



# NON-HAZARDOUS MANIFEST

<b>NON-HAZARDOUS MANIFEST</b>		1. Generator's US EPA ID No.		Manifest Doc No.		2. Page 1 of		Welf 35 26 23		
3. Generator's Mailing Address: WHITING OIL & GAS - OPERATIONS				Generator's Site Address (If different than mailing): WHITING OIL & GAS - OPERATIONS WELL NAME: WELL #:		A. Manifest Number WMNA		6884962		
4. Generator's Phone 303-268-3708						B. State Generator's ID				
5. Transporter 1 Company Name				6. US EPA ID Number		C. State Transporter's ID				
						D. Transporter's Phone				
7. Transporter 2 Company Name				8. US EPA ID Number		E. State Transporter's ID				
						F. Transporter's Phone				
9. Designated Facility Name and Site Address CONSERVATION SERVICES, INC 41800 E 88TH AVE BENNETT CO 80102 Northwold Ault, CO				10. US EPA ID Number		G. State Facility ID 970-545-5010				
						H. State Facility Phone 303-644-4335				
GENERATOR	11. Description of Waste Materials					12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. NON REGULATED LIQUID - FRAC SAND W/ PRODUCED WATER Solid WM Profile # 12665260 12687600					No.	Type			19.29 T
	b.									
	WM Profile #									
	c.									
WM Profile #										
d.										
WM Profile #										
J. Additional Descriptions for Materials Listed Above ACCT NUMBER: CSI 1570 CUSTOMER: WHITING OIL & GAS - OPERATIONS N 10772					K. Disposal Location					
					Cell		Level			
					Grid					
15. Special Handling Instructions and Additional Information										
Purchase Order # EMERGENCY CONTACT / PHONE NO.: 1-800-424-9300 24HR TOLL FREE										
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.										
Printed Name KYLE WANG					Signature "On behalf of"			Month	Day	Year
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials									
	Printed Name Sergio Acosta				Signature Sergio Acosta			Month	Day	Year
								10	22	19
18. Transporter 2 Acknowledgement of Receipt of Materials										
Printed Name					Signature			Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.									
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.									
	Printed Name				Signature			Month	Day	Year
							10	22	19	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

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3. Generator's Mailing Address: WHITING OIL & GAS - OPERATIONS				Generator's Site Address (if different than mailing): WHITING OIL & GAS - OPERATIONS WELL: AFE:				A. Manifest Number <b>WMNA</b> 8240807			
4. Generator's Phone								B. State Generator's ID			
5. Transporter 1 Company Name				6. US EPA ID Number				C. State Transporter's ID			
								D. Transporter's Phone			
7. Transporter 2 Company Name				8. US EPA ID Number				E. State Transporter's ID			
								F. Transporter's Phone			
9. Designated Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT, CO 80610				10. US EPA ID Number				G. State Facility ID			
								H. State Facility Phone 970-545-5010			
G E N E R A T O R	11. Description of Waste Materials				12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. NON REGULATED SOLID - DRY CRUDE OIL IMPACTED ROCK Produced Water WM Profile # 126946CO - 126876CO				No.	Type					
	b.										
	WM Profile #										
	c.										
	WM Profile #										
d.											
WM Profile #											
J. Additional Descriptions for Materials Listed Above ACCOUNT #: N 10772 WHITING OIL & GAS - OPERATIONS				K. Disposal Location							
				Cell				Level			
				Grid							
15. Special Handling Instructions and Additional Information											
Purchase Order # EMERGENCY CONTACT / PHONE NO.:											
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.											
Printed Name Tom Banks				Signature "On behalf of"				Month 10	Day 18	Year 19	
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials										
	Printed Name Mario Perez				Signature MV				Month	Day	Year
18. Transporter 2 Acknowledgement of Receipt of Materials											
Printed Name				Signature				Month	Day	Year	
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above-listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.										
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.										
	Printed Name Robert L. Carpenter				Signature				Month 10	Day 22	Year 19

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

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