






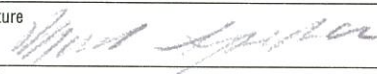
NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number W1A	2. Page 1 of 1	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 363652
5. Generator's Name and Mailing Address <i>High Plains Disposal</i>			Generator's Project Address (if different than mailing address) <i>17754 W R 32 Montevideo CO 80651</i>		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address <i>AW Inter</i>			Transporter Phone <i>303 659-6523</i>		
7. Transporter 2: Complete Company Name and Address			Transporter Phone		
8. Designated Disposal Facility Name and Site Address <i>Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102</i>			Facility's Phone: <i>(303) 644-4335</i>		
9. Waste Shipping Name, Description, & Profile Number		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON REGULATED SOLID (TANK BOTTOMS) <i>10824200</i>			<i>1 Truck</i>	<i>1680</i>	<i>gal</i>
2.					<i>NONE</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: <i>Customer Acct #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL</i>					
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
<i>Travis Sellmer</i>		<i>Travis Sellmer</i>		<i>10</i>	<i>30 17</i>
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name		Signature		Month	Day Year
<i>X MANUEL MIERA</i>		<i>[Signature]</i>		<i>10</i>	<i>30 17</i>
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 _____ 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
<i>I</i>		<i>[Signature]</i>			

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 441210	
5. Generator's Name and Mailing Address High Plain Disposal			Generator's Project Address (if different than mailing address) 17754 WCR 32 Platteville CO 80651			
Generator's Phone:			Transporter Phone			
6. Transporter 1: Complete Company Name and Address Northern Plains Trucking			303 659-9206			
7. Transporter 2: Complete Company Name and Address			Transporter Phone			
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102			Facility's Phone: (303) 644-4335			
9. Waste Shipping Name, Description, & Profile Number			10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
1. NON REGULATED SOLID (TANK BOTTOMS) 10824200			1 Truck		10 yard	NONE
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL						
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 Travis Sellmer			Signature <i>Travis Sellmer</i>		Month 10	Day 30
					Year 17	
16. Transporter Acknowledgement of Receipt of Materials						
Transporter 1 Printed/Typed Name			Signature		Month	Day
Transporter 2 Printed/Typed Name			Signature		Month	Day
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

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 441212		
5. Generator's Name and Mailing Address High Plain Disposal			Generator's Project Address (if different than mailing address) 17754 WCR 32 Platteville CO 80651				
Generator's Phone:							
6. Transporter 1: Complete Company Name and Address North Plains Trucking			Transporter Phone 303 659-9206				
7. Transporter 2: Complete Company Name and Address			Transporter Phone				
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102			Facility's Phone: (303) 644-4335				
9. Waste Shipping Name, Description, & Profile Number			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
			No.	Type			
1. NON REGULATED SOLID (TANK BOTTOMS) 10824200			1	TANK	10	yard	NONE
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL							
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 Trevin Sellmer			Signature 			Month Day Year 10 30 17	
16. Transporter Acknowledgement of Receipt of Materials							
Transporter 1 Printed/Typed Name X Marking Services			Signature 			Month Day Year 10 30 17	
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 N/A	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 441213		
5. Generator's Name and Mailing Address High Plains Disposal				Generator's Project Address (if different than mailing address) 17754 WCR 32 Pk Hwy 11 CO 80651			
Generator's Phone:				Transporter Phone 303 659-9206			
6. Transporter 1: Complete Company Name and Address Northern Plains Trucking				Transporter Phone			
7. Transporter 2: Complete Company Name and Address				Transporter Phone			
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102				Facility's Phone: (303) 644-4335			
9. Waste Shipping Name, Description, & Profile Number				10. Containers		11. Total Quantity	12. Unit Wt./Vol.
				No.	Type		
1. NON REGULATED SOLID (TANK BOTTOMS) 10824200				1 Truck		6	Yards
2.							NONE
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL							
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 Travis Sellmer				Signature 		Month Day Year 10 30 17	
16. Transporter Acknowledgement of Receipt of Materials							
Transporter 1 Printed/Typed Name X Mark Sparker				Signature 		Month Day Year 10 30 17	
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 N/A	2. Page 1 of 1	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 363647	
5. Generator's Name and Mailing Address High plains Disposal			Generator's Project Address (if different than mailing address) 17754 WCR 32 Plattville CO 80657			
Generator's Phone:						
6. Transporter 1: Complete Company Name and Address Northern Plains Trucking			Transporter Phone 303 654-9206			
7. Transporter 2: Complete Company Name and Address			Transporter Phone			
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41900 East 88th Avenue Bennett CO 80102			Facility's Phone: (303) 644-4335			
9. Waste Shipping Name, Description, & Profile Number			10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
1. NON REGULATED SOLID (TANK BOTTOMS) 10824200			1	Truck	10	Yards
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL						
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
Travis Sellmer			Travis Sellmer		10	30 17
16. Transporter Acknowledgement of Receipt of Materials						
Transporter 1 Printed/Typed Name			Signature		Month	Day Year
Mike Speaker			Mike Speaker		10	30 17
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 N / A	2. Page 1 of 1	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 441211		
5. Generator's Name and Mailing Address High plains Disposal				Generator's Project Address (if different than mailing address) 1734 WCR 32 Platteville CO 80651			
Generator's Phone: _____							
6. Transporter 1: Complete Company Name and Address Northern plains Trucking						Transporter Phone 303 659 9206	
7. Transporter 2: Complete Company Name and Address						Transporter Phone	
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102						Facility's Phone: (303) 644-4335	
9. Waste Shipping Name, Description, & Profile Number				10. Containers		11. Total Quantity	12. Unit Wt./Vol.
				No.	Type		
1. NON REGULATED SOLID (TANK BOTTOMS)				10824200	1 Truck	10 yards	NONE
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL							
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 Travis Sellmer				Signature 		Month Day Year 10 30 17	
16. Transporter Acknowledgement of Receipt of Materials							
Transporter 1 Printed/Typed Name Magic Sparker				Signature 		Month Day Year 10 30 17	
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 N/A	2. Page 1 of	3. Emergency Response Phone 800-424-9300	4. Waste Tracking Number 363651
5. Generator's Name and Mailing Address High Plains Disposal			Generator's Project Address (if different than mailing address) 17754 WCR 32 Platteville CO 80651		
Generator's Phone:					
6. Transporter 1: Complete Company Name and Address Northern Plains Trucking				Transporter Phone 303 654 9206	
7. Transporter 2: Complete Company Name and Address				Transporter Phone	
8. Designated Disposal Facility Name and Site Address Conservation Services, Inc 41800 East 88th Avenue Bennett CO 80102				Facility's Phone: (303) 644- 4335	
9. Waste Shipping Name, Description, & Profile Number			10. Containers		11. Total Quantity
			No.	Type	
1. NON REGULATED SOLID (TANK BOTTOMS) 10824200			1	Truck	8
2.					Yards
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 #: CSI 1353 Customer Name: HIGH PLAINS DISPOSAL					
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 Travis Sellmer		Signature <i>[Signature]</i>		Month 10	Day 27
				Year 17	
16. Transporter Acknowledgement of Receipt of Materials					
Transporter 1 Printed/Typed Name X Magic Sparker		Signature <i>[Signature]</i>		Month 10	Day 27
				Year 17	
Transporter 2 Printed/Typed Name		Signature		Month	Day
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