

ACME Oilfield Services, LLC

PO BOX 200119
Evans, CO 80620
(970) 347-9694
office@acmeoilfield.com



INVOICE

BILL TO
Great Western Operating Company
4093 Specialty Place, Unit B
Longmont, CO 80504

Date: 12/27/2020
Cost Center: AL1240
Coding: 8000/412
Authorized By: <i>Dustin Smith</i>

INVOICE 4434
DATE 12/14/2020

COMPANY MAN LEASE AND WELL
DUSTIN SMITH SCHAFFER 2536-1-4 HC

SERVICE DATE	UNIT TYPE	QUANTITY	DESCRIPTION	RATE	AMOUNT
12/09/2020	HYDROVAC	6:00	12:00PM- 6:00PM UNIT 133- CLEAN UP SEPERATOR OIL SPILL; HAULED CONTENTS FOR DISPOSAL. DT: 00033832 MANIFEST: 1071	170.00	1,020.00
	Disposable Suits	2:00	COST PER SUIT	25.00	50.00
	Fresh Water- HydroVacs	50	COST PER BBL	1.00	50.00
	Disposal	1,888.32	COST PER GALLON	0.50	944.16

BALANCE DUE \$2,064.16



**** Duplicate Ticket ****

SITE		TICKET		GRID		WEIGHMASTER	
01		33832		0		KDILL	
DATE IN		DATE OUT		TIME IN		TIME OUT	
12/09/20		12/09/20		18:09		18:09	
VEHICLE				ROLL OFF			
ACME 133							
REFERENCE				ORIGIN			
EPL03485				MANIFEST #ACME 1071			

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	FEE	TOTAL
44.96	BBL	Exempt Prod Liquid				

NET AMOUNT
TENDERED
CHANGE
CHECK NO.

SIGNATURE: _____

NON-HAZARDOUS WASTE MANIFEST		Generator's EPA ID No.	Profile No.	Page 1 of 1	PAWNEE WASTE LLC	
Generator's Name and Mailing Address:	ACME Oilfield Services 4301 Valmont St			Manifest No.: ACME: 01071		
	#REF!					
	Designated Facility Name and Site Address:		Weld County USR No.:	Facility Phone No.:		
	Pawnee Waste 47368 County Rd 118 Grover, CO 80729		USR15-0048	(970) 889-0006		
	Well or Site Name:		Truck/Haul Container		Total Quantity	Unit/Wt/Vol
	SCHAEFFER 2536-1-4HC					
AFE#/Reference#:		No.:	Type:			
Lat/Long:		ACME 133	HVAC	44.96	BBLS	
Great Western						
Waste Name/Waste Type:						
Exploration or Production Liquid or Solid Circle Exploration or Production as well as Liquid or Solid						
Special Handling Instructions						
Cont. Soil.						
Generator's Certification: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste						
Printed/Typed Name:		Signature:		Date:		
Pecho Medrano		Pecho E Medrano		12-9-2020		
Transporter Acknowledgement of Receipt of Materials						
Transporter Company Name:		US EPA ID No.:		Transporter's Phone No.:		
ACME						
Printed/Typed Name:		Signature:		Date:		
				12.9.20		
Bill To Company Name: (if invoicing is other than the Generator Company listed above)						
ACME Oilfield Services						
Discrepancy Indication Space:						
Waste Load Rejection Reason: (complete and attach waste rejection form to facility manifest copy)						
Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted above:						
Printed/Typed Name:		Signature:		Date:		
Kendra Dill		Kendra Dill		12.9.20		

Brand X Hydrovac Services Inc.

