landfill

Bio-Beds

Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name

TACK Eppe

Signature (Full Name)

TACK Eppe

Month Day Year  
6 4 11

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TRANSPORTER FACILITY



1143427

<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM WASTE MANAGEMENT</b>		227, 427	
1. Generator's Mailing Address & Phone Bonanza Creek SMNW Sec 9 T4N R63WKersey, CO 720 279-2330			Generator's Project Address		
			2. Bill to: 2a. Account # CASH COD		
			3. Transporter: Company Name 3a. Transporter's Phone		
			4. Transporter: Company Name 4a. Transporter's Phone		
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643			5a. Facility's Phone (303) 732-0218		
6. Waste Code/Profile #	Waste Description	Quantity	Units		
10040800	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"				
Bonanza Creek 34 4					
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)					
Waste Code/Profile #	Waste Description	Quantity	Units or Drums		
	Non-Friable Asbestos				
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246			<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _		
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.					
8a. Contractor/Generator					
Printed/Typed Full Name Jeremy Kyte		Signature (Full Name) <i>Jeremy Kyte</i>		Month Day Year 6 4 11	
9. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Full Name Andres Solo		Signature (Full Name) <i>Andres Solo</i>		Month Day Year 6 4 11	
10. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Full Name		Signature (Full Name)		Month Day Year	
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____			12. Ticket # 844011		
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____					
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.					
Printed/Typed Full Name Jack Eppe		Signature (Full Name) <i>Jack Eppe</i>		Month Day Year 6 4 11	

GENERATOR  
TRANSPORTER  
FACILITY

TRANSPORTER COPY

<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM</b> WASTE MANAGEMENT 227, 427	1143428
1. Generator's Mailing Address & Phone Bonanza Creek Weteo Farms Park SWNW Sec 9 T4N R63WKersey, CO 720 279-2330		Generator's Project Address 34-4	
		2. Bill to: 2a. Account # CASH COD	
3. Transporter: Company Name Gusher Oilfield Services 23691 Hwy 263 Greeley Co. 8063		3a. Transporter's Phone 970-378-8888	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408C0	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ _ - _ _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Springer		Signature (Full Name) <i>[Signature]</i>	Month Day Year 6   4   11
9. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Full Name Patricia Pearson		Signature (Full Name) <i>[Signature]</i>	Month Day Year 6   4   11
10. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Full Name		Signature (Full Name)	Month Day Year
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____		12. Ticket # 844001	
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name JACK EPPE		Signature (Full Name) <i>[Signature]</i>	Month Day Year 6   4   11

GENERATOR

TRANSPORTER

FACILITY

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<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM WASTE MANAGEMENT</b> 227, 427		1143429	
1. Generator's Mailing Address & Phone Bonanza Creek SUNW Sec 9 T4N R63W Kersey, CO 720 279-2330		Generator's Project Address Wetco FARMS 34-4		2. Bill to: ART MATHERSON 2a. Account # CASH COD	
3. Transporter: Company Name MUSHER oil services		3a. Transporter's Phone		4. Transporter: Company Name	
4. Transporter: Company Name		4a. Transporter's Phone		5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643	
5a. Facility's Phone (303) 732-0218		6. Waste Code/Profile # 100408CO		Waste Description Non Regulated Solid HHS "Hydrocarbon impacted Soil"	
Quantity		Units 15			
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)					
Waste Code/Profile #		Waste Description		Quantity	
		Non-Friable Asbestos		Units or Drums	
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246			<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _		
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.					
8a. Contractor/Generator					
Printed/Typed Full Name Mark D. Springer		Signature (Full Name) [Signature]		Month Day Year 6 4 11	
9. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Full Name JOHN ALBERT		Signature (Full Name) [Signature]		Month Day Year 6 4 11	
10. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Full Name		Signature (Full Name)		Month Day Year	
11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____				12. Ticket # 8440055	
13. Management Method/Location <input type="checkbox"/> Solidification <input checked="" type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____					
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.					
Printed/Typed Full Name JACK EPPLE		Signature (Full Name) [Signature]		Month/Day/Year 6 4 11	

