

Bill To:

BERRY PETROLEUM CO.
RT. 2 BOX 7735

ROOSEVELT UT 84066



6/7/2017

Batch ID: BERPET170607

Remit To:
RN Trucking
PO Box 98
Roosevelt, UT 84066

Date	Hauled by	Ticket #	Well Location	Site	Commodity	QTY	Unit	Rate	Charge Type	Charge
6/1/2017	DOUG TETER	414822	CHEVRON L-4 PAD	Piceance Creek	Soil	18	YRD	\$14.00	Category4 (YRD)	\$252.00
6/1/2017	GP MEENACH	414823	CHEVRON L-4 PAD	Piceance Creek	Soil	18	YRD	\$14.00	Category4 (YRD)	\$252.00
5/31/2017	DOUG TETER	414820	CHEVRON L-4 PAD	Piceance Creek	Soil	18	YRD	\$14.00	Category4 (YRD)	\$252.00
5/31/2017	GP MEENACH	414821	CHEVRON L-4 PAD	Piceance Creek	Soil	18	YRD	\$14.00	Category4 (YRD)	\$252.00

Comments:

Total Count: 72

Total Charges: \$1,008.00

AFE/WO Number:

Code Number:

User Number:

Approved by: _____
 Name: _____
 Title: _____
 Date: _____

7102120
 Chevron L4 Pad
 6/9/17
Brent White

LINN OPERATING, INC.

Generator's Name: Barry Petroleum Company Generator's Address: 235 Callahan Ave Parachute, CO 81635 Generator's Telephone No.: 910 285 5204

Origin of Special Waste (Project or Spill Location): Dumpling Excavation Spoils
Chevron L4 PAD 6910 Garden Gulch Garfield County, CO

Transporter #1 Company Name: Doug Tate & Sons Address: 4949 CO Rd 309 Parachute CO Telephone No.: 970 210 0580

Transporter #2 Company Name: _____ Address: _____ Telephone No.: _____

Destination Facility Name/Site Address: RW Industries P.O. Box Meeker, CO Facility ID (Permit) Number: _____ Telephone No.: 435.722.2800

Type and Proper Name of Special Waste	Container(s)		Total Quantity	Unit Wt/Vol
	No.	Type		
<u>EBP Solid Waste</u>	<u>1</u>	<u>TK</u>	<u>18</u>	<u>CY.</u>

Additional Descriptions for Special Waste Listed Above:

Special Handling Instructions:

GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state or local regulations.

Printed/Typed Name: Brian White Signature: [Signature] Date: 5/31/17

Transporter 1 Acknowledgement of Receipt of Special Waste

Printed/Typed Name: Brian K. Meenan Signature: [Signature] Date: 5/31/17

Transporter 2 Acknowledgement of Receipt of Special Waste

Printed/Typed Name: _____ Signature: _____ Date: _____

Discrepancy Indication Space:

Facility Owner or Operator: *I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.*

Printed/Typed Name: _____ Signature: _____ Date: _____

LINN OPERATING, INC.

Generator's Name <i>Berry Petroleum Company</i>		Generator's Address <i>235 Malahan Ave Parachute, CO 81635</i>		Generator's Telephone No. <i>970 285 5204</i>	
Origin of Special Waste (Project or Spill Location): <i>Dumpsite Excavation Spoils</i> <i>Cherion 14 Pao 696 Garden Gulch Grantfield County, CO</i>					
Transporter #1 Company Name <i>Day Truck & Sons</i>		Address <i>4949 Co Rd 309 Parachute, CO</i>		Telephone No. <i>970.210.0580</i>	
Transporter #2 Company Name		Address		Telephone No.	
Destination Facility Name/Site Address <i>RN Industries P. O. Box Meeker, CO</i>		Facility ID (Permit) Number		Telephone No. <i>435.728.2880</i>	

Type and Proper Name of Special Waste	Container(s)		Total Quantity	Unit Wt/Vol
	No.	Type		
<i>ESP Solid Waste</i>	<i>1</i>	<i>TK</i>	<i>18</i>	<i>C.Y.</i>

Additional Descriptions for Special Waste Listed Above:

Special Handling Instructions:

GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state or local regulations.

Printed/Typed Name: <i>B. H. White</i>		Signature: <i>[Signature]</i>		Date: <i>7/31/17</i>	
Transporter 1 Acknowledgement of Receipt of Special Waste					
Printed/Typed Name: <i>A. Douglas</i>		Signature: <i>[Signature]</i>		Date: <i>8/1/17</i>	
Transporter 2 Acknowledgement of Receipt of Special Waste					
Printed/Typed Name:		Signature:		Date:	

Discrepancy Indication Space:

Facility Owner or Operator: I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.

