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Report

Quail State 16 No. 3H Corrective Action



Prepared For: Precision Drilling (US) Company
10350 Richmond Ave, Suite 700
Houston TX 77042

Prepared By: Etech Environmental & Safety Solutions, Inc.
Date Prepared: February 12, 2014
Project Number: 328-3657-001

approved
Jeffrey LeKing
Environmental Specialist
NMOC-DIST 1
02/18/14

1RP-5043

50 029 40361



Report

Quail State 16 No. 3H Corrective Action

Prepared By:

A handwritten signature in blue ink, appearing to read "Fred Holmes".

Fred Holmes
Project Manager

HOBBS OCD

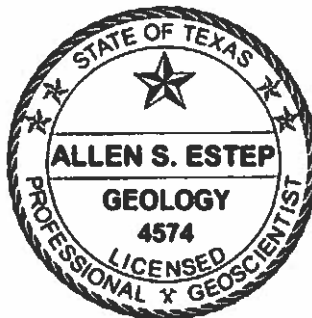
FEB 13 2014

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Reviewed By:

A handwritten signature in black ink, appearing to read "Shane Estep".

Shane Estep P.G.
Senior Environmental Scientist



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10350 Richmond Ave, Suite 700
Houston TX 77042

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Executive Summary

On April 26, 2012, Fasken Oil and Ranch Ltd (Fasken) reported a release of brine water that occurred on April 24, 2012. In summary, the release was from the overflow during the filling of a water tank with brine water from the drilling reserve pit on the Quail State 16 No. 3H (API No. 30-025-40361) drilling pad. The release migrated off of the drilling/production pad (pad) and migrated northward along the west side of the reserve pit and south along the west edge of the pad before turning westward.

Etech Environmental & Safety Solutions, Inc. (Etech) was retained by Precision Drilling (US) Company to perform an assessment of the impact area from release. From October 2012 through July 2013, Etech performed a series of assessments on the area of the release. The impacted area measured approximately 225 feet long on its north south axis and 120 feet on the east-west axis. The width varied at approximately 25 feet on the northern portion of the impacted area, 10-15 feet in the southern section, and 15 feet wide on the lower western section. The depth of the release varied from 1-2 foot in the western section, 10 feet in the southern section near the pad, 3-4 feet in the section adjacent to the reserve pit and 7-8 feet in the uppermost northern section.

Because of the length and shape of the impacted area, it was initially divided into 4 sections or "Areas". Excavation of the impacted areas commenced in December, 2013. As soil was excavated, clean soil over the top of the impacted soils were segregated from impacted soils. Impacted soils were stockpiled and loaded for transport to the Lea Land Landfill in Carlsbad, New Mexico.

As areas were excavated, they were routinely screened and samples were collected and sent for laboratory analysis for chlorides. When regulatory threshold levels were met, the data on a given area was sent to the New Mexico Oil Conservation Division (NMOCD) office in Hobbs, New Mexico for approval for backfill. Once approval was received, the area was backfilled to surface and graded to match existing topography.

Upon the completion of the corrective action activities presented in this report, the impact associated with the brine water release at the Quail State 16 No. 3H has been remediated in accordance with NMOCD regulations.

Introduction

On April 26, 2012, Fasken Oil and Ranch Ltd (Fasken) reported a release of brine water that occurred on April 24, 2012. In summary, the release was from the overflow during the filling of a water tank with brine water from the drilling reserve pit on the Quail State 16 No. 3H (API No. 30-025-40361) drilling pad. The release migrated off of the drilling/production pad (pad) and migrated northward along the west side of the reserve pit and south along the west edge of the pad before turning westward. A copy of the C-141 submitted by Fasken is provided in [Attachment A](#).

Etech Environmental & Safety Solutions, Inc. (Etech) was retained by Precision Drilling (US) Company to perform an assessment of the impact area from release. From October 2012 through July 2013, Etech performed a series of assessments on the area of the release. From the assessment it was determined the release was a reversed "L" shaped area. The impacted area measured approximately 225 feet long on its north south axis and 120 feet on the east-west axis. The width of the release area varied at approximately 25 feet wide on the northern portion of the impacted area, 10-15 feet wide in the southern section, and 15 feet wide on the lower western section. The depth of the release varied from 1-2 foot in the western section, 10 feet in the southern section near the pad, 3-4 feet in the section adjacent to the reserve pit and 7-8 feet in the uppermost northern section. A copy of the release map generated from the assessment is provided in [Attachment B](#).

Because of the length and shape of the impacted area, it was initially divided into 4 sections or "Areas". Excavation of the impacted areas commenced in December, 2013. As areas were excavated, they were routinely screened and samples were collected as per approved plan by the NMOCD and sent for laboratory analysis for chlorides. A site diagram showing the excavation Areas and their subsequent dimensions is provided in [Attachment C](#).

Discussion on the excavation of each area and other associated aspects are presented below and in the following pages.

Corrective Action Activities

Area 4

On December 19, 2013, Etech performed a clearance sampling event on the excavated area known as Area 4. This area was located at the furthestmost north section of the impacted area and bounded the west side of the former reserve pit area. Samples were collected from specific areas of the excavation which had been excavated to 13 feet below ground level. The samples (SP1, SP2) were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP1	East Wall	8	<16.0
SP1	West Wall	8	<16.0
SP1	North Wall	8	<16.0
SP1	Bottom	13	<16.0
SP1/2	Bottom	10	<16.0

Note: The sample labeled SP1/2 was from SP 2. However, the lab reported this as SP1. Therefore the I.D. for this report of "1/2" is used.

Based upon the results of the analyses, Area 4 was determined to be cleared for chlorides to the corrective action levels of 1,000 mg/kg or less. A copy of the data was electronically submitted to the New Mexico Oil Conservation Division (NMOCD) in Hobbs, New Mexico. The NMOCD approved backfilling of Area 4. A summary of the sample locations and analytical data are provided in [Attachment D-D1](#).