Remit To

TCI Business Capital

PO Box 9149

Minneapolis, MN 55480-9149

Invoice

Date	Invoice #
1/12/2021	22119

Bill To
Great Western Operating Company, LLC 1001 17th Street, Suite 2000 Denver, CO 80202

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
4.5	Hydrovac Service #132	180.00	810.00
	Pothole		
1	Fresh Water	75.00	75.00
1	Disposal Fee	2,343.00	2,343.00
	Shaffler Pad		
<p>NOTICE OF ASSIGNMENT All of the Accounts Receivable of the above firm have been sold and assigned to TCI Business Capital, a division of Fidelity Bank. This is an irrevocable directive and fulfills our requirements under Article 9 of the Uniform Commercial Code. If there are any disputes, shortages, or discrepancies of any kind call TCI immediately at 1-800-881-9589. FORWARD ALL PAYMENTS TO: TCI Business Capital PO Box 9149 Minneapolis, MN 55480-9149</p>			
		Total	\$3,228.00

P.O. Box 1199
Silt, CO 81652

DAILY TRIP REPORT 22119

DATE: 1-4/2021 UNIT #: 132
COMPANY'S NAME: Greathorn OPERATOR'S AREA: _____ A.F.E. #: _____
COMPANY'S ADDRESS: _____ OPERATOR'S NAME: Juan/manuel JOB #: _____
P.O. #: _____
JOBSITE LOCATION: Shafter P40 P.O. #: _____

[illegible]

Payment terms are net 30 days, any unpaid balances are subject to: a 10% late fee, maximum interest allowed by law, collection fees and any and all court costs and legal fees.

APPROVED _____
(Client Representative) SIGNATURE

Is a Safety Incident Report
required for this job? Y N

CONTACT NAME _____
(Client Representative) PLEASE PRINT CONTACT PHONE NUMBER _____

SUB TOTAL	3228
SALES TAX	3228 ⁰⁰
TOTAL	3228

PLEASE PAY FROM INVOICE TO FOLLOW

TOWER LANDFILL 303-371-5115
8480 Tower Road Commerce City, CO 80022

CUSTOMER

990021
BRAND X HYDROVAC SERVICES, INC.
PO BOX 1199
SILT, CO 81652

Contract:5126162933

Generator:GREAT WESTERN OIL AND GAS COMPANY

SITE	TICKET #	CELL
VE	1752024	
WEIGHMASTER		
DATE/TIME IN	David C.	DATE/TIME OUT
VEHICLE	1/4/21 4:18 pm	CONTAINER 1/4/21 5:33 pm
REFERENCE	162933	
BILL OF LADING	6286808-132	

SCALE IN GROSS WEIGHT 88,800 NET TONS 18.38
SCALE OUT TARE WEIGHT 52,040 NET WEIGHT 36,760

Truck ! 22119

INBOUND
INVOICE

QTY	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
4084.00	GL	Tracking QTY				
4084.00	gl	E&P-LIQUIDS				
1.00		ENVIRONMENTAL FEE 1	\$0.47	\$1,919.48	\$0.00	\$1,919.48
1.00		FUEL RECOVERY FEE	\$18.00	\$18.00	\$0.00	\$18.00
			5.20%	\$99.81	\$0.00	\$99.81

Signature

Thank you for your business!

Payment (s)

2343

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

S-F042UPR (07/12)

SIGNATURE

NET AMOUNT
\$2,027.29
TENDERED
CHANGE
\$0.00
CHECK#



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.	Manifest Doc No.	2. Page 1 of
3. Generator's Mailing Address: GREAT WESTERN OIL & GAS 4093 SPECIALTY PL LONGMONT, CO 80504		Generator's Site Address (If different than mailing): GREAT WESTERN OIL & GAS WELL NAME: <i>Schaefer Pad</i> AFE/WELL #: <i>2536-1-4HC</i>		A. Manifest Number WMNA 8237189
4. Generator's Phone 970-685-9619		B. State Generator's ID		
5. Transporter 1 Company Name <i>NORCO Transport</i>		6. US EPA ID Number		C. State Transporter's ID
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 720-425-1783
9. Designated Facility Name and Site Address BUFFALO RIDGE LANDFILL 11655 WCR 59 KEENESBURG, CO 80643		10. US EPA ID Number		E. State Transporter's ID
				F. Transporter's Phone
				G. State Facility ID
				H. State Facility Phone 303-732-0218
11. Description of Waste Materials		12. Containers		13. Total Quantity
		No.	Type	
a. NON REGULATED LIQUID - HYDROCARBON IMPACTED SOIL				14. Unit Wt./Vol.
WM Profile # 112504CO				
b.				I. Misc. Comments
WM Profile #				
c.				
WM Profile #				
d.				
WM Profile #				
J. Additional Descriptions for Materials Listed Above ACCOUNT: BR 279 GREAT WESTERN OIL & GAS		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 <i>Dusty Smith</i>		Signature "On behalf of" <i>GREAT WESTERN</i>		Month Day Year 1 06 21
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name <i>Carlos B</i>		Signature <i>[Signature]</i>
				Month Day Year 1 06 21
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature
				Month Day Year
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 <i>Sonya Haddock</i>		Signature <i>[Signature]</i>		Month Day Year 1 06 21