GENERATOR

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FACILITY

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**NON-HAZARDOUS  
WASTE MANIFEST**



227,427

1143431

1. Generator's Mailing Address & Phone Bonanza Creek SUNW Sec 9 T4N R63W Kersey, CO 720 279-2330		Generator's Project Address	
2. Bill to: 2a. Account # CASH COD		3. Transporter: Company Name	
3a. Transporter's Phone		4. Transporter: Company Name	
4a. Transporter's Phone		5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643	
5a. Facility's Phone (303) 732-0218			

Bonanza Creek <sup>Farms</sup> Watoo Park 34.4

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246	<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _
--	--

8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator		Printed/Typed Full Name		Signature (Full Name)		Month Day Year	
9. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Full Name		Signature (Full Name)		Month Day Year	
10. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Full Name		Signature (Full Name)		Month Day Year	

Mark Dan Springer  
Signature: [Signature]  
Month: 6 Day: 4 Year: 11

Roy Hensley  
Signature: [Signature]  
Month: 6 Day: 4 Year: 11

11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____	12. Ticket # 843973
--	------------------------

13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds  
Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name Jack Pope	Signature (Full Name) [Signature]	Month Day Year 6.4.11
--------------------------------------	--------------------------------------	--------------------------

GENERATOR  
TRANSPORTER  
FACILITY

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**NON-HAZARDOUS  
WASTE MANIFEST**



227,427

1143432

1. Generator's Mailing Address & Phone

Bonanza Creek  
SWNW Sec 9 T4N R63W Kersey, CO  
720 279-2330

Generator's Project Address

Netco Farm 34-4

2. Bill to:

2a. Account # CASH (Art Guttorson)  
COD

3. Transporter: Company Name

Gusher Oil Services

3a. Transporter's Phone

4. Transporter: Company Name

4a. Transporter's Phone

5. Designated Management Facility Name and Site Address

Buffalo Ridge Landfill  
11655 WCR 59  
Keenesburg, CO 80643

5a. Facility's Phone

(303) 732-0218

6. Waste Code/Profile #

Waste Description

Quantity

Units

100408CO

Non Regulated Solid HIS  
"Hydrocarbon Impacted Soil"

18

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #

Waste Description

Quantity

Units or Drums

Non-Friable Asbestos

7. Regulatory Agency:

Colorado Department of Public Health and Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246

**24 HOUR EMERGENCY PHONE NUMBER**

( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_

8. Contractor/Generator Certification:

I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator

Printed/Typed Full Name

Signature (Full Name)

Month Day Year

Mark Dan Spritzer

[Signature]

10 3 11

9. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Full Name

Signature (Full Name)

Month Day Year

[Signature]

. . .

10. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Full Name

Signature (Full Name)

Month Day Year

Hugo Cortes

[Signature]

10 6 31 11

11. Discrepancy indication Space

Initials of Person noting discrepancy \_\_\_\_\_ Date \_\_\_\_\_

12. Ticket #

8113964

13. Management Method/Location

Solidification

Monofill

Landfill

Bio-Beds

Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name

Signature (Full Name)

Month Day Year

Sonja Haldick

[Signature]

10 10 11

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GENERATOR

TRANSPORTER

FACILITY

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**NON-HAZARDOUS  
WASTE MANIFEST**



1143433

1. Generator's Mailing Address & Phone Bonanza Creek S444 Sec 9 T4N R63W Kersey, CO 720 279-2330		Generator's Project Address	
2. Bill to: 2a. Account # CASH COD		3a. Transporter's Phone	
3. Transporter: Company Name Waste Pros 3404		4. Transporter: Company Name 23691 Hwy 263 Brush CO 80631	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark D. Springer		Signature (Full Name) [Signature]	
9. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year 11 13 11	
Printed/Typed Full Name Mark D. Springer		Signature (Full Name) [Signature]	
10. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year 10 13 11	
Printed/Typed Full Name		Signature (Full Name)	
11. Discrepancy indication Space		12. Ticket # 843963	
Initials of Person noting discrepancy _____ Date _____			
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name Sonya Haddock		Signature (Full Name) [Signature] Month Day Year 10 16 11	

