
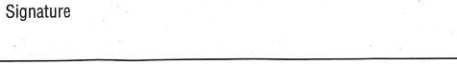





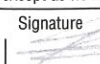


70 Ranch 4-6-20-5-63

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 200460
5. Generator's Name and Mailing Address Bill Barrett Corporation			Generator's Project Address (if different than mailing address) 70 Ranch 4-6-20-5-63		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address Element Services				Transporter Phone (970) 302-1100	
7. Transporter 2: Complete Company Name and Address Element Services 123 7th Ave Greeley, CO 80631				Transporter Phone	
8. Designated Disposal Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT CO 80610 970-686-2800				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 EXEMPT SOLIDS) 121118CO				8.15T	
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 #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP					
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/Offor's Printed/Typed Name Richard Lohr			Signature 		Month Day Year 4/12/17
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name GRL WELLSER			Signature 		Month Day Year 4/12/17
Transporter 2 Printed/Typed Name BENITO JUAREZ			Signature 		Month Day Year 4/13/17
17. Special Handling Instructions RECEIVED APR 14 2017 BY: 					
18. Discrepancy Indication Space: BY: 				19. Ticket # 608064	
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 SCOTT			Signature 		Month Day Year 4/12/17

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 200461
5. Generator's Name and Mailing Address			Generator's Project Address (if different than mailing address)		
Generator's Phone: (970) 302-1160			70 Ranch 4-6-20.5-63		
6. Transporter 1: Complete Company Name and Address NIETO Oilfield				Transporter Phone 970 534 1281	
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 970-686-2800 (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 EXEMPT SOLIDS) 121118CO				13.0 kL	
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 #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP					
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
Christopher Roiz		Chris		4	12 17
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name		Signature		Month	Day Year
NIETO Oilfield		JOSE A NIETO		7	12 17
Transporter 2 Printed/Typed Name		Signature		Month	Day Year
17. Special Handling Instructions RECEIVED APR 14 2017 BY: 					
18. Discrepancy Indication Space: Initials of Person noting discrepancy _____ Signature _____				19. Ticket # 1608203	
20. Management Method/Location Landfill _____ Monofill _____ Location: _____				Date _____	
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
Christopher Roiz				4	12 17

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 200466
5. Generator's Name and Mailing Address Bill BARRETT (Element)			Generator's Project Address (if different than mailing address) 70 RANKIN 4-6-20-5-63		
Generator's Phone: 970-302-1100					
6. Transporter 1: Complete Company Name and Address NIETO OIL Field				Transporter Phone 970-534-600	
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 970-686-2800				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 EXEMPT SOLIDS)				8.97	T
121118CO					
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 #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP					
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/Officer's Printed/Typed Name		Signature		Month	Day
<i>[Signature]</i>		<i>Mike Johnson</i>		4	12
16. Transporter Acknowledgement of Receipt of Materials		Signature		Month	Day
Transporter 1 Printed/Typed Name NIETO OIL Field		<i>JOSE NIETO</i>		4	12
Transporter 2 Printed/Typed Name		Signature		Month	Day
17. Special Handling Instructions RECEIVED APR 14 2017					
18. Discrepancy Indication Space: BT: DA				19. Ticket # 71608062	
Initials of Person noting discrepancy		Signature		Date	
20. Management Method/Location Landfill <input type="checkbox"/> Monofill <input type="checkbox"/> 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 <i>[Signature]</i>		Signature <i>[Signature]</i>		Month	Day
				4	12

