

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone 800-424-9300		4. Waste Tracking Number 451737	
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC						Generator's Project Address (if different than mailing address)			
Generator's Phone:									
6. Transporter 1: Complete Company Name and Address L+S Trucking #720						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 970-886-2900						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 (CONTAMINATED SOIL - VARIOUS LOCATIONS)								12.37	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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT									
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 Donna Crook					Signature 		Month Day Year 7 15 18		
16. Transporter Acknowledgement of Receipt of Materials									
Transporter 1 Printed/Typed Name Manuel Leos					Signature 		Month Day Year 7 15 18		
Transporter 2 Printed/Typed Name					Signature		Month Day Year		
17. Special Handling Instructions									
18. Discrepancy Indication Space:								19. Ticket # 1738334	
Initials of Person noting discrepancy					Signature		Date		
20. Management Method/Location Landfill <input checked="" 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					Signature 		Month Day Year 7 15 18		

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

800-424-9300

4. Waste Tracking Number

451736

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

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 Facility Name and Site Address

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80810 970-686-2800

Facility's Phone:

9. Waste Shipping Name, Description, & Profile Number

10. Containers

No.

Type

11. Total
Quantity12. Unit
Wt./Vol.

1.

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

11953300

11.24 T

2.

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738320

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

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451727

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

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 Facility Name and Site Address

Facility's Phone:

**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-688-2800**

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

No.

Type

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)****19-07**

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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738239

Initials of Person noting discrepancy

Signature

20. Management Method/Location

Date

Landfill

Monofill


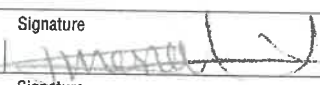
Location:

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

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone 800-424-9300		4. Waste Tracking Number 451717		
	5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC						Generator's Project Address (if different than mailing address)				
	Generator's Phone:						1 HOFFMAN CTS CK 23 + 105				
	6. Transporter 1: Complete Company Name and Address 1st Trucking # 720						Transporter Phone				
	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						Facility's Phone:				
	9. Waste Shipping Name, Description, & Profile Number						10. Containers		11. Total Quantity	12. Unit WL/Vol.	
							No.	Type			
	1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS)								13.35		
	2. 1155320										
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT											
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 ALYSSA BURRO					Signature 			Month Day Year 7 13 18			
TRANSPORTER	16. Transporter Acknowledgement of Receipt of Materials										
	Transporter 1 Printed/Typed Name Manuel 601					Signature 			Month Day Year 7 13 18		
	Transporter 2 Printed/Typed Name					Signature			Month Day Year		
17. Special Handling Instructions											
18. Discrepancy Indication Space:								19. Ticket # 1737964			
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 7 13 18											

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

800-424-9300

451718

5. Generator's Name and Mailing Address

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

FOUNDATION ENERGY MANAGEMENT, LLC

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 Facility Name and Site Address

Facility's Phone:

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-898-2800

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

No.

Type

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

2.

11363300

14.247

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Offor's Printed/Typed Name

Signature

Month Day Year

ALYSSA BARN

HBS

7 3 18

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

B. Ivey Thompsonberg

B. Ivey Thompsonberg

7 3 18

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

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

7 3 18

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451715

5. Generator's Name and Mailing Address

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

FOUNDATION ENERGY MANAGEMENT, LLC

Generator's Phone:

HUFFMAN CTB CR 88+105

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

Facility's Phone:

**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-886-2800**

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity

12. Unit
Wt./Vol.

1.

No.

Type

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

16.75 T

2.

11953300

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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

ALYSSA BEARD

[Signature]

7 3 18

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

[Signatures of Transporters]

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

737908

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

7 13 18

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451716

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

Generator's Phone:

6. Transporter 1: Complete Company Name and Address

1 HARTMAN CTB K 88+105

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 970-688-2800

Facility's Phone:

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

No.

Type

13.187

2.

11053300

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year

Alyssa Benner

H. R. B.

17 13 18

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

17 13 18

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1A37937

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

H 13 18

GENERATOR	NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451723		
	5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC				Generator's Project Address (if different than mailing address)			
	Generator's Phone:							
	6. Transporter 1: Complete Company Name and Address GDC Trucking Inc				Transporter Phone (910) 518-8194			
	7. Transporter 2: Complete Company Name and Address				Transporter Phone			
TRANSPORTER	8. Designated Disposal Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT CO 80610 970-888-2800				Facility's Phone:			
	9. Waste Shipping Name, Description, & Profile Number 1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS) 11953300				10. Containers		11. Total Quantity 14.44	12. Unit Wt./Vol.
					No.	Type		
	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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT							
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 7 13 13	
	16. Transporter Acknowledgement of Receipt of Materials							
	Transporter 1 Printed/Typed Name G. M. Delgado				Signature		Month Day Year 7 13 13	
	Transporter 2 Printed/Typed Name				Signature		Month Day Year	
17. Special Handling Instructions								
18. Discrepancy Indication Space:						19. Ticket # 1738032		
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 Robert L. Loman Signature [Signature] Month Day Year 7 13 13								

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

800-424-9300

451724

5. Generator's Name and Mailing Address

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

FOUNDATION ENERGY MANAGEMENT, LLC

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 Facility Name and Site Address

Facility's Phone:

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-888-2800

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
WL/Vol.