Printed/Typed Name:		Signature:		Date:	
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WATER DISPOSAL TICKET

RN INDUSTRIES
 P.O. BOX 98 • ROOSEVELT, UT 84066
 OFFICE: 435-722-2800

414821

DISPOSAL SITES		VOLUME	FOR OFFICE USE ONLY	
			UNIT PRICE	TOTAL
<input checked="" type="checkbox"/> PICEANCE <input type="checkbox"/> GLEN BENCH- NORTH <input type="checkbox"/> RANGELY <input type="checkbox"/> GLEN BENCH-SOUTH <input type="checkbox"/> ACE <input type="checkbox"/> CHAPITA <input type="checkbox"/> WONSIT <input type="checkbox"/> BLUEBELL <input type="checkbox"/> SEEP RIDGE <input type="checkbox"/> PLEASANT VALLEY		CATEGORY 1 (BBLs) <input type="checkbox"/> PRODUCTION WATER <input type="checkbox"/> FLOWBACK <input type="checkbox"/> OTHER		
DATE: <u>5/31/17</u>		CATEGORY 2 (BBLs) <input type="checkbox"/> FLUSH LOADS <input type="checkbox"/> CELLARS <input type="checkbox"/> CEMENT WATER <input type="checkbox"/> OTHER		
BILL TO COMPANY: <u>Berry Petro</u>		CATEGORY 3 (BBLs) <input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS <input type="checkbox"/> DRILLING MUD BBLs <input type="checkbox"/> OTHER		
COMPANY MAN: <u>Brent White</u>		CATEGORY 4 (SOLIDS IN YARDS) <input checked="" type="checkbox"/> SOLIDS (IN YARDS) <input type="checkbox"/> SOIL <input type="checkbox"/> DRILL CUTTINGS <input type="checkbox"/> OTHER	18	
LOCATION: <u>Cher 14 PAD 690</u>				
TRUCK COMPANY: <u>G.P. Meenach</u>				
DRIVER: <u>Gary</u>				
TRUCK #: <u>724</u>				
TRUCK TICKET #: <u>49259</u>				
			Total:	

IF OTHER PLEASE SPECIFY: _____

COMMENTS: _____

DRIVER SIGNATURE: [Signature]

AFE/WO# _____

USER# _____

CUSTOMER SIGNATURE: _____

CODE# _____

ALL FIELDS MUST BE COMPLETED ENTIRELY: TICKETS MISSING INFORMATION WILL BE BILLED BACK TO THE HAULING COMPANY. APPROVAL FOR BILLING THE HAULING COMPANY WILL COME FROM THE SIGNATURE OF THE DRIVER DELIVERING THE LOAD. **DRIVERS:** IF YOU ARE NOT GIVEN ALL THE INFORMATION ABOVE, PLEASE CONTACT YOUR DISPATCHER. **DO NOT** LEAVE FIELDS BLANK.



LINN OPERATING, INC.

Generator's Name Berry Petroleum	Generator's Address 25 Callahan Ave Parachute Co 81635	Generator's Telephone No. 970-285-5204
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Origin of Special Waste (Project or Spill Location):
Chevron L4 Pad 1696

Transporter #1 Company Name Dougster & Sons	Address 4444 N 30th Parachute Co 81635	Telephone No. 970-210-0530
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Transporter #2 Company Name	Address	Telephone No.
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Destination Facility Name/Site Address RNF Pierance McElver Co	Facility ID (Permit) Number	Telephone No. 435-727-2800
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Type and Proper Name of Special Waste	Container(s)		Total Quantity	Unit Wt/Vol
	No.	Type		
E & P solid waste	1	TX	78	L.V.

Additional Descriptions for Special Waste Listed Above:

Special Handling Instructions:

GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state or local regulations.

Printed/Typed Name: Brent White	Signature: <i>[Signature]</i>	Date: 6-1-17
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Transporter 1 Acknowledgement of Receipt of Special Waste

Printed/Typed Name: Gary R. Meenach	Signature: <i>[Signature]</i>	Date: 6/1/17
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Transporter 2 Acknowledgement of Receipt of Special Waste

Printed/Typed Name:	Signature:	Date:
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Discrepancy Indication Space:

Facility Owner or Operator: I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.