Area 3

On December 20, 2013, Etech performed a clearance sampling event on the excavated area known as Area 3. This area was located directly south of Area 4 and bounded the west side of the former reserve pit area. Samples (SP3 – SP13) were collected from specific areas of the excavation which had been excavated to 11 feet below ground level. The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3	West Wall	4	<16.0
SP3	East Wall	4	528
SP3	Bottom	11	48.0
SP4	West Wall	4	<16.0
SP4	East Wall	4	224
SP4	Bottom	11	80.0

Additional sampling was performed on December 22, 2013 for the remainder of the Area 3 excavation, and to ensure the sidewalls were cleared at lower depths (>4-ft). The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3	East Wall	8	4320
SP3	West Wall	8	32.0
SP4	Bottom	13	608
SP4	East Wall	7	4080
SP4	West Wall	7	1040
SP5	Bottom	13	192
SP5	East Wall	7	32.0
SP5	West Wall	7	64.0
SP6	Bottom	13	240
SP6	East Wall	7	256
SP6	West Wall	7	1440
SP7	Bottom	13	1840
SP7	East Wall	7	5040
SP7	West Wall	7	1920
SP8	Bottom	13	560
SP8	East Wall	7	7760
SP8	West Wall	7	800
SP9	Bottom	13	544
SP9	East Wall	7	32.0

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP9	West Wall	7	224
SP10	Bottom	13	192
SP10	East Wall	7	16.0
SP10	West Wall	7	48.0
SP11	Bottom	13	48.0
SP11	East Wall	7	16.0
SP11	West Wall	7	16.0
SP12	Bottom	13	64.0
SP12	East Wall	7	16.0
SP12	West Wall	7	<16.0
SP13	Bottom	13	<16.0
SP13	East Wall	7	<16.0
SP13	South Wall	7	<16.0
SP13	West Wall	7	<16.0

Note: All bottom samples were part of a delineation trench excavated in the center of Area 3.

The analytical results concluded that sample points 3, 4, 6, 7 & 8 had elevated chloride levels along the walls, and also at the bottom in the case of SP7. However, based upon all of the other data, the bottom sample in SP7 was thought to have elevated chloride levels due to sloughing of the sidewall. This point was cleaned of soils in the bottom of the area and re-sampled on January 2, 2014. The sample was sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical result is as follows:

Sample I.D.	Reference	Depth (ft)	Initial Chlorides (mg/kg) Dec 22	Final Chlorides (mg/kg) Jan 2
SP7	Bottom	13	1840	160

The analytical results concluded that this area was cleared for chlorides.

The clean overburden was removed over the impacted wall areas (SP3, 4, 6, 7, and 8) and the impacted soils excavated and stockpiled for disposal. Confirmation samples were collected on January 7, 2014 from the excavated areas. The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Sample I.D.	Reference	Depth (ft)	Initial Chlorides (mg/kg) Dec 22	Final Chlorides (mg/kg) Jan 7
SP3	East Wall	7	4320	<16.0
SP4	East Wall	7	4080	<16.0
SP4	West Wall	7	1040	<16.0
SP6	West Wall	7	1440	<16.0
SP7	East Wall	7	5040	192
SP7	West Wall	7	1920	<16.0
SP8	East Wall	7	7760	<16.0

Based upon the results of the analyses, Area 3 was determined to be cleared for chlorides to the corrective action levels of 1,000 mg/kg or less. A copy of the data was electronically submitted to the New Mexico Oil Conservation Division (NMOCD) in Hobbs, New Mexico. The NMOCD approved backfilling of Area 3. Summaries of the sample locations and analytical data are provided in [Attachment D-D2](#).

Area 3D

(Note that sequentially, Area 2 was performed before Area 3D due to the utility pole issue.)

Area 3D was situated between Areas 3 & 2, and was bounded on the east side by the existing production pad. This area was not initially excavated for safety reasons associated with the utility pole, which was not present when the spill occurred. When the utility pole was later installed, it had been installed directly adjacent to the impacted area. Consequently the no excavation safety area was established, but Fasken Oil relocated the utility pole in January 2014, which allowed the area to be excavated.

On January 20, 2014, Etech performed a clearance sampling event on the excavated area known as Area 3D. Samples (3D-2, 3D-4 and 3D-5) were collected from specific areas of the excavation which had been excavated to depths ranging from 6 to 10 feet below ground level. The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
3D-5	South Wall	3	224
3D-5	East Wall	3	32.0
3D-5	West Wall	3	384
3D-5	Bottom	6	16.0
3D-2	West Wall	3	848
3D-2	East Wall	3	767
3D-2	Bottom	9	160
3D-4	North Wall	3	464
3D-4	East Wall	3	<16.0
3D-4	Bottom	10	32.0

At the time of the above sampling additional excavation was required at the West wall in area 3D-4 due to elevated chlorides above regulatory threshold levels. Excavation of the west wall in Area 3D-4 was concluded on January 22, 2014. A sample was collected and sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical result is presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
3D-4	West Wall	3	64.0

Based upon the results of the analyses, Area 3 has been cleared for chlorides to the corrective action levels of 1,000 mg/kg or less. A copy of the data was electronically submitted to the NMOCD in Hobbs, New Mexico. The NMOCD approved backfilling of Area 3D. Summaries of the sample locations and analytical data are provided in [Attachment D-D3](#).

Area 2

(As noted above, sequentially Area 2 was performed before Area 3D due to the utility pole issue.)