1.

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

No.

Type

2.

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

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

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451719

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

Generator's Phone:

HOFFMAN CIR CR 88+105

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

Facility's Phone:

**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-888-2800**

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

No.

Type

2.

11053300

12.313. 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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

ALISSA BEARD**ALISSA BEARD****7 3 18**

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1737988

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

7 13 11

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451722
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5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC	Generator's Project Address (if different than mailing address)
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Generator's Phone:

6. Transporter 1: Complete Company Name and Address	Transporter Phone
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7. Transporter 2: Complete Company Name and Address	Transporter Phone
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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:
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9. Waste Shipping Name, Description, & Profile Number	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS)					
2. 118533CO					

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
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14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name	Signature	Month	Day	Year
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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

17. Special Handling Instructions

18. Discrepancy Indication Space:	19. Ticket # 1738025	
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	Signature	Month	Day	Year
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GENERATOR

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

800-424-9300

4. Waste Tracking Number

451725

5. Generator's Name and Mailing Address

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

FOUNDATION ENERGY MANAGEMENT, LLC

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 Facility Name and Site Address

Facility's Phone:

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-888-2500

9. Waste Shipping Name, Description, & Profile Number

10. Containers

No.

Type

11. Total
Quantity12. Unit
Wt./Vol.

1.

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

11052500

12.59 h

2.

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

15. Contractor/Generator Certification:

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Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738067

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

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

800-424-9300

4. Waste Tracking Number

451726

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

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 Facility Name and Site Address

Facility's Phone:

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-816 2800

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

No.

Type

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

2.

11853300

17.067

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738228

Initials of Person noting discrepancy

Signature

20. Management Method/Location

Date

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

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451728

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

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 Facility Name and Site Address

Facility's Phone:

NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 370-886-2800

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)

No.

Type

16.42

2.

11853300

13. Regulatory Agency: Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, Co 80222-1530Emergency Notification:
CHEMTREC (800) 424-9300
24-hour Toll Free Number

14. Bill to & Account Number:

Customer Acct #: N 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

738247

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451729
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC			Generator's Project Address (if different than mailing address)		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address Top Dog Trucking					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					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 (CONTAMINATED SOIL - VARIOUS LOCATIONS)				11.775	
2. 11063300					
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT					
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
11-2-0				7	15 18
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name		Signature		Month	Day Year
Freddy Martinez				7	5 18
Transporter 2 Printed/Typed Name		Signature		Month	Day Year
17. Special Handling Instructions					
18. Discrepancy Indication Space:					19. Ticket # 1738255
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
Don				7	5 18

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451721

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

Generator's Phone:

6. Transporter 1: Complete Company Name and Address

7. Transporter 2: Complete Company Name and Address

Transporter Phone

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:

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1.

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

No.

Type

14.397

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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738 291

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451730
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC			Generator's Project Address (if different than mailing address) <i>Hoffman CTB 38414</i>		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address <i>Buckler / R.F. #15</i>			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 970-688-2800			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 (CONTAMINATED SOIL - VARIOUS LOCATIONS)				13-17	
2. 11853300					
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT					
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>Rafael Garcia</i>		<i>Rafael Garcia</i>		<i>7</i>	<i>5</i> <i>18</i>
16. Transporter Acknowledgement of Receipt of Materials		Signature		Month	Day Year
Transporter 1 Printed/Typed Name		Signature		Month	Day Year
<i>Rafael Garcia</i>		<i>Rafael Garcia</i>		<i>7</i>	<i>5</i> <i>18</i>
Transporter 2 Printed/Typed Name		Signature		Month	Day Year
17. Special Handling Instructions					
18. Discrepancy Indication Space:					
Initials of Person noting discrepancy		Signature		19. Ticket # 1738300	
				Date	
20. Management Method/Location Landfill <input checked="" 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		Signature		Month	Day Year
<i>Rafael Garcia</i>		<i>Rafael Garcia</i>		<i>7</i>	<i>5</i> <i>18</i>

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone 800-424-9300		4. Waste Tracking Number 451732			
		5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC		Generator's Project Address (if different than mailing address) <i>16500 E. 1st Ave. Suite 100</i>							
GENERATOR		Generator's Phone:									
		6. Transporter 1: Complete Company Name and Address <i>16500 E. 1st Ave. Suite 100</i>						Transporter Phone <i>678-2020</i>			
TRANSPORTER		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:			
DESIGNATED FACILITY		9. Waste Shipping Name, Description, & Profile Number		10. Containers		11. Total Quantity	12. Unit Wt./Vol.				
				No.	Type						
		1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS)				13.50T					
											2. <i>11853303</i>
		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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT									
		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	
		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	
		17. Special Handling Instructions									
		18. Discrepancy Indication Space:						19. Ticket # 1738302			
		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	

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451733

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

Generator's Phone:

6. Transporter 1: Complete Company Name and Address

Navarro's Trucking, LLC. #29

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 970-888-2800**

Facility's Phone:

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

No.