Printed/Typed Name:	Signature:	Date:
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WATER DISPOSAL TICKET

RN INDUSTRIES
 P.O. BOX 98 • ROOSEVELT, UT 84066
 OFFICE: 435-722-2800

414820

DISPOSAL SITES				FOR OFFICE USE ONLY		
				VOLUME	UNIT PRICE	TOTAL
<input checked="" type="checkbox"/> PICEANCE	<input type="checkbox"/> GLEN BENCH- NORTH	CATEGORY 1 (BBLs)				
<input type="checkbox"/> RANGELY	<input type="checkbox"/> GLEN BENCH-SOUTH	<input type="checkbox"/> PRODUCTION WATER				
<input type="checkbox"/> ACE	<input type="checkbox"/> CHAPITA	<input type="checkbox"/> FLOWBACK	<input type="checkbox"/> OTHER			
<input type="checkbox"/> WONSIT	<input type="checkbox"/> BLUEBELL	CATEGORY 2 (BBLs)				
<input type="checkbox"/> SEEP RIDGE	<input type="checkbox"/> PLEASANT VALLEY	<input type="checkbox"/> FLUSH LOADS	<input type="checkbox"/> CELLARS			
DATE	8-31-17	<input type="checkbox"/> CEMENT WATER	<input type="checkbox"/> OTHER			
BILL TO COMPANY	Berry Petro	CATEGORY 3 (BBLs)				
COMPANY MAN	Brent White	<input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS				
LOCATION	L-4 Road to 96	<input type="checkbox"/> DRILLING MUD BBLs	<input type="checkbox"/> OTHER			
TRUCK COMPANY	Don Peter & Sons	CATEGORY 4 (SOLIDS IN YARDS)				
TRUCK COMPANY	Don Peter & Sons	<input checked="" type="checkbox"/> SOLIDS (IN YARDS)	<input type="checkbox"/> SOIL	18		
DRIVER	Don Peter	<input type="checkbox"/> DRILL CUTTINGS	<input type="checkbox"/> OTHER			
TRUCK #	# P					
TRUCK TICKET #	4976					
IF OTHER PLEASE SPECIFY: _____				Total:		

IF OTHER PLEASE SPECIFY: _____

COMMENTS: _____

DRIVER SIGNATURE: A. Dayliff

AFE/WO# _____

USER# _____

CUSTOMER SIGNATURE: _____

CODE# _____

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LINN OPERATING, INC.

Generator's Name Berry Petroleum		Generator's Address 235 Callahan Ave Paradise, CO 80655		Generator's Telephone No. 170-855-5204					
Origin of Special Waste (Project or Spill Location): DUMP FIRE Excavation Spoils Chevron L4-Pad 6910 Garden Gulch Garfield County CO									
Transporter #1 Company Name DOUG TETER & SON		Address 4949 CR 309 PINE BL		Telephone No. 970-210-0580					
Transporter #2 Company Name		Address		Telephone No.					
Destination Facility Name/Site Address RHI PICKANCE WICKER CO		Facility ID (Permit) Number		Telephone No. 435-777-2800					
Type and Proper Name of Special Waste Exp Solid Waste				Container(s) No. Type		Total Quantity		Unit W/Vol	
				1 TK		18		C.Y.	
Additional Descriptions for Special Waste Listed Above:									
Special Handling Instructions:									
<p>GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described above by type and proper name of the special waste, and that such waste has been managed, packaged, containerized and labeled in accordance with the requirements of 20.9.8 NMAC (Special Waste Requirements) in addition to any other applicable federal, state or local regulations.</p>									
Printed/Typed Name: Brent White				Signature: <i>[Signature]</i>			Date: 6-1-17		
Transporter 1 Acknowledgement of Receipt of Special Waste									
Printed/Typed Name: DOUG TETER JR				Signature: <i>[Signature]</i>			Date: 6-1-17		
Transporter 2 Acknowledgement of Receipt of Special Waste									
Printed/Typed Name:				Signature:			Date:		
Discrepancy Indication Space:									
Facility Owner or Operator: I hereby acknowledge receipt of the special waste as indicated upon this manifest, except as noted above in the Discrepancy Indication Space.									
Printed/Typed Name:				Signature:			Date:		