GENERATOR TRANSPORTER FACILITY

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<b>NON-HAZARDOUS WASTE MANIFEST</b>		<b>WM</b> WASTE MANAGEMENT 227.427	1143434
1. Generator's Mailing Address & Phone Bonanza Creek SWMW Sec 9 T4N R63WKersey, CO 720 279-2330		Generator's Project Address Welco Farms Park 34-4	
2. Bill to: 2a. Account # CASH COD		3a. Transporter's Phone 970-378-8888	
3. Transporter: Company Name Gushon Oilfield Services 23691 Hwy 263 Greeley Co. 80631		4. Transporter: Company Name	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408C0	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Don Springer		Signature (Full Name) [Signature]	
9. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year 6 3 11	
Printed/Typed Full Name Patricia Pearson		Signature (Full Name) Patricia Pearson #102	
10. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year 6 3 11	
Printed/Typed Full Name		Signature (Full Name)	
11. Discrepancy indication Space		12. Ticket # 843965	
Initials of Person noting discrepancy _____ Date _____			
13. Management Method/Location		14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.	
<input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds			
Grid Location (if applicable): _____			
Printed/Typed Full Name Soyvatt Addad		Signature (Full Name) [Signature]	
		Month Day Year 10 03 11	

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1143435

<b>NON-HAZARDOUS WASTE MANIFEST</b>		Generator's Project Address	
1. Generator's Mailing Address & Phone Bonanza Creek SWMW Sec 9 T4N R63W Kersey, CO 720 279-2330		2. Bill to: Andy Guttererson 2a. Account # CASH COD	
3. Transporter: Company Name		3a. Transporter's Phone	
4. Transporter: Company Name Bonanza Creek Water Park 34-4		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	
6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CD	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	
<b>NON-FRIABLE ASBESTOS WASTE ONLY</b> (Friable may not be shipped on this manifest)			
Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		
7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( _ _ _ ) _ _ - _ _ _	
8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.			
8a. Contractor/Generator			
Printed/Typed Full Name Mark Dan Springer		Signature (Full Name) Mark D Springer	
9. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year 6   3   11	
Printed/Typed Full Name Ray Hestley		Signature (Full Name) Ray Hestley	
10. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year 6   3   11	
Printed/Typed Full Name Ray Hestley		Signature (Full Name) Ray Hestley	
11. Discrepancy indication Space		12. Ticket # 843959	
Initials of Person noting discrepancy _____ Date _____			
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds			
Grid Location (if applicable): _____			
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.			
Printed/Typed Full Name Sonya Haddock		Signature (Full Name) Sonya Haddock	
		Month Day Year 10   6   11	

GENERATOR

TRANSPORTER

FACILITY

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**NON-HAZARDOUS  
WASTE MANIFEST**



227, 427

1143436

GENERATOR	1. Generator's Mailing Address & Phone Bonanza Creek SWNW Sec 9 T4N R63WKersey, CO 720 279-2330		Generator's Project Address Netco Farms 3-4		2. Bill to: CASH 2a. Account # COD	
	3. Transporter: Company Name Gusler Oil Services		3a. Transporter's Phone		4. Transporter: Company Name	
	4. Transporter: Company Name		4a. Transporter's Phone		5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643	
	5. Designated Management Facility Name and Site Address		5a. Facility's Phone (303) 732-0218		6. Waste Code/Profile # 100408CD	
	6. Waste Code/Profile #		Waste Description Non Regulated Solid HIS "Hydrocarbon Impacted Soil"		Quantity 18	
TRANSPORTER	NON-FRIABLE ASBESTOS WASTE ONLY (Friable may not be shipped on this manifest)					
	Waste Code/Profile #		Waste Description Non-Friable Asbestos		Quantity	
	Waste Description		Quantity		Units or Drums	
	7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246		24 HOUR EMERGENCY PHONE NUMBER ( _ _ _ ) _ _ - _ _			
	8. Contractor/Generator Certification: I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.					
FACTORY	8a. Contractor/Generator Mark Dan Springer		Signature (Full Name)		Month Day Year	
	9. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Full Name JOHN ALBERT		Signature (Full Name)		Month Day Year 1 3 11	
	10. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Full Name		Signature (Full Name)		Month Day Year	
	11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____				12. Ticket # 843961	
	13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____					
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11. Printed/Typed Full Name Sonya Heddock						
		Signature (Full Name)		Month Day Year 06 03 11		

