



WATER DISPOSAL TICKET

RN INDUSTRIES

P.O. BOX 1168 • VERNAL, UT 84078

OFFICE: 435-722-2800

423727

DISPOSAL SITES		FOR OFFICE USE ONLY		
<input checked="" type="checkbox"/> PICEANCE	<input type="checkbox"/> GLEN BENCH- NORTH	VOLUME	UNIT PRICE	TOTAL
<input type="checkbox"/> RANGELY	<input type="checkbox"/> GLEN BENCH-SOUTH			
<input type="checkbox"/> ACE	<input type="checkbox"/> CHAPITA	CATEGORY 1 (BBLs)		
<input type="checkbox"/> WONSIT	<input type="checkbox"/> BLUEBELL	<input type="checkbox"/> PRODUCTION WATER <input type="checkbox"/> FLOWBACK <input type="checkbox"/> OTHER		
<input type="checkbox"/> SEEP RIDGE	<input type="checkbox"/> PLEASANT VALLEY	CATEGORY 2 (BBLs)		
DATE	May 9-18	<input type="checkbox"/> FLUSH LOADS <input type="checkbox"/> CELLARS <input type="checkbox"/> CEMENT WATER <input type="checkbox"/> OTHER		
BILL TO COMPANY	Calerus	CATEGORY 3 (BBLs)		
COMPANY MAN	Brett Middleton	<input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS <input type="checkbox"/> DRILLING MUD BBLs <input type="checkbox"/> OTHER		
LOCATION	W. Solid Facility	CATEGORY 4 (SOLIDS IN YARDS)		
TRUCK COMPANY	SB Services	14 yd		
DRIVER	R			
TRUCK #	97			
TRUCK TICKET #	8211	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.



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<input checked="" type="checkbox"/> PICEANCE	<input type="checkbox"/> GLEN BENCH-NORTH	VOLUME	UNIT PRICE	TOTAL
<input type="checkbox"/> RANGELY	<input type="checkbox"/> GLEN BENCH-SOUTH			
<input type="checkbox"/> ACE	<input type="checkbox"/> CHAPITA	CATEGORY 1 (BBLs)		
<input type="checkbox"/> WONSIT	<input type="checkbox"/> BLUEBELL	<input type="checkbox"/> PRODUCTION WATER <input type="checkbox"/> FLOWBACK <input type="checkbox"/> OTHER		
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DATE	May 9-18	<input type="checkbox"/> FLUSH LOADS <input type="checkbox"/> CELLARS <input type="checkbox"/> CEMENT WATER <input type="checkbox"/> OTHER		
BILL TO COMPANY	Caerus	CATEGORY 3 (BBLs)		
COMPANY MAN	Brett Middleton	<input type="checkbox"/> LANDFARM/LAND FILL LIQUIDS <input type="checkbox"/> DRILLING MUD BBLs <input type="checkbox"/> OTHER		
LOCATION	N. solid facility	CATEGORY 4 (SOLIDS IN YARDS)		
TRUCK COMPANY	BB Services	14 yds	<input checked="" type="checkbox"/> SOLIDS (IN YARDS) <input type="checkbox"/> SOIL <input type="checkbox"/> DRILL CUTTINGS <input type="checkbox"/> OTHER	
DRIVER	John McConn		Total:	
TRUCK #	43			
TRUCK TICKET #	8212			

IF OTHER PLEASE SPECIFY: _____

COMMENTS: _____

DRIVER SIGNATURE: John McConn

CUSTOMER SIGNATURE: _____

AFE/WO# _____
 USER# _____
 CODE# _____

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PICEANCE BASIN

NON-HAZARDOUS WASTE MANIFEST

MANIFEST # -

20180508-NSF-01

General Procedures (Safety / Environmental Concerns Assessment) - TO BE CONDUCTED BEFORE THE TRUCK DEPARTS

PRINT CLEARLY AND PLEASE FILL OUT THIS FORM COMPLETELY. THIS INFORMATION IS USED FOR WASTE TRACKING AND TO FORWARD BILLING INFORMATION.

1. Are there free liquids? NO - Move to 2. YES - Do not transport, contact Brett Middleton - 970-987-4650.
 2. Make sure all side-cast from loading is removed from the vehicle / trailer before transport. Place the material in the trailer or back into the stockpile.
 3. Insure that the load is securely covered
- DO NOT TRANSPORT THIS MATERIAL IF FREE LIQUIDS ARE PRESENT OR IF THE MATERIAL HAS THE ABILITY TO SHIFT

Mandatory Information - TO BE COMPLETED BY AUTHORIZED AGENT

Generator	Generator:	Caerus Oil & Gas 143 Diamond Ave Parachute, CO 81635	Name of Authorized Agent:	Brett Middleton
			Contact information:	(970) 987-4650
	Waste Origin (Location):	North Solids Facility	Estimated Quantity of Waste (yds ³):	18 cubic yards
	Waste Type:	<input checked="" type="checkbox"/> DAF Waste / Tank bottoms <input type="checkbox"/> Pit Bottoms <input checked="" type="checkbox"/> Contaminated Soil <input type="checkbox"/> Flowback <input type="checkbox"/> other		
	Operation:	<input type="checkbox"/> Drilling <input checked="" type="checkbox"/> Production <input type="checkbox"/> Completions <input type="checkbox"/> Gathering <input type="checkbox"/> Construction <input type="checkbox"/> Other: Solidified Material		
Description of Waste: E & P solidified soil				
I hereby certify that the above-described materials are not hazardous wastes as defined by 40 CFR Part 261 or by any applicable state law. I further certify that these wastes have been fully and accurately described, and classified.				
Printed Name:		Signature:		Date:
Brett Middleton				5/8/2018

Acknowledgement of receipt of materials - TO BE CONDUCTED BEFORE THE TRUCK DEPARTS

Transporter	Transport Company:	Transport Container Type:	Side Dump <input checked="" type="checkbox"/>	
	BB Service	Truck Number:	47	
		Truck Number:	507	
	Emergency Notification:			
			Colorado State Highway Patrol:	870-284-6601
		Encanto Environmental Group:	970-219-9173	
		Encanto Safety Group:	970-219-8755	
I certify that the materials as described in the generator section were received by me for shipment in proper condition for transportation according to applicable local, state, and federal regulations, to the facility below:				
Printed Name:		Signature:		
John McCann David Cannon				
		Date:		
		May 9-18		

Waste Information:

Disposal Facility	Facility Name / Address:	Type of Disposal	
	RNI Piceance Creek Landfarm County Rd 142 Meeker, CO 81641	<input checked="" type="checkbox"/> Landfarm	<input type="checkbox"/> Injection
	Discrepancy comments:	<input type="checkbox"/> Landfill	<input type="checkbox"/> Other:
	I certify that the received materials match the description above and are suitable for disposal at the facility presented above		
	Printed Name:	Signature:	Date:
Christopher L. Cordova		5/9/18	

Please return this manifest to the authorized agent provided in the generator section at the top on this form.

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