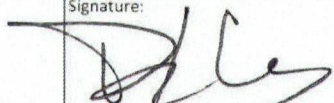
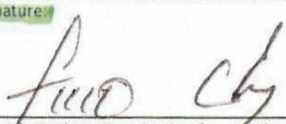


|  |  |  |  |  |                    |
|--|--|--|--|--|--------------------|
| <b>NON-HAZARDOUS WASTE MANIFEST</b>  |  | Waste Profile No.<br><b>EPS0510ZZ1</b>   |  | <b>PAWNEE WASTE</b><br><small>LLC</small>    |                    |
| Generator's Name and Mailing Address:<br><b>WELLINGTON OPERATING CO.<br/>1590 EAST CTY RD 70<br/>WELLINGTON CO. 80549</b>  |  | Manifest No.:<br><b>№ 191408</b>   |  |  |                    |
|  |  | Facility Phone No.:<br><b>(970) 889-0006</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> |  |  |  |  |                    |
| 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:<br><b>TIM TRUCKING</b> | No.:<br><b>106</b> |
| Well or Site Name and AFE#/PO? Reference#:<br><b>GAULT-PIATT WELL 20-3</b>   |  | Total Quantity:<br><b>20.65</b>  |  | Type:<br><b>Belly Dump</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<br/>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>2/26/2024</b>                    |                    |
| Transporter Acknowledgement of Receipt of Materials  |  |  |  |  |                    |
| Transporter Company Name:<br><b>Selin TRANSPORT LLC</b>  |  | Transporter's Phone No.:<br><b>970-4734411</b>   |  |  |                    |
| Printed/Typed Name:<br><b>Francisco Cebal</b>  |  | Signature:<br>  |  | Date:<br><b>2/26/2024</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>Brittany Havens</b>  |  | Signature:<br><b>BH</b>  |  | Date:<br><b>2/26/24</b>                      |                    |
| Time In:<br><b>2:39 pm</b>   |  | Time Out:  |  |  |                    |