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**NON-HAZARDOUS  
WASTE MANIFEST**



227,487

1143437

GENERATOR

1. Generator's Mailing Address & Phone Bonanza Creek SUNW Sec 9 T4N R63WKersey, CO 720 279-2330		Generator's Project Address Gusher Oil	
3. Transporter: Company Name WATKO Farm 34-4 308-8884		2. Bill to: 2a. Account # CASH COD	
4. Transporter: Company Name 239691 Hwy 263 Greeley Colo 80631		3a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		4a. Transporter's Phone	
		5a. Facility's Phone (303) 732-0218	

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CD	Hon Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency: Colorado Department of Public Health and Environment 4300 Cherry Creek Drive South Denver, CO 80246	<b>24 HOUR EMERGENCY PHONE NUMBER</b> ( --- ) - - - - -
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8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

TRANSPORTER

8a. Contractor/Generator	Printed/Typed Full Name Jeremy Kyte	Signature (Full Name) <i>Jeremy Kyte</i>	Month Day Year 6 3 11
9. Transporter 1 Acknowledgement of Receipt of Materials	Printed/Typed Full Name Mack Padilla	Signature (Full Name) <i>Mack Padilla</i>	Month Day Year 6 3 11
10. Transporter 2 Acknowledgement of Receipt of Materials	Printed/Typed Full Name	Signature (Full Name)	Month Day Year

FACILITY

11. Discrepancy indication Space Initials of Person noting discrepancy _____ Date _____	12. Ticket # 843946
13. Management Method/Location <input type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input checked="" type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable): _____	
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11. Printed/Typed Full Name: Sonya Hadlock Signature (Full Name): <i>Sonya Hadlock</i> Month Day Year: 10 6 10 3 11	

**TRANSPORTER COPY**

**NON-HAZARDOUS  
WASTE MANIFEST**



1143438

1. Generator's Mailing Address & Phone  
 Bonanza Creek  
 SWNW Sec 9 T4N R63W Kersey, CO  
 720 279-2330

Generator's Project Address

2. Bill to:  
 2a. Account # CASH  
 COD

3. Transporter: Company Name  
 Bonanza Creek Water Farms Park 34-3

3a. Transporter's Phone

4. Transporter: Company Name

4a. Transporter's Phone

5. Designated Management Facility Name and Site Address  
 Buffalo Ridge Landfill  
 11655 WCR 59  
 Keenesburg, CO 80643 Water Farms Park 34-4

5a. Facility's Phone  
 (303) 732-0218

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CD	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency:  
 Colorado Department of Public Health and Environment  
 4300 Cherry Creek Drive South  
 Denver, CO 80246

**24 HOUR EMERGENCY PHONE NUMBER**

( \_ \_ \_ ) \_ \_ - \_ \_ \_

8. Contractor/Generator Certification:  
 I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

Ba. Contractor/Generator  
 Printed/Typed Full Name: Jeremy Kyle  
 Signature (Full Name): *Jeremy Kyle*  
 Month Day Year: 6 | 3 | 11

9. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Full Name: Roy Hensley  
 Signature (Full Name): *Roy Hensley*  
 Month Day Year: 6 | 3 | 11

10. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Full Name: \_\_\_\_\_  
 Signature (Full Name): \_\_\_\_\_  
 Month Day Year: . | . | .