WATER DISPOSAL TICKET

RN INDUSTRIES

P.O. BOX 98 • ROOSEVELT, UT 84066

OFFICE: 435-722-2800

414822

DISPOSAL SITES				FOR OFFICE USE ONLY	
		VOLUME	UNIT PRICE	TOTAL	
<input checked="" type="checkbox"/> PICEANCE <input type="checkbox"/> GLEN BENCH- NORTH <input type="checkbox"/> RANGELY <input type="checkbox"/> GLEN BENCH-SOUTH <input type="checkbox"/> ACE <input type="checkbox"/> CHAPITA <input type="checkbox"/> WONSIT <input type="checkbox"/> BLUEBELL <input type="checkbox"/> SEEP RIDGE <input type="checkbox"/> PLEASANT VALLEY		CATEGORY 1 (BBLs) <input type="checkbox"/> PRODUCTION WATER <input type="checkbox"/> FLOWBACK <input type="checkbox"/> OTHER			
DATE <u>6-1-17</u> BILL TO COMPANY <u>Berry Petro</u> COMPANY MAN <u>Brent White</u> LOCATION <u>Chevron L-4 Pad</u> TRUCK COMPANY <u>Doyle Peter & Sons</u> DRIVER <u>Doug Peter</u> TRUCK # <u>#1</u> TRUCK TICKET # <u>49261</u>		CATEGORY 2 (BBLs) <input type="checkbox"/> FLUSH LOADS <input type="checkbox"/> CELLARS <input type="checkbox"/> CEMENT WATER <input type="checkbox"/> OTHER			
		CATEGORY 3 (BBLs) <input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS <input type="checkbox"/> DRILLING MUD BBLs <input type="checkbox"/> OTHER			
		CATEGORY 4 (SOLIDS IN YARDS) <input checked="" type="checkbox"/> SOLIDS (IN YARDS) <input type="checkbox"/> SOIL <input type="checkbox"/> DRILL CUTTINGS <input type="checkbox"/> OTHER		18	14.00
IF OTHER PLEASE SPECIFY: _____				Total:	

IF OTHER PLEASE SPECIFY: _____

COMMENTS: _____

DRIVER SIGNATURE: A Doyle Peter

AFE/WO# _____

USER# _____

CUSTOMER SIGNATURE: _____

CODE# _____

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WATER DISPOSAL TICKET
 RN INDUSTRIES
 P.O. BOX 98 • ROOSEVELT, UT 84066
 OFFICE: 435-722-2800

414823

DISPOSAL SITES				FOR OFFICE USE ONLY		
				VOLUME	UNIT PRICE	TOTAL
<input checked="" type="checkbox"/> PICEANCE	<input type="checkbox"/> GLEN BENCH- NORTH	CATEGORY 1 (BBLS)				
<input type="checkbox"/> RANGELY	<input type="checkbox"/> GLEN BENCH-SOUTH	<input type="checkbox"/> PRODUCTION WATER				
<input type="checkbox"/> ACE	<input type="checkbox"/> CHAPITA	<input type="checkbox"/> FLOWBACK	<input type="checkbox"/> OTHER			
<input type="checkbox"/> WONSIT	<input type="checkbox"/> BLUEBELL	CATEGORY 2 (BBLS)				
<input type="checkbox"/> SEEP RIDGE	<input type="checkbox"/> PLEASANT VALLEY	<input type="checkbox"/> FLUSH LOADS	<input type="checkbox"/> CELLARS			
DATE	6-1-17	<input type="checkbox"/> CEMENT WATER	<input type="checkbox"/> OTHER			
BILL TO COMPANY	Berry Petro	CATEGORY 3 (BBLS)				
COMPANY MAN	Brent White	<input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS				
LOCATION	Chevron L-4 Ad	<input type="checkbox"/> DRILLING MUD BBLS	<input type="checkbox"/> OTHER			
TRUCK COMPANY	AP Mearns	CATEGORY 4 (SOLIDS IN YARDS)				
DRIVER	Gary	<input type="checkbox"/> SOLIDS (IN YARDS)	<input checked="" type="checkbox"/> SOIL	18	14.00	
TRUCK #	724	<input type="checkbox"/> DRILL CUTTINGS	<input type="checkbox"/> OTHER			
TRUCK TICKET #	49202					
				Total:		

IF OTHER PLEASE SPECIFY: _____

COMMENTS: _____

DRIVER SIGNATURE: *[Signature]*

AFE/WO# _____

CUSTOMER SIGNATURE: _____

USER# _____

CODE# _____

ALL FIELDS MUST BE COMPLETED ENTIRELY; TICKETS MISSING INFORMATION WILL BE BILLED BACK TO THE HAULING COMPANY. APPROVAL FOR BILLING THE HAULING COMPANY WILL COME FROM THE SIGNATURE OF THE DRIVER DELIVERING THE LOAD. **DRIVERS;** IF YOU ARE NOT GIVEN ALL THE INFORMATION ABOVE, PLEASE CONTACT YOUR DISPATCHER. **DO NOT** LEAVE FIELDS BLANK.