On December 23, 2013, Etech performed a clearance sampling event on the excavated area known as Area 2. This area was located south of Area 3/3D and bounded the west side of the existing production pad, extending south and then turning west across the dirt road for the northern freshwater frac pit. Samples (SP14 – SP 16) were collected from specific areas of the excavation which had been excavated to depths ranging from 5 to 8 feet below ground level. The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented as follows:

Area 2 Sampling Results December 23, 2013 & January 22, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP14	Bottom	8	64.0
SP14	East Wall	5	32.0
SP14	West Wall	5	2000
SP15	Bottom	5	48.0
SP15	East Wall	5	<16.0
SP15	West Wall	5	<16.0
SP16	Bottom	5	<16.0
SP16	East Wall	5	32.0
SP16	West Wall	5	<16.0

The analytical results determined all areas had cleared except for the northwestern portion of the excavation. This area was located at the edge of the safety perimeter of the utility pole. In January, 2014 Fasken Oil had the utility pole relocated away from the impacted area. The impacted area around SP14 was excavated and field screened until it met clearance objectives. On January 22, 2014 a clearance sample was collected from the excavated area. The sample sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical result is presented as follows:

Sample I.D.	Reference	Depth (ft)	Initial Chlorides (mg/kg) Dec 23	Final Chlorides (mg/kg) Jan 22
SP14	West Wall	3	2000	32

Note: The sample collected at this point was incorrectly recorded on the chain-of-custody as 3 feet and when the sample was actually collected at 5 feet. Based upon the results of the analyses, Area 2 has been cleared for chlorides to the corrective action levels of 1,000 mg/kg or less. A copy of the data was electronically submitted to the NMOCD in Hobbs, New Mexico. The NMOCD approved backfilling of Area 2. Summaries of the sample locations and analytical data are provided in [Attachment D-D4](#).

Area 1

On January 22, 2014, Etech performed a clearance sampling event on the excavated area known as Area 1. This area was located west of Area 2 and constituted the terminus of the spill area. The impacted soil in this area was noted to be very shallow within 1 foot or less of the surface. A sample was collected from the area which had been excavated to a depth of 1 below ground level and approximately 25 foot

long. The sample was sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical result is presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3-25' Horizontal	Bottom	1	1020

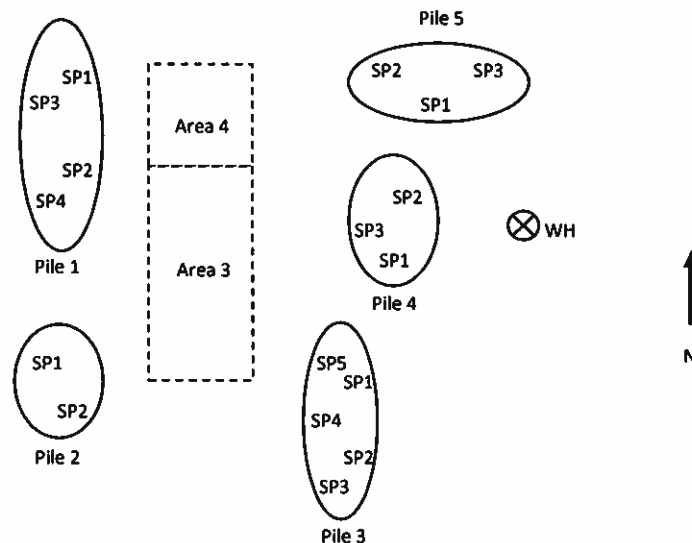
The analytical results determined the excavated area was slightly above regulatory threshold levels. The excavation was advanced an additional 35 feet horizontally. On January 24, 2014 a clearance sample was collected from the excavated area. The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical result is presented as follows:

Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3-60' Horizontal	Bottom	1	112

Based upon the results of the analyses, Area 1 has been cleared for chlorides to the corrective action levels of 1,000 mg/kg or less. A copy of the data was electronically submitted to the NMOCD in Hobbs, New Mexico. The NMOCD approved backfilling of Area 1. In addition to the excavation of central area within Area 1, the surface soils in the area outside of the excavation area were scraped and staged for disposal. This was completed to ensure the any soil from staging and loading operations were properly removed. Summaries of the sample locations and analytical data are provided in Attachment D-D5.

Soil Piles

On December 20, 2013, Etech performed a sampling event on the excavated material from Areas 3 & 4. The excavated materials were stockpiled in 5 areas around the east and west sides of the excavation site. Each stockpile area had grab samples collected from different sides to give a representation of the chloride content of each pile. A not-to-scale diagram of the soil piles, their sample numbers, and respective locations are presented below:



The samples were sent to Cardinal Laboratories in Hobbs, New Mexico to be analyzed for Chlorides. The analytical results are presented on the following page.

Soil Pile December 20, 2013 Sampling Results			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
Pile 1 - SP1	Northeast Side	N/A	<16.0
Pile 1 - SP2	Southeast Side	N/A	<16.0
Pile 1 - SP3	Northwest Side	N/A	96.0
Pile 1 - SP4	Southwest Side	N/A	112
Pile 2 - SP1	Northwest Side	N/A	1070
Pile 2 - SP2	Southeast Side	N/A	656
Pile 3 - SP1	Northeast Side	N/A	576
Pile 3 - SP2	Southeast Side	N/A	<16.0
Pile 3 - SP3	Southwest Side	N/A	1010
Pile 3 - SP4	West Side	N/A	576
Pile 3 - SP5	Northwest Side	N/A	2880
Pile 4 - SP1	South Side	N/A	416
Pile 4 - SP2	Northeast Side	N/A	2720
Pile 4 - SP3	West Side	N/A	2000
Pile 5 - SP1	South Side	N/A	112
Pile 5 - SP 2	Northeast Side	N/A	64
Pile 5 - SP3	Northwest Side	N/A	176

A copy of the data was electronically submitted to the NMOCD in Hobbs, New Mexico. The NMOCD approved a technical approach for segregation of impacted soils above regulatory threshold levels and the use of soils below regulatory threshold levels for back fill material. Based upon the results of the analyses and with the concurrence of the NMOCD, the following actions were completed:

Pile 1: This stockpile was cleared to be used for backfill.

Pile 2: After further reviewing this pile, it was comprised of 2 piles side-by-side. The elevated pile was staged for disposal, the one below regulatory threshold levels was used for backfill material.

Pile 3: There was one segment of the pile (SP5, Northwest side) that was removed and staged for disposal. After the initial elevated portion of the pile was been cut from the main pile, the cut side of the remaining pile was field screened at multiple intervals to ensure the impacted soil had been removed. When field screening is complete, a composite sample from the side of the pile was collected on January 8, 2014 and subjected to laboratory analysis for chlorides. The analytical results determined the end of the pile was 1040 mg/kg of chlorides. This section was blended and the pile was cleared for backfill.

