

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N / A	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Waste Tracking Number 107495	
5. Generator's Name and Mailing Address BILL BARRETT CORP			Generator's Site Address (if different than mailing address) Dutch Lake 16-24			
Generator's Phone: (970) 353-0407			1622			
6. Transporter 1 Company Name Elite OFS			U.S. EPA ID Number 1622			
7. Transporter 2 Company Name Anthony Howland			U.S. EPA ID Number 1622			
8. Designated Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT CO 80610			U.S. EPA ID Number			
Facility's Phone: (970) 686-2800						
GENERATOR	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	1. NON REGULATED SOLID (E&P EXEMPT SOLIDS) 11577700				1103	
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information Customer Acct #: N 10435 Customer Name: BILL BARRETT CORP Transporter 1 address & phone #:						
14. GENERATOR'S/OFFEROR'S 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 transport according to applicable international and governmental regulations.						
Generator's/Offor's Printed/Typed Name Michael K. Schaeferman			Signature <i>[Signature]</i>		Month 11	Day 21
Year 14						
INT'L	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____					
	Transporter Signature (for exports only): _____ Date leaving U.S.: _____					
TRANSPORTER	16. Transporter Acknowledgement of Receipt of Materials					
	Transporter 1 Printed/Typed Name Elite OFS			Signature <i>[Signature]</i>		Month 11
Year 14			Transporter 2 Printed/Typed Name Anthony Howland		Signature <i>[Signature]</i>	
Month 11			Day 20		Year 14	
DESIGNATED FACILITY	17. Discrepancy					
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number: _____					
	17b. Alternate Facility (or Generator) U.S. EPA ID Number					
Facility's Phone: _____						
17c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____						
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name [Signature]			Signature <i>[Signature]</i>		Month 11	Day 21
Year 14						

Dutch Lake 16-24

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N / A	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Waste Tracking Number 107496
5. Generator's Name and Mailing Address BILL BARRETT CORP			Generator's Site Address (if different than mailing address)		
Generator's Phone: (970) 353-0407					
6. Transporter 1 Company Name Elite OFS Lander CO LCRS				U.S. EPA ID Number 6-2414-62	
7. Transporter 2 Company Name Huthorn Howland				U.S. EPA ID Number 6-2414-62	
8. Designated Facility Name and Site Address NORTH WELD LANDFILL 40000 WELD COUNTY ROAD 25 AULT CO 80610				U.S. EPA ID Number	
Facility's Phone: (970) 686-2800					
GENERATOR	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity
			No.	Type	12. Unit Wt./Vol.
	1. NON REGULATED SOLID (E&P EXEMPT SOLIDS) 115777CO				14.64 Ln
	2.				
	3.				
4.					
13. Special Handling Instructions and Additional Information					
Customer Acct #: N 10435 Customer Name: BILL BARRETT CORP					
Transporter 1 address & phone #:					
14. GENERATOR'S/OFFEROR'S 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 transport according to applicable international and governmental regulations.					
Generator's/Offoror's Printed/Typed Name Huthorn Howland		Signature <i>[Signature]</i>		Month Day Year 11 26 14	
INT'L	15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____				
	Transporter Signature (for exports only): _____ Date leaving U.S.: _____				
TRANSPORTER	16. Transporter Acknowledgement of Receipt of Materials				
	Transporter 1 Printed/Typed Name Elite OFS		Signature <i>[Signature]</i>		Month Day Year 11 26 14
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name Huthorn Howland		Signature <i>[Signature]</i>		Month Day Year 11 26 14
	17. Discrepancy				
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
Manifest Reference Number: _____					
17b. Alternate Facility (or Generator)				U.S. EPA ID Number	
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)				Month Day Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name Robert Laine		Signature <i>[Signature]</i>		Month Day Year 11 26 14	