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY



NON-HAZARDOUS MANIFEST

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4. Generator's Phone 970-685-9619		B. State Generator's ID				
5. Transporter 1 Company Name <i>NORCO #6</i>		6. US EPA ID Number		C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 720-425-1783		
9. Designated Facility Name and Site Address BUFFALO RIDGE LANDFILL 11655 WCR 59 KEENESBURG, CO 80643		10. US EPA ID Number		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility ID		
				H. State Facility Phone 303-732-0218		
11. Description of Waste Materials		12. Containers		13. Total Quantity		
		No. Type		14. Unit Wt./Vol.		
a. NON REGULATED LIQUID - HYDROCARBON IMPACTED SOIL		1846				
WM Profile # 112504CO						
b.						
WM Profile #						
c.						
WM Profile #						
d.						
WM Profile #						
J. Additional Descriptions for Materials Listed Above ACCOUNT: BR 279 GREAT WESTERN OIL & GAS		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 <i>Dusty Smith</i>		Signature "On behalf of" <i>GREAT WESTERN</i>		Month Day Year 1 06 26		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed Name		Signature		Month Day Year		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed Name <i>Mario A Fuentes</i>		Signature <i>MA Fuentes</i>		Month Day Year 07 06 21		
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 <i>Sonyal Adooce</i>		Signature <i>SA</i>		Month Day Year 1 6 21		

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



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4. Generator's Phone 970-685-9619		B. State Generator's ID																																			
5. Transporter 1 Company Name <i>NORCO Trans</i> #5		6. US EPA ID Number		C. State Transporter's ID																																	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 720-425-1783																																	
9. Designated Facility Name and Site Address BUFFALO RIDGE LANDFILL 11655 WCR 59 KEENESBURG, CO 80643		10. US EPA ID Number		E. State Transporter's ID																																	
				F. Transporter's Phone																																	
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				H. State Facility Phone 303-732-0218																																	
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17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name <i>Carlos B</i>		Signature <i>[Signature]</i>																																	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature																																	
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 <i>A Conner</i>																																			
		Signature <i>[Signature]</i>		Month Day Year <i>1 6 21</i>																																	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.		Manifest Doc No.		2. Page 1 of	
3. Generator's Mailing Address: GREAT WESTERN OIL & GAS 4093 SPECIALTY PL LONGMONT, CO 80504		Generator's Site Address (if different than mailing): GREAT WESTERN OIL & GAS WELL NAME: <u>Schaefer</u> AFE/WELL #: <u>2536-1-4HC</u>		A. Manifest Number WMNA		8237186	
4. Generator's Phone 970-685-9619		B. State Generator's ID		C. State Transporter's ID		D. Transporter's Phone 720-425-1783	
5. Transporter 1 Company Name <u>AZ Transport #4</u>		6. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility ID		H. State Facility Phone 303-732-0218	
9. Designated Facility Name and Site Address BUFFALO RIDGE LANDFILL 11655 WCR 59 KEENESBURG, CO 80643		10. US EPA ID Number		I. Misc. Comments			
11. Description of Waste Materials		12. Containers		13. Total Quantity		14. Unit Wt./Vol.	
a. NON REGULATED LIQUID - HYDROCARBON IMPACTED SOIL WM Profile # 112504CO		No. Type					
b. WM Profile #							
c. WM Profile #							
d. WM Profile #							
J. Additional Descriptions for Materials Listed Above ACCOUNT: BR 279 GREAT WESTERN OIL & GAS		K. Disposal Location		Cell		Level	
15. Special Handling Instructions and Additional Information		Grid					
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 <u>Dusty Smith</u>		Signature "On behalf of" <u>GREAT WESTERN</u>		Month Day Year 1 7 21	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name <u>Alex Hernandez</u>		Signature <u>Alex Hernandez</u>		Month Day Year 1 7 21	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month Day Year	
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 <u>Sony Reddick</u>		Signature <u>SR</u>	
				Month Day Year 1 7 21			