Also, there was one other portion of stockpile that had chlorides (SP3, Southwest Side, over by 10 mg/kg) slightly above regulatory threshold levels. Because the elevated level was so slight, the stockpile was blended then rechecked. (This was done after the removal of the SP5 area has been confirmed.) The results determined the pile was cleared for backfill.

Pile 4: The majority of this pile was above regulatory threshold levels. The pile was staged for disposal.

Pile 5: This stockpile was cleared to be used for backfill.

Summaries of the sample locations and analytical data are provided in Attachment D-D6.

Sampling Protocols and Notations

Samples were collected utilizing an approach approved by NMOCD. In an effort to maintain as much accuracy and consistency as possible, all sampling points were maintained throughout the point of clearance. In addition, Etech split all samples for laboratory analyses with the Fasken representative. Routine chain of custody protocols were maintained for all samples subjected to laboratory analysis.

Disposal & Backfilling

Impacted soil was loaded onto 20 cubic yard belly or end style dump trucks and transported to the Lea Land Landfill located at 180 US Highway 82, Carlsbad, New Mexico. A total of 65 loads were transported and disposed of. A copy of the manifests are provided in [Attachment E](#).

As excavation areas were approved the NMOCD, backfilling was performed by installing the soil in shallow lifts in the excavation and compacting by bucket or tire packed by equipment. Backfill material consisted of overburden removed from the excavation and clean fill acquired from the Lea Land Landfill. Once an area was backfilled to grade, it was dressed and smoothed to match the existing contour. Photographs taken of the site after backfilling are provided in [Attachment F](#).

Conclusion

Upon the completion of the above activities, and the analytical data presented in this report, the impact associated with the brine water release at the Quail State 16 No. 3H has been remediated in accordance with NMOCD regulations.

Attachment A
Initial C-141

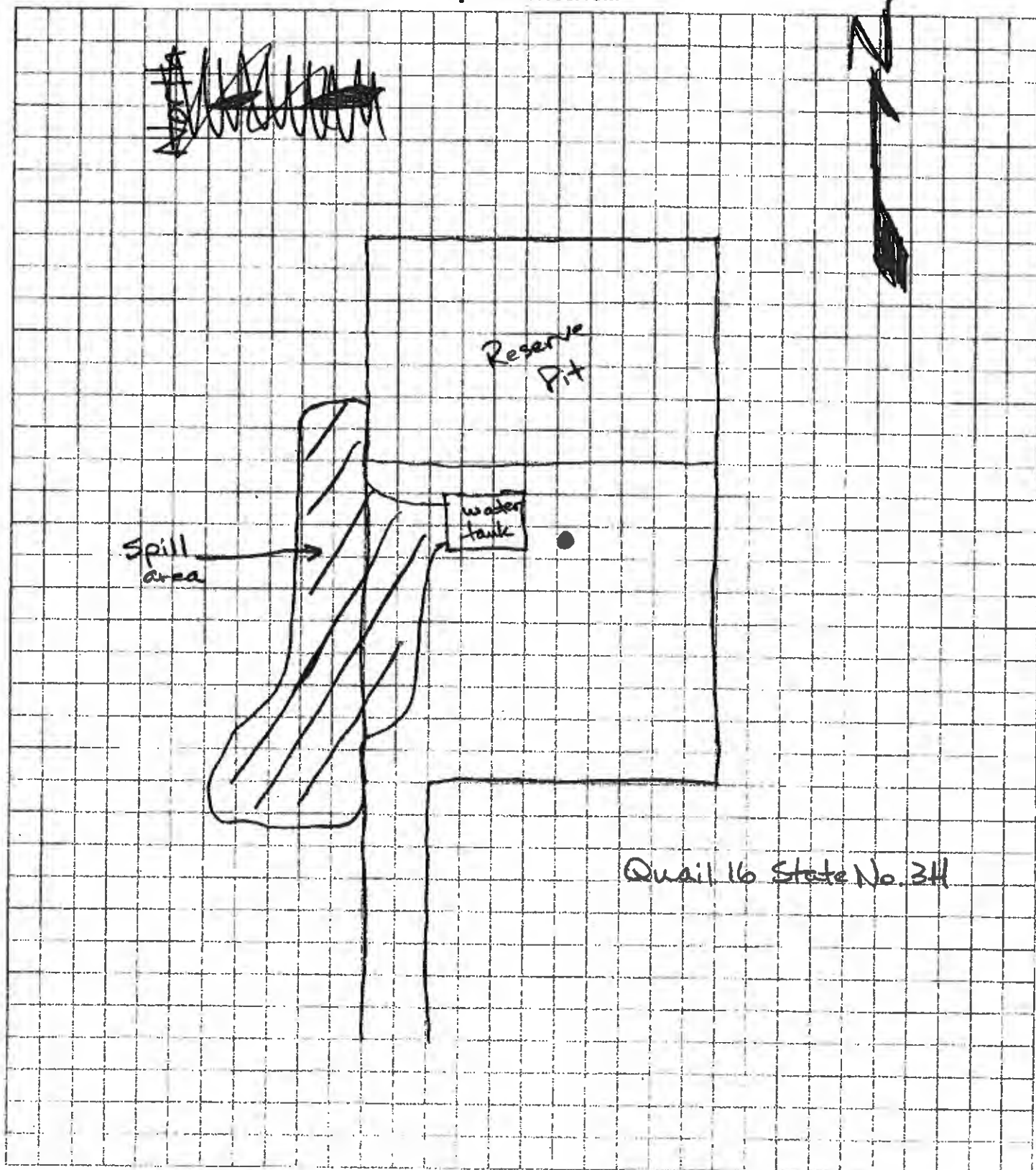


OILWELL CEMENTING SERVICES - PLUGGING & ABANDONMENT
P.O. BOX 10451 • MIDLAND, TEXAS 79702

Subject _____

(432) 687-1994
FAX (432) 687-0066
triplenservices.com

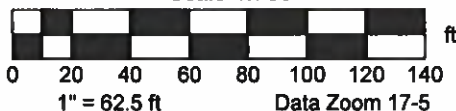
Date _____



Attachment B
Release Assessment Map



Scale 1:750



Quail State 16 No. 3H Boring Locations & Volumes Map



Data use subject to license.

