



Rocky Mountain District

6855 S. Havana St. Suite 350
Centennial, CO 80112
Office: (720) 305-5872

OILFIELD WASTE MANIFEST

RCRA Exempt Waste Only, unless pre-approved by R360 and WYDEQ

(PLEASE PRINT)

NO. 23786

GENERATOR

Generator Company Name:

Lease/Well Name & No.:

Bill To: (if different from Generator)

Permit No.:

Address:

API No.:

County:

City, State, Zip:

Rig Name & No.:

Phone No.:

AFE/PO No./User ID:

WASTE STREAM INFORMATION (provide volume next to waste type)

Table with 3 columns: Waste Type, Volume, and Unit. Rows include Pit/Tank Liner, Contaminated Soil, Filter Media, Flowback Water, Production Water, Mud, Residual Washout, Sump, Reserve Pond Fluid, and Tank Bottoms/Sludge (E&P).

I hereby certify that all information contained herein is true and correct, and the material described is properly identified, classified, labeled and prepared as indicated. I certify that this waste to the best of my knowledge is not hazardous or dangerous as defined by the U.S. EPA, or the state of origin.

Generator Representative Information (REQUIRED)

(PRINT) AUTHORIZED AGENT'S NAME

(PRINT) AUTHORIZED AGENT'S EMAIL

(PRINT) AUTHORIZED AGENT'S PHONE NUMBER

DATE

SIGNATURE OF AUTHORIZED AGENT

TRANSPORTER

Trucking Company:

Driver's Name:

Trucking Address:

Print Name:

City, State, Zip:

Phone No.:

Phone No.:

Truck No.:

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to R360.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRANSPORTER



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(PLEASE PRINT)

NO. 30327

GENERATOR

Generator Company Name: [Handwritten]

Lease/Well Name & No.: [Handwritten]

Bill To: (if different from Generator)

Permit No.

Address:

API No.:

City, State, Zip:

County:

Phone No.:

Rig Name & No.:

AFE/PO No./User ID:

WASTE STREAM INFORMATION (provide volume next to waste type)

Table with 3 columns: Waste Type, Volume, and Unit. Rows include Pit/Tank Liner, Contaminated Soil, Filter Media, Flowback Water, Production Water, Mud, Sump, Reserve Pond Fluid, and Tank Bottoms/Sludge (E&P).

I hereby certify that all information contained herein is true and correct, and the material described is properly identified, classified, labeled and prepared as indicated. I certify that this waste to the best of my knowledge is not hazardous or dangerous as defined by the U.S. EPA, or the state of origin.

Generator Representative Information (REQUIRED)

{PRINT} AUTHORIZED AGENT'S NAME

{PRINT} AUTHORIZED AGENT'S EMAIL

{PRINT} AUTHORIZED AGENT'S PHONE NUMBER

DATE

SIGNATURE OF AUTHORIZED AGENT

TRANSPORTER

Trucking Company:

Driver's Name:

Trucking Address:

Print Name:

City, State, Zip:

Phone No.:

Phone No.:

Truck No.:

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to R360.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRANSPORTER



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OILFIELD WASTE MANIFEST

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(PLEASE PRINT)

NO. **30328**

GENERATOR

Generator Company Name: _____ Lease/Well Name & No.: _____

Bill To: (if different from Generator) _____ Permit No. _____

Address: _____ API No.: _____

_____ County: _____

City, State, Zip: _____ Rig Name & No.: _____

Phone No.: _____ AFE/PO No./User ID: _____

WASTE STREAM INFORMATION (provide volume next to waste type)

Pit/Tank Liner _____ yds ³	Flowback Water _____ bbls	Sump _____ bbls
Contaminated Soil _____ yds ³	Production Water _____ bbls	Reserve Pond Fluid _____ bbls
Filter Media <i>3000 gal 74</i> _____ yds ³	Mud _____ bbls	Tank Bottoms/Sludge (E&P) _____ bbls

I hereby certify that all information contained herein is true and correct, and the material described is properly identified, classified, labeled and prepared as indicated. I certify that this waste to the best of my knowledge is not hazardous or dangerous as defined by the U.S. EPA, or the state of origin. I certify this waste does not contain any regulated radioactive materials, that all known suspected hazards have been disclosed, and that the waste is not a regulated hazardous waste by government or local authority. I certify that all samples used for this analysis are representative of the materials described herein. I understand that all wastes may undergo inspection upon arrival at the facility and may be refused if the delivered material does not conform to the description herein. Notification will be provided immediately if there is a change in the composition of, or process generating this waste stream, prior to offering the waste for management by the facility.

Generator Representative Information (REQUIRED)

(PRINT) AUTHORIZED AGENT'S NAME: _____ (PRINT) AUTHORIZED AGENT'S EMAIL: _____

(PRINT) AUTHORIZED AGENT'S PHONE NUMBER: _____

DATE: _____ SIGNATURE OF AUTHORIZED AGENT: _____

TRANSPORTER

Trucking Company: *Tecoloco Oil & Gas* _____ Driver's Name: *Bob Juel* _____

Trucking Address: _____ Print Name: _____

City, State, Zip: _____ Phone No.: _____

Phone No.: _____ Truck No.: _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to R360.

SHIPMENT DATE: _____ DRIVER'S SIGNATURE: _____ DELIVERY DATE: _____ DRIVER'S SIGNATURE: _____

TRANSPORTER



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OILFIELD WASTE MANIFEST

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(PLEASE PRINT)

NO. 30330

GENERATOR

Generator Company Name:

Lease/Well Name & No.:

Bill To: (if different from Generator)

Permit No.:

Address:

API No.:

City, State, Zip:

County:

Phone No.:

Rig Name & No.:

AFE/PO No./User ID:

WASTE STREAM INFORMATION (provide volume next to waste type)

Table with 3 columns and 3 rows for waste stream information including Pit/Tank Liner, Contaminated Soil, Filter Media, Flowback Water, Production Water, Mud, Sump, Reserve Pond Fluid, and Tank Bottoms/Sludge (E&P).

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Generator Representative Information (REQUIRED)

(PRINT) AUTHORIZED AGENT'S NAME

(PRINT) AUTHORIZED AGENT'S EMAIL

(PRINT) AUTHORIZED AGENT'S PHONE NUMBER

DATE

SIGNATURE OF AUTHORIZED AGENT

TRANSPORTER

Trucking Company:

Driver's Name:

Trucking Address:

Print Name:

City, State, Zip:

Phone No.:

Phone No.:

Truck No.:

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DELIVERY DATE

DRIVER'S SIGNATURE

TRANSPORTER