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



INVOICE

Customer ID:**11-01707-63008**

Customer Name:

GREAT WESTERN OIL AND GAS LLC

Service Period:

01/01/21-01/31/21

Invoice Date:

02/01/2021

Invoice Number:

0012185-2516-8

How To Contact Us

Visit wm.com to sign up for paperless billing or pay your invoices.

Visit wmsolutions.com to manage your waste streams and access additional disposal documentation.



Customer Service:
(720) 977-2102

Your Payment Is Due**03/17/2021**

If full payment of the invoiced amount is not received within your contractual terms, you may be charged a monthly late charge of 2.5% of the unpaid amount, with a minimum monthly charge of \$5, or such late charge allowed under applicable law, regulation or contract.

Your Total Due**\$1,860.70****Previous Balance**

2,590.89

+

Payments

(2,590.89)

+

Adjustments

0.00

+

Current Invoice Charges

1,860.70

=

Total Account Balance Due**1,860.70****DETAILS OF SERVICE****Details for Service Location:**

Great Western Oil And Gas LLC, 1700 Broadway 650, Denver CO
80290-1723

Customer ID: 11-01707-63008

Description	Date	Ticket	Quantity	Unit of Measure	Rate	Amount
Vehicle#: 5	01/06/21	1115516				0.00
PO#:Schaefer Pad2636-1-4						0.00
Cont. Soil - Petroleum			26.13	TON	21.00	548.73
Haz-Substance Response Fee Cont. Soil						7.06
Profile # 112504CO						0.00
Generator GREAT WESTERN OIL AND GAS						0.00
Manifest#: 8237189						0.00
Ticket Total						555.79
Vehicle#: 6	01/06/21	1115539				0.00
PO#:SCHAEFER 2536-1-4						0.00



----- Please detach and send the lower portion with payment ----- (no cash or staples) -----



WASTE MANAGEMENT OF COLORADO, INC.
BUFFALO RIDGE LANDFILL
PO BOX 43350
PHOENIX, AZ 85080
(720) 977-2102
(970) 686-2800 TICKET COPIES

Invoice Date	Invoice Number	Customer ID (Include with your payment)
02/01/2021	0012185-2516-8	11-01707-63008
Payment Terms	Total Due	Amount
Total Due by 03/17/2021	\$1,860.70	

2516000110170763008000121850000018607000000186070 7

10306189

GREAT WESTERN OIL AND GAS LLC
7780 E 96TH AVE
KRIS MARTINEZ
COMMERCE CITY CO 80640-8534

Remit To: WM CORPORATE SERVICES, INC.
AS PAYMENT AGENT
PO BOX 7400
PASADENA, CA 91109-7400

THINK GREEN.®

DETAILS OF SERVICE - continued

Details for Service Location:

Great Western Oil And Gas LLC, 1700 Broadway 650, Denver CO
80290-1723

Customer ID: 11-01707-63008

Description	Date	Ticket	Quantity	Unit of Measure	Rate	Amount
Cont. Soil - Petroleum			23.98	TON	21.00	503.58
Haz-Substance Response Fee Cont. Soil						6.47
Profile # 112504CO						0.00
Generator GREAT WESTERN OIL AND GAS						0.00
Manifest#: 8237188						0.00
Ticket Total						510.05
Vehicle#: 5	01/06/21	1115568				0.00

5 EASY WAYS TO PAY



Automatic Payment

Set up recurring payments with us at
wm.com/myaccount.