11. Discrepancy indication Space

Initials of Person noting discrepancy \_\_\_\_\_ Date \_\_\_\_\_

12. Ticket #

843937

13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds

Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name: Sonvatheddore  
 Signature (Full Name): *Sonvatheddore*  
 Month Day Year: 06 | 03 | 11

**NON-HAZARDOUS  
WASTE MANIFEST**



PP7, AP7

1143439

1. Generator's Mailing Address & Phone Bonanza Creek SNNW Sec 9 T4N R63M Kersey, CO 720 274-2330		Generator's Project Address Wetco Farms Park 34-4	
2. Bill to:		2a. Account # CASH COD	
3. Transporter: Company Name Gusher Oilfield Services 23691 Hwy 263 Greeley Co. 80631		3a. Transporter's Phone 970-378-8888	
4. Transporter: Company Name		4a. Transporter's Phone	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keenesburg, CO 80643		5a. Facility's Phone (303) 732-0218	

5. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	10	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency:  
Colorado Department of Public Health and Environment  
4300 Cherry Creek Drive South  
Denver, CO 80246

**24 HOUR EMERGENCY PHONE NUMBER**

( \_ \_ \_ ) \_ \_ - \_ \_ - \_ \_

8. Contractor/Generator Certification:  
I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator

Printed/Typed Full Name Jeremy Kyte	Signature (Full Name) Jeremy Kyte	Month Day Year 6
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9. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Full Name Patricia Pearson	Signature (Full Name) Patricia Pearson #102	Month Day Year 6 3 11
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10. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Full Name	Signature (Full Name)	Month Day Year
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11. Discrepancy indication Space

Initials of Person noting discrepancy \_\_\_\_\_ Date \_\_\_\_\_

12. Ticket #

843939

13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds

Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.

Printed/Typed Full Name Sonya Haddock	Signature (Full Name) Sonya Haddock	Month Day Year 10 13 11
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**TRANSPORTER COPY**

**NON-HAZARDOUS  
 WASTE MANIFEST**



1143440

1. Generator's Mailing Address & Phone  
 Bonanza Creek  
 SWNW Sec 9 T4N R63W Kersey, CO  
 720 279-2330

Generator's Project Address

Wetco Farm 2324  
 2. Bill to:  
 CASH 34-4  
 COD (Art Gutterman)

Gushe Oil Services

3. Transporter: Company Name

3a. Transporter's Phone

4. Transporter: Company Name

4a. Transporter's Phone

Buffalo Ridge Landfill  
 11655 WCR 59  
 Keenesburg, CO 80643

5. Designated Management Facility Name and Site Address

5a. Facility's Phone

(303) 732-0218

6. Waste Code/Profile #	Waste Description	Quantity	Units
100408CO	Non Regulated Solid HIS "Hydrocarbon Impacted Soil"	18	

**NON-FRIABLE ASBESTOS WASTE ONLY** (Friable may not be shipped on this manifest)

Waste Code/Profile #	Waste Description	Quantity	Units or Drums
	Non-Friable Asbestos		

7. Regulatory Agency:  
 Colorado Department of Public Health and Environment  
 4300 Cherry Creek Drive South  
 Denver, CO 80246

**24 HOUR EMERGENCY PHONE NUMBER**

( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_

8. Contractor/Generator Certification:  
 I hereby certify that the above described waste is not hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.

8a. Contractor/Generator *Jeremy Kite*  
 Printed/Typed Full Name Signature (Full Name) Month Day Year  
*Jeremy Kite* 6 3 11

9. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Full Name Signature (Full Name) Month Day Year  
 . . .

10. Transporter 2 Acknowledgement of Receipt of Materials  
 Printed/Typed Full Name Signature (Full Name) Month Day Year  
*Hugo Cortes* 6 3 11

11. Discrepancy Indication Space  
 Initials of Person noting discrepancy \_\_\_\_\_ Date \_\_\_\_\_

12. Ticket #

13. Management Method/Location  Solidification  Monofill  Landfill  Bio-Beds  
 Grid Location (if applicable): \_\_\_\_\_

14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 11.  
 Printed/Typed Full Name Signature (Full Name) Month Day Year  
 . . .

GENERATOR TRANSPORTER FACILITY