Type

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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

16. Transporter Acknowledgement of Receipt of Materials

Transporter 1 Printed/Typed Name

Vessenia Perez

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738299

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451731
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC			Generator's Project Address (if different than mailing address)		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address Boyle's Enviro 809 N 25th Greeley Co 80634			Transporter Phone 970-353-0720		
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 970-688-2800			Facility's Phone:		
9. Waste Shipping Name, Description, & Profile Number			10. Containers		11. Total Quantity
			No.	Type	
1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS)					15.75
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT					
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
Adam Quinn					7 5 18
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name			Signature		Month Day Year
DAVE GERE					7 5 18
Transporter 2 Printed/Typed Name			Signature		Month Day Year
17. Special Handling Instructions					
18. Discrepancy Indication Space:					19. Ticket # 738287
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
Adam Quinn					7 5 18

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451752

5. Generator's Name and Mailing Address

FOUNDATION ENERGY MANAGEMENT, LLC

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

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 Facility Name and Site Address

Facility's Phone:

**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-896-2800**

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total
Quantity12. Unit
Wt./Vol.

1.

No.

Type

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

2.

11053300

12.46513. 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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

Brant Everett**TEG GUP****1 5 17**

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738407

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

1 5 18

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451751
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5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC	Generator's Project Address (if different than mailing address)
---	---

Generator's Phone:	11 Hoffman Cir CR 88 + 105
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6. Transporter 1: Complete Company Name and Address NACAVES TRUCKING LLC	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 970-688-2800	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 (CONTAMINATED SOIL - VARIOUS LOCATIONS)					
2. 11852300					

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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT
--

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 Brent Enrill	Signature 	Month 7	Day 2	Year 18
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16. Transporter Acknowledgement of Receipt of Materials				
Transporter 1 Printed/Typed Name VA ...	Signature 	Month 7	Day 2	Year 18
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

17. Special Handling Instructions

18. Discrepancy Indication Space:	19. Ticket # 1738404
Initials of Person noting discrepancy	Signature
20. Management Method/Location	Date

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 7 Day 5 Year 18

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

451738

5. Generator's Name and Mailing Address

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

FOUNDATION ENERGY MANAGEMENT, LLC

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 Facility Name and Site Address

Facility's Phone:

**NORTH WELD LANDFILL
40000 WELD COUNTY ROAD 25
AULT CO 80610 970-686-2800**

9. Waste Shipping Name, Description, & Profile Number

10. Containers

11. Total

12. Unit

No.

Type

Quantity

Wt./Vol.

1.

**NON REGULATED SOLID
(CONTAMINATED SOIL - VARIOUS LOCATIONS)**

2.

11853300

10.9513. 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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT

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

Brian Everett**Brian Everett****7 5 18**

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

17. Special Handling Instructions

18. Discrepancy Indication Space:

19. Ticket #

1738342

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

7 5

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451754
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC					
Generator's Project Address (if different than mailing address) H. H. Ann CTB 02103088					
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address BUCKLE UP EQUIPMENT 304N25th Ave Greeley, CO					Transporter Phone 711-552-0730
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:
9. Waste Shipping Name, Description, & Profile Number		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON REGULATED SOLID (CONTAMINATED SOIL - VARIOUS LOCATIONS)				12 SLT	
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT					
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 Brian Everett		Signature <i>Brian Everett</i>		Month	Day Year
				7	3 18
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name Lee Bonnell		Signature <i>Lee Bonnell</i>		Month	Day Year
				7	5 18
Transporter 2 Printed/Typed Name		Signature		Month	Day Year
17. Special Handling Instructions					
18. Discrepancy Indication Space:					
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		Signature		Month	Day Year
				7	5 18

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 451753
5. Generator's Name and Mailing Address FOUNDATION ENERGY MANAGEMENT, LLC			Generator's Project Address (if different than mailing address) Huffman CTB CR 88 + 105		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address Buckley / R & F # 15			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 970-686-2000			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 (CONTAMINATED SOIL - VARIOUS LOCATIONS) 11853300				10.947	
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 10414 Customer Name: FOUNDATION ENERGY MANAGEMENT					
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 Brant Everett		Signature <i>[Signature]</i>		Month Day Year 7 5 18	
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name Rafael Garcia		Signature <i>[Signature]</i>		Month Day Year 7 5 18	
Transporter 2 Printed/Typed Name		Signature		Month Day Year	
17. Special Handling Instructions					
18. Discrepancy Indication Space:				19. Ticket # 1738397	
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 7 5 18	