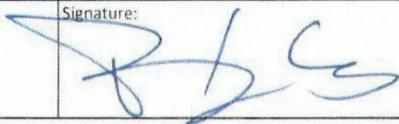
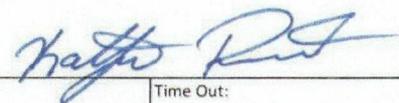


|   |  |  |  |                                       |                            |
|---|--|--|--|---------------------------------------|----------------------------|
| <b>NON-HAZARDOUS WASTE MANIFEST</b>   |  | Waste Profile No.<br><b>EPS0510221</b>   |  | <b>PAWNEE WASTE LLC</b>               |                            |
| Generator's Name and Mailing Address:<br><b>WELLINGTON OPERATING CO.<br/>1590 EAST CITY RD 70<br/>WELLINGTON, CO. 80549</b>   |  |  | Manifest No.:<br><b>No 191405</b>  |                                       |                            |
| Bill To Company Name: (if other than the Generator):<br><del>WELLINGTON OPERATING CO<br/>1590 EAST COUNTY ROAD 70<br/>WELLINGTON, CO 80549</del><br><b>AP WELLINGTON OPERATING CO<br/>15301 DALLAS PKWY #900<br/>ADDISON TX 75001</b> |  |  | Facility Phone No.:<br><b>(970) 889-0006</b>   |                                       |                            |
| Designated Facility Name and Site Address:<br><b>Pawnee Waste<br/>47368 County Rd 118<br/>Grover, CO 80729</b>  |  | Weld County USR No.<br><b>1MJUSR20-15-0048</b>   |  | Truck/Haul Container No.:<br><b>2</b> | Type:<br><b>Belly Dump</b> |
| Well or Site Name and AFE#/PO?Reference#:<br><b>WELL 20-3; GAULT-PIATT</b>  |  |  | Total Quantity<br><b>21.67</b>   |                                       | Unit/Wt/Vol:<br><b>TON</b> |
| Waste Name/Waste Type:<br><b>WASTE SOIL WITH PETROLEUM PRODUCTS</b>   |  |  | <input type="checkbox"/> Clean Fill <input type="checkbox"/> Washout<br><input type="checkbox"/> PCC <input type="checkbox"/> Cleanout<br><input type="checkbox"/> Silt Stone <input type="checkbox"/> After Hours |                                       |                            |
| Special Handling Instructions:<br><b>USE PPE &amp; PROCEDURES AS NECESSARY TO PREVENT PETROLEUM EXPOSURE</b>  |  |  |  |                                       |                            |
| 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:<br><b>RANDY EVANS</b>   |  | Signature:<br>  |  | Date:<br><b>02/26/24</b>              |                            |
| <b>Transporter Acknowledgement of Receipt of Materials</b>  |  |  |  |                                       |                            |
| Transporter Company Name:<br><b>Saleen transport</b>  |  |  | Transporter's Phone No.:<br><b>970-324-95-15</b>   |                                       |                            |
| Printed/Typed Name:<br><b>Luis Portillo</b>   |  | Signature:<br>  |  | Date:<br><b>02/26/24</b>              |                            |
| Discrepancy and Waste Load Rejection Reason: (complete and attach waste rejection form to this manifest):   |  |  |  |                                       |                            |
| Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted above:   |  |  |  |                                       |                            |
| Printed/Typed Name:<br><b>Kathyn Probst</b>   |  | Signature:<br> |  | Date:<br><b>2-26-24</b>               |                            |
| Time In:  |  |  | Time Out:  |                                       |                            |