

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number
N / A

2. Page 1 of
1

3. Emergency Response Phone
800-424-9300

4. Waste Tracking Number
235175

5. Generator's Name and Mailing Address
**WHITING OIL & GAS CORP
3115 E MULBERRY ST UNIT B
FT COLLINS CO 80524**

Generator's Project Address (if different than mailing address)
**WHITING OIL & GAS CORP
WELL # RAZOR
AFE # 30K**

Generator's Phone: **(970) 493-2900**

6. Transporter 1: Complete Company Name and Address

Transporter Phone

7. Transporter 2: Complete Company Name and Address

Transporter Phone

8. Designated Disposal Facility Name and Site Address
**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610**

Facility's Phone:

(970) 686-2800

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. **NON REGULATED SOLID
(E&P SOLIDS - SOILS, SANDS)**

115761CO

11.59

2.

13. Regulatory Agency: **Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530**

**Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number**

14. Bill to & Account Number:

Customer Acct #: N 10400 Customer Name: WHITING OIL AND GAS

15. Contractor/Generator Certification:

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/ placarded, and are in all respects in proper condition for transportation according to applicable national and state governmental regulations.

I hereby certify that the above described waste is not a hazardous waste defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials.

Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year

Guadalupe Espinoza

[Signature]

16. Transporter Acknowledgement of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

Felix Maldonado

Felix M

01 24 17

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1585831

Initials of Person noting discrepancy

Signature

Date

20. Management Method/Location

Landfill Monofill Location:

21. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 18

Printed/Typed Name

Signature

Month Day Year

[Signature]

01 24 17

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

Juan Espinoza

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

N/A

2. Page 1 of 1

3. Emergency Response Phone

800-424-9300

4. Waste Tracking Number

235176

5. Generator Name and Mailing Address

WHITING OIL & GAS CORP
3115 E MULBERRY ST UNIT B
FT COLLINS CO 80524

(970) 493-2900

Generator's Project Address (if different than mailing address)

WHITING OIL & GAS CORP
WELL # RAZOR
AFE # 30K

Generator's Phone:

6. Transporter 1: Complete Company Name and Address

Transporter Phone

7. Transporter 2: Complete Company Name and Address

Transporter Phone

8. Designated Disposal Site Name and Address

NOPTI WELD SANDFILL
4000 WELD COUNTY ROAD 25
AULT CO 80610

(970) 686-2800

Facility's Phone:

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON REGULATED SOLID
(E&P SOLIDS - SOILS, SANDS)

115761CO

10.45 T

2.

13. Regulatory Agency: Colorado Department of Public Health and Environment

4300 Cherry Creek Drive South
Denver, Co 80222-1530

Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10400 Customer Name: WHITING OIL AND GAS

15. Contractor/Generator Certification:

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I hereby certify that the above described waste is not a hazardous waste defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials.

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

Guadalupe Espinoza

16. Transporter Acknowledgement of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

FERRIS OF COLORADO

1 25 17

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Special Handling Instructions

18. Discrepancy Indication Space:

18 TICKETS
1506030

Initials of Person noting discrepancy

Signature

Date

20. Management Method/Location

Landfill Monofill Location:

21. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 18

Printed/Typed Name

Signature

Month Day Year

11 24 17