

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 024512050 JJK			
	5. Generator's Name and Mailing Address Evergreen Natural Resources LLC. 27000 HWY 12		Generator's Site Address (if different than mailing address) Stephen 41-22 well site				
6. Transporter 1 Company Name		U.S. EPA ID Number					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address		U.S. EPA ID Number					
Facility's Phone:							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	1.						
	2.						
	3.						
4.							
14. Special Handling Instructions and Additional Information Removed 2 yards of sand with vac truck hauled to ENR containment at burro Canyon Compressor Station / Removed 3 yards oil dirt							
15. 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 national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name Jeremiah J. Valdez		Signature <i>Jeremiah J. Valdez</i>		Month 4	Day 10	Year 23	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit		Date leaving U.S.:		
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name Wyatt Torres		Signature <i>Wyatt Torres</i>		Month 4	Day 10	Year 23
	Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy						
	18a. 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						
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
	Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	