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone 800-424-9300		4. Waste Tracking Number 200467	
		5. Generator's Name and Mailing Address <i>Element</i>		Generator's Project Address (if different than mailing address) <i>70 Ranch 4-G-20S-63</i>					
Generator's Phone: <i>(970) 302-1100</i>		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 970-686-2800 <i>(970) 686-2800</i>		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 EXEMPT SOLIDS) <i>121118CO</i>				<i>8.84</i>					
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 #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP							
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/Offor's Printed/Typed Name		Signature				Month Day Year			
<i>Christopher Ruiz</i>		<i>Chris Ruiz</i>				<i>4/12/17</i>			
16. Transporter Acknowledgement of Receipt of Materials									
Transporter 1 Printed/Typed Name		Signature				Month Day Year			
<i>GR Lending</i>						<i>4/12/17</i>			
Transporter 2 Printed/Typed Name		Signature				Month Day Year			
<i>BENITO GARCIA</i>						<i>4/12/17</i>			
17. Special Handling Instructions									
		RECEIVED APR 14 2017							
18. Discrepancy Indication Space:						19. Ticket # <i>1608227</i>			
Initials of Person noting discrepancy		Signature				Date			
<i>BT</i>									
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			
<i>Robert K. Hansen</i>						<i>4/12/17</i>			

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 200468
5. Generator's Name and Mailing Address <i>Blended Services</i>			Generator's Project Address (if different than mailing address)		
Generator's Phone: <i>770-302-4066</i>					
6. Transporter 1: Complete Company Name and Address <i>Wesco 26015 CR 40 Rocky Gap SUBWAY</i>				Transporter Phone <i>770-775-4060</i>	
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 970-686-2800 <i>(970) 686-2800</i>				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 EXEMPT SOLIDS) <i>12111800</i>				<i>10.17</i>	
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: <i>Customer Acct #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP</i>					
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/Officer's Printed/Typed Name		Signature		Month	Day Year
<i>[Signature]</i>		<i>[Signature]</i>		<i>11</i>	<i>17</i>
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name		Signature		Month	Day Year
<i>Michael J. [Signature]</i>		<i>[Signature]</i>		<i>11</i>	<i>17</i>
Transporter 2 Printed/Typed Name		Signature		Month	Day Year
17. Special Handling Instructions					
18. Discrepancy Indication Space:				19. Ticket # <i>1608799</i>	
Initials of Person noting discrepancy		Signature		Date	
20. Management Method/Location <i>Landfill Monofill Location:</i>					
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
<i>[Signature]</i>		<i>[Signature]</i>		<i>11</i>	<i>17</i>

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone 800-424-9300		4. Waste Tracking Number 200469			
		5. Generator's Name and Mailing Address Generator's Project Address (if different than mailing address) Generator's Phone: _____									
GENERATOR		6. Transporter 1: Complete Company Name and Address <i>Devin Company 2605 Wacker 46 Kersey, CO 80644</i>						Transporter Phone <i>970-775-4860</i>			
		7. Transporter 2: Complete Company Name and Address						Transporter Phone			
DESIGNATED FACILITY		8. Designated Disposal Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT CO 80610 970-686-2800 <i>(970) 686-2800</i>						Facility's Phone:			
TRANSPORTER		9. Waste Shipping Name, Description, & Profile Number 1. NON REGULATED SOLID (E&P EXEMPT SOLIDS) <i>121118CO</i>				10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
						No. Type					
DESIGNATED FACILITY		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: <i>Customer Acct #: 308-10540 Customer Name: BILL BARRETT PRODUCTION CORP</i>									
DESIGNATED FACILITY		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/Officer's Printed/Typed Name				Signature		Month		Day	Year
TRANSPORTER		16. Transporter Acknowledgement of Receipt of Materials									
		Transporter 1 Printed/Typed Name				Signature		Month		Day	Year
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name				Signature		Month		Day	Year
		17. Special Handling Instructions									
DESIGNATED FACILITY		18. Discrepancy Indication Space:						19. Ticket # <i>16088600</i>			
		Initials of Person noting discrepancy				Signature		Date			
DESIGNATED FACILITY		20. Management Method/Location <i>Landfill Monofill Location:</i>									
		21. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 18									
DESIGNATED FACILITY		Printed/Typed Name				Signature		Month		Day	Year