

ATTACHMENT C

Manifest

Please print or type.
Form designed for use on file (12 inch typewriter)

NON-HAZARDOUS WASTE MANIFEST		WM 222,055		271607	
1. Generator's Name and Project Location CREDC Petroleum Corp Tranche #1 - Approx 20 miles SW of Brush, Co		2. Bill to: Western Clear. Up. BR 25		3a. Generator's Phone 303-297-2200	
3. Transporter 1 Company Name Western Cleanup Corporation		3a. Transporter's Phone 970-847-9507		4. Transporter 2 Company Name	
5. Designated Management Facility Name and Site Address Buffalo Ridge Landfill 11655 WCR 59 Keensburg, CO 80643		5a. Facility's Phone (303)732-0218		6. Waste Code/Profile #	
Waste Description CRUDE OIL Contaminated Plastic / Debris		Quantity 16		Units CY	
IF ASBESTOS WASTE (Please check the appropriate box)					
Waste Code/Profile #		Waste Description		Quantity	
		Friable <input type="checkbox"/> Nonfriable Asbestos <input type="checkbox"/>			
7. 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 hr. toll free phone number			
8. Contractor/Generator Certification: I hereby certify that the above described waste is not a hazardous waste as defined by federal, state or local regulations and does not contain regulated quantities of PCB's or radioactive materials. This waste has been accurately classified, described, packaged, marked and labeled and is in proper condition for transportation according to applicable international and governmental regulations.					
9. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Month Day Year 5 26 06	
10. Transporter 2 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Month Day Year 5 26 06	
11. Discrepancy Indication Space		12. Ticket # 27415			
13. Management Method/Location <input checked="" type="checkbox"/> Solidification <input type="checkbox"/> Monofill <input type="checkbox"/> Landfill <input type="checkbox"/> Bio-Beds Grid Location (if applicable):					
14. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 11.					
Printed/Typed Name Jeff Austin		Signature <i>[Signature]</i>		Month Day Year 5 26 06	

TRANSPORTER COPY