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www.delorme.com

Attachment C
Site Excavation Diagram

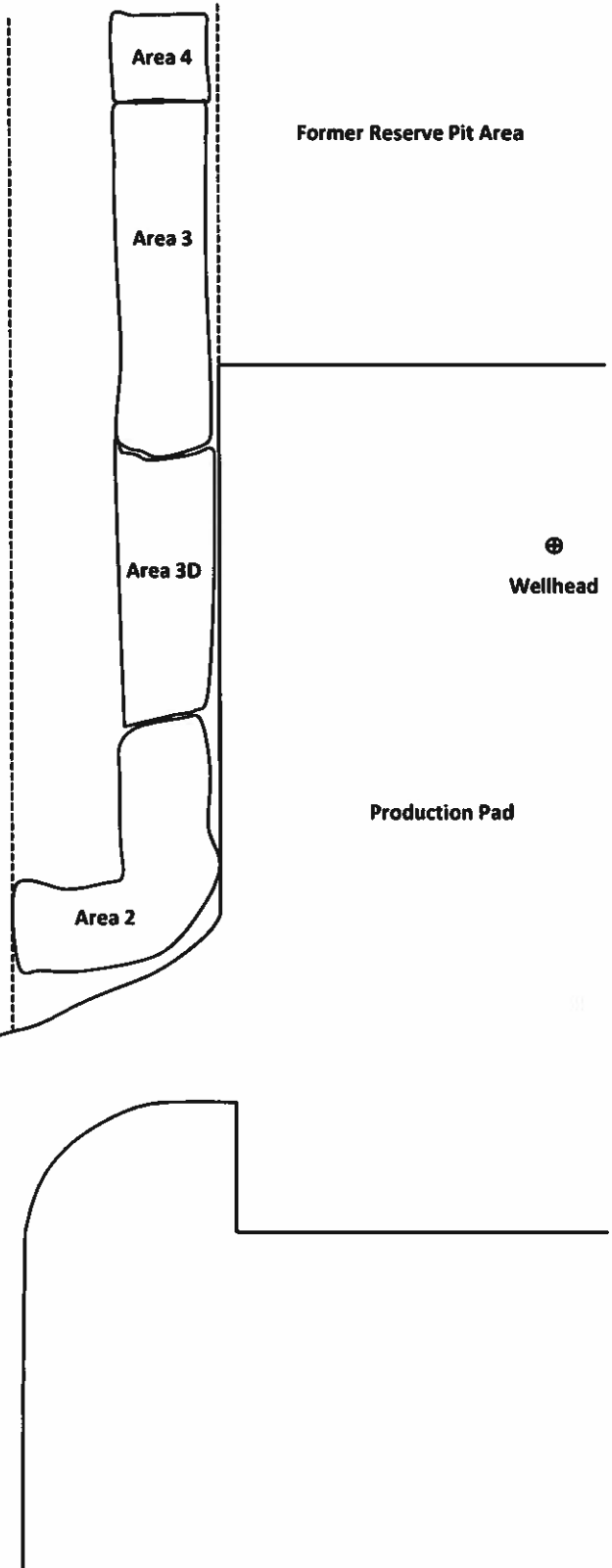
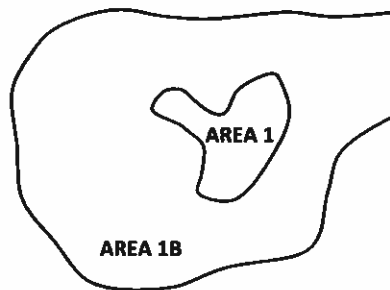
Quail State 16 No. 3H Site Excavation Diagram (Not to Scale)



Dirt Road to Freshwater
Frac Pit →

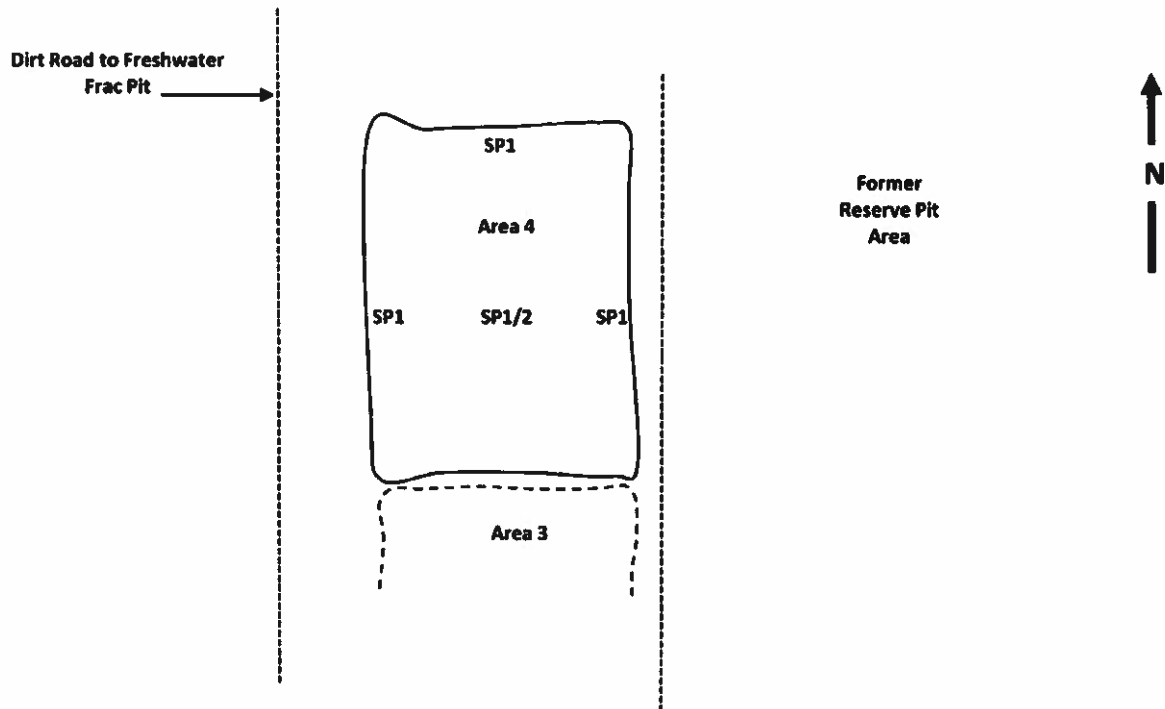
Excavation Area Dimensions			
Area I.D.	Length (Ft)	Width (Ft)	Depth Range (Ft)
Area 1	25	15	1
Area 1B	60	60	.25
Area 2	24	54	5-8
Area 3	120	40	11
Area 3D	66	15	6-10
Area 4	30	35	10-13