Pay Through Your Financial Institution

Make a payment from your financial institution using
your Customer ID.



One-Time Payment

At your desk or on the go, use wm.com or our WM
mobile app for a quick and easy payment.



Pay by Phone

Payable 24/7 using our automated system at
866-964-2729.



Mail it

Write it, stuff it, stamp it, mail it. Envelope provided.

HOW TO READ YOUR INVOICE

</

1

States the date payment is due to Waste Management. Anything beyond that date may incur additional charges. Your **Total Due** is the total amount of current charges and any previous unpaid balances combined.

2

Previous balance is the total due from your previous invoice. We subtract any **Payments Received/Adjustments** and add your **Current Charges** from this billing cycle to get a **Total Due** on this invoice. If you have not paid all or a portion of your previous balance, please pay the entire **Total Due** to avoid a late charge or service interruption.

3

Service location details the total current charges of this invoice.



Automatic Payments

Don't worry about missing bills or payments. With AutoPay, you can set it once and let us do the rest.

Get started by visiting wm.com/autopay

If your service is suspended for non-payment, you may be charged a Resume charge to restart your service. For each returned check, a charge will be assessed on your next invoice equal to the maximum amount permitted by applicable state law.

CHECK HERE TO CHANGE CONTACT INFO

List your new billing information below. For a change of service address, please contact Waste Management.

Address 1	
Address 2	
City	
State	
Zip	
Email	
Date Valid	

CHECK HERE TO SIGN UP FOR AUTOMATIC PAYMENT ENROLLMENT

If I enroll in Automatic Payment services, I authorize Waste Management to pay my invoice by electronically deducting money from my bank account. I can cancel authorization by notifying Waste Management at wm.com or by calling the customer service number listed on my invoice. Your enrollment could take 1-2 billing cycles for Automatic Payments to take effect. Continue to submit payment until page one of your invoice reflects that your payment will be deducted.

Email Address	
Date	
Bank Account Holder Signature	

NOTICE: By sending your check, you are authorizing the Company to use information on your check to make a one-time electronic debit to your account at the financial institution indicated on your check. The electronic debit will be for the amount of your check and may occur as soon as the same day we receive your check.

In order for us to service your account or to collect any amounts you may owe (for non-marketing or solicitation purposes), we may contact you by telephone at any telephone number that you provided in connection with your account, including wireless telephone numbers, which could result in charges to you. Methods of contact may include text messages and using pre-recorded/artificial voice messages and/or use of an automatic dialing device, as applicable. We may also contact you by email or other methods as provided in our contract.

Please send all bankruptcy correspondence to RMCbankruptcy@wm.com or PO Box 43290 Phoenix, AZ 85080. Using the email option will expedite your request. (this language is in compliance with 11 USC 342(c)(2) of the Bankruptcy Code)

Customer ID:

11-01707-63008

Customer Name:

GREAT WESTERN OIL AND GAS LLC

Service Period:

01/01/21-01/31/21

Invoice Date:

02/01/2021

Invoice Number:

0012185-2516-8

DETAILS OF SERVICE - continued

Details for Service Location:				Customer ID: 11-01707-63008		
Great Western Oil And Gas Llc, 1700 Broadway 650, Denver CO 80290-1723						
Description	Date	Ticket	Quantity	Unit of Measure	Rate	Amount
Cont. Soil - Petroleum	01/07/21	1115641	27.34	TON	21.00	574.14
Haz-Substance Response Fee Cont. Soil					7.38	
Profile # 112504CO					0.00	
Generator GREAT WESTERN OIL AND GAS					0.00	
Manifest#: 8237187					0.00	
Ticket Total					581.52	
Vehicle#: 4					0.00	
Cont. Soil - Petroleum					10.03	TON
Haz-Substance Response Fee Cont. Soil						2.71
Profile # 112504CO						0.00
Generator GREAT WESTERN OIL AND GAS						0.00
Manifest#: 8237186						0.00
Ticket Total						213.34
Total Current Charges						1,860.70