Note: Area 1B & Area 2 are averaged.



Attachment D
Analytical Data

Attachment D-D1 **Area 4 Analytical Data**



Area 4 Sampling Results December 19, 2013			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP1	East Wall	8	<16.0
SP1	West Wall	8	<16.0
SP1	North Wall	8	<16.0
SP1	Bottom	13	<16.0
SP1/2	Bottom	10	<16.0



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

December 20, 2013

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 12/19/13 15:30.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

 ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

 Received: 12/19/2013
 Reported: 12/20/2013
 Project Name: QUAIL STATE 16 NO. 3H
 Project Number: 328-3657-000
 Project Location: LEA COUNTY, NM

 Sampling Date: 12/19/2013
 Sampling Type: Soil
 Sampling Condition: ** (See Notes)
 Sample Received By: Jodi Henson

Sample ID: AREA 4 SP 1 E WALL 8' (H303086-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/20/2013	ND	400	100	400	3.92	

Sample ID: AREA 4 SP 1 W WALL 8' (H303086-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/20/2013	ND	400	100	400	3.92	

Sample ID: AREA 4 SP 1 N WALL 8' (H303086-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/20/2013	ND	400	100	400	3.92	

Sample ID: AREA 4 SP 1 BOTTOM 13' (H303086-04)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/20/2013	ND	400	100	400	3.92	

Cardinal Laboratories

* = Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

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P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/19/2013
Reported: 12/20/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/19/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 4 SP 1 BOTTOM 10' (H303086-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/20/2013	ND	400	100	400	3.92	

Cardinal Laboratories

*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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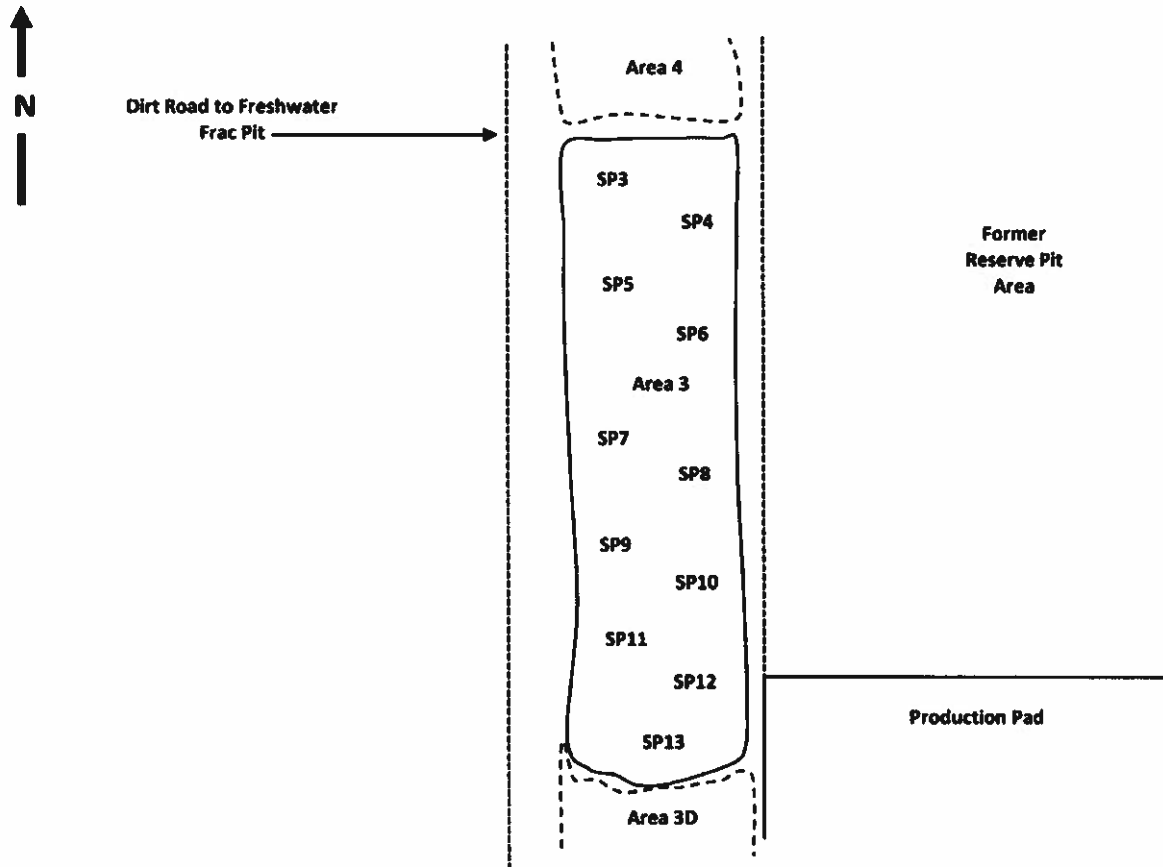
Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

† Cardinal cannot accept verbal changes. Please fax written changes to (575) 393-4228.

Attachment D-D2 Area 3 Analytical Data



Area 3 Sampling Results December 20, 2013			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3	West Wall	4	<16.0
SP3	East Wall	4	528
SP3	Bottom	11	48.0
SP4	West Wall	4	<16.0
SP4	East Wall	4	224
SP4	Bottom	11	80.0

Area 3 Analytical Data (Continued)

Area 3 Sampling Results December 22, 2013 & January 2, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP6	East Wall	7	256
SP6	West Wall	7	1440
SP7	East Wall	7	5040
SP7	West Wall	7	1920
SP8	Bottom	13	560
SP8	East Wall	7	7760
SP8	West Wall	7	800
SP9	Bottom	13	544
SP9	East Wall	7	32.0
SP9	West Wall	7	224
SP10	Bottom	13	192
SP10	East Wall	7	16.0
SP10	West Wall	7	48.0
SP11	Bottom	13	48.0
SP11	East Wall	7	16.0
SP11	West Wall	7	16.0
SP12	Bottom	13	64.0
SP12	East Wall	7	16.0
SP12	West Wall	7	<16.0
SP13	Bottom	13	<16.0
SP3	East Wall	8	4320
SP3	West Wall	8	32.0
SP4	Bottom	13	608
SP4	West Wall	7	1040
SP4	East Wall	7	4080
SP5	Bottom	13	192
SP5	West Wall	7	64.0
SP5	East Wall	7	32.0
SP6	Bottom	13	240
SP13	East Wall	7	<16.0
SP13	West Wall	7	<16.0
SP13	South Wall	7	<16.0
SP7	Bottom	13	1840
January 2 Analytical Results			
SP7	Bottom	13	160

Area 3 Sampling Results January 7, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3	East Wall	7	<16.0
SP4	East Wall	7	<16.0
SP4	West Wall	7	<16.0
SP6	West Wall	7	<16.0
SP7	East Wall	7	192
SP7	West Wall	7	<16.0



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 08, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/07/14 16:10.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 01/07/2014
Reported: 01/08/2014
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 01/07/2014
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 3 SP 3 E. WALL 7' (H400048-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00	

Sample ID: AREA 3 SP 4 E. WALL 7' (H400048-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00	

Sample ID: AREA 3 SP 4 W. WALL 7' (H400048-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00	

Sample ID: AREA 3 SP 6 W. WALL 7' (H400048-04)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00		

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/07/2014	Sampling Date:	01/07/2014
Reported:	01/08/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 7 E. WALL 7' (H400048-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	192	16.0	01/08/2014	ND	416	104	400	0.00	

Sample ID: AREA 3 SP 7 W. WALL 7' (H400048-06)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00	

Sample ID: AREA 3 SP 8 E. WALL 7' (H400048-07)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	<16.0	16.0	01/08/2014	ND	416	104	400	0.00		

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

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RPD	Relative Percent Difference
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***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



101 East Maryland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2478

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: <u>Etehn</u>		P.O. #: <u>378-3657000</u>																							
Project Manager: <u>Fred Holmes</u>		Company:																							
Address:		Attn:																							
City:		Address:																							
State: Zip:		City:																							
Phone #: Fax #:		State: Zip:																							
Project #: <u>378-3657-001</u> Project Owner:		Phone #:																							
Project Name: <u>Quail State 16 3H</u>		Fax #:																							
Project Location:		SAFETY																							
Sampler Name: <u>Terry Osborn</u>		FOR LAB USE ONLY																							
Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:	ICE / COOL	OTHER :	DATE	TIME	ANALYSIS REQUEST										
HYDRO 48	Area 3 SP3 E. wall 79												12/20/14			Chlorides									
1	Area 3 SP4 E. wall 79																								
2	Area 3 SP4 E. wall 79																								
3	Area 3 SP4 W. wall 79																								
4	Area 3 SP6 W. wall 79																								
5	Area 3 SP7 E. wall 79																								
6	Area 3 SP1 W. wall 79																								
7	Area 3 SP8 E. wall 79																								

PLEASE NOTE: Liability and Damages. Cardinal's liability and damage coverage is limited to the amount paid by the client for the analysis. All claims including those for negligence and any other cause whatsoever shall be covered within 30 days after completion of the analysis. In no event shall Cardinal be liable for incidental or consequential damages, including without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services rendered by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise.

Relinquished By: [Signature] Date: 12/20/14 Received By: [Signature]

Relinquished By: [Signature] Date: 12/20/14 Received By: [Signature]

Time: _____

Delivered By: (Circle One) UPS Sample Condition: Good Checked By: [Signature]

Sampler - UPS - Bus - Other: 14.6 L Cool Impact Yes No No

REMARKS: RUSH!!

Phone Result: ☐ Yes ☐ No Add'l Phone #: _____
Fax Result: ☐ Yes ☐ No Add'l Fax #: _____

January 03, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/02/14 16:45.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/ga/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 01/02/2014
Reported: 01/03/2014
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 01/02/2014
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 3 SP 7 BOTTOM 13 (H400012-01)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	01/03/2014	ND	416	104	400	0.00	

Cardinal Laboratories

* = Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
+	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



ANALYSIS REQUEST

Page 4 of 4



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

December 26, 2013

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 12/23/13 17:10.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene". The signature is fluid and cursive, with the first name "Celey" being more prominent.

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 6 E. WALL 7' (H303123-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	256	16.0	12/26/2013	ND	448	112	400	7.41		

Sample ID: AREA 3 SP 6 W. WALL 7' (H303123-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1440	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 7 E. WALL 7' (H303123-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	5040	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 7 W. WALL 7' (H303123-04)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	1920	16.0	12/26/2013	ND	448	112	400	7.41		

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 8 BOTTOM 13' (H303123-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	560	16.0	12/26/2013	ND	448	112	400	7.41		

Sample ID: AREA 3 SP 8 E. WALL 7' (H303123-06)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	7760	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 8 W. WALL 7' (H303123-07)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	800	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 9 BOTTOM 13' (H303123-08)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	544	16.0	12/26/2013	ND	448	112	400	7.41		

Sample ID: AREA 3 SP 9 E. WALL 7' (H303123-09)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	32.0	16.0	12/26/2013	ND	448	112	400	7.41		

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 9 W. WALL 7' (H303123-10)

Chloride, SM4500CI-B mg/kg			Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 10 BOTTOM 13' (H303123-11)

Chloride, SM4500CI-B mg/kg			Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	192	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 10 E. WALL 7' (H303123-12)

Chloride, SM4500CI-B mg/kg			Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 10 W. WALL 7' (H303123-13)

Chloride, SM4500CI-B mg/kg			Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	48.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 11 BOTTOM 13' (H303123-14)

Chloride, SM4500CI-B mg/kg			Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	48.0	16.0	12/26/2013	ND	448	112	400	7.41	

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/23/2013
Reported: 12/26/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/23/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 3 SP 11 E. WALL 7' (H303123-15)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 11 W. WALL 7' (H303123-16)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 12 BOTTOM 13' (H303123-17)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 12 E. WALL 7' (H303123-18)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 12 W. WALL 7' (H303123-19)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	448	112	400	7.41	

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 13 BOTTOM 13' (H303123-20)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	448	112	400	7.41	

Sample ID: AREA 3 SP 3 BOTTOM 13' (H303123-21)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00		

Sample ID: AREA 3 SP 3 E. WALL 8' (H303123-22)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	4320	16.0	12/26/2013	ND	432	108	400	0.00		

Sample ID: AREA 3 SP 3 W. WALL 8' (H303123-23)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	32.0	16.0	12/26/2013	ND	432	108	400	0.00		

Sample ID: AREA 3 SP 4 BOTTOM 13' (H303123-24)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	608	16.0	12/26/2013	ND	432	108	400	0.00		

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 3 SP 4 W. WALL 7' (H303123-25)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1040	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 4 E. WALL 7' (H303123-26)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	4080	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 5 BOTTOM 13' (H303123-27)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	192	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 5 W. WALL 7' (H303123-28)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	12/26/2013	ND	432	108	400	0.00	


Sample ID: AREA 3 SP 5 E. WALL 7' (H303123-29)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	12/26/2013	ND	432	108	400	0.00	

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/23/2013
Reported: 12/26/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/23/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 3 SP 6 BOTTOM 13' (H303123-30)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 13 E. WALL 7' (H303123-31)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 13 W. WALL 7' (H303123-32)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 13 S. WALL 7' (H303123-33)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 3 SP 7 BOTTOM 13' (H303123-34)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1840	16.0	12/26/2013	ND	432	108	400	0.00	

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

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* = Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

**101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476**

Company Name: Etch Holmes		P.O. #: 328-3657-000	
Project Manager: Fred Holmes		Company:	
Address:		City:	
City:		State:	
State:		Zip:	
Phone #:		Address:	
Fax #:		City:	
Project #: 328-3657-000		Project Owner:	
Project Name: Quail State 163H Area 3		State:	
Project Location:		Zip:	
Sampler Name: Ferry 056013		Phone #:	
Fax #:		Matrix	
FOR LAB USE ONLY		PRESERV	
Lab I.D.		SAMPLING	
Sample I.D.			
(G)RAB OR (C)OMP.			
# CONTAINERS			
GROUNDWATER			
WASTEWATER			
SOIL			
OIL			
SLUDGE			
OTHER :			
ACID/BASE:			
ICE / COOL			
OTHER :			
DATE		TIME	

Lab I.D.	Area	Depth	DATE	TIME	ANALYSIS REQUEST
H302123	Area 3 S/R6 E. Wall	7'	12-23		Chlorides
1	Area 3 S/R6 E. Wall	7'			
2	Area 3 S/R6 E. Wall	7'			
3	Area 3 S/R7 E. Wall	7'			
4	Area 3 S/R7 W. Wall	7'			
5	Area 3 S/R8 Bottom	13'			
6	Area 3 S/R8 E. Wall	7'			
7	Area 3 S/R8 W. Wall	7'			
8	Area 3 S/R9 Bottom	13'			
9	Area 3 S/R9 E. Wall	7'			
10	Area 3 S/R9 W. Wall	7'			

PLEASE NOTE: Laboratory and sample analysis results are provided for the amount paid by the client for the analysis. No other testing fees for reagents and any other consumable materials will be charged unless stated in writing and received by Client within 30 days after completion of the analysis.

In no event shall Client be liable for hazardous or consequential damages, including without limitation, business interruption, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates, or successors in interest, or for any other damages, even if such damages were foreseeable, arising out of or from the use of the data and/or analysis results.

Relinquished By: 12/23/02		Received By: Quail State	
Date: 12-23		Date: 12-23	
Time: 5:10		Time: 5:10	
Delivered By: (Circle One) Sample - UPS - Bus - Other: 12.3		Sample Condition Cool <input checked="" type="checkbox"/> Intact <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Checked By: Quail State		Checked By: Quail State	
Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>		Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
REMARKS:		REMARKS:	
617-739-3255		617-739-3255	



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476

Company Name: E Tech		P.O. #: 328-3657-000	
Project Manager: Fred Holmes			
Address:		City:	
State:		Zip:	
Phone #:		Fax #:	
Project #: 328-3657-000		Project Owner:	
Project Name: Avail State 1634 Area 3		City:	
Project Location:		State:	
Sampler Name: Terry		Phone #:	
FOR LAB USE ONLY		Fax #:	

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	ANALYSIS REQUEST
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :			
H300123	Area 3 SPB Bottom 13'									12-23		Chlorides
12	Area 3 SP10 C.W. 7'											
13	Area 3 SP10 W. 7'											
14	Area 3 SP11 Bottom 13'											
15	Area 3 SP11 E. 7'											
16	Area 3 SP11 W. 7'											
17	Area 3 SP12 Bottom 13'											
18	Area 3 SP12 E. 7'											
19	Area 3 SP12 W. 7'											
20	Area 3 SP13 Bottom 13'											

RECEIVED BY: MAI NEWBORN Date: 12-23-13 Time: 3:10		RECEIVED BY: MAI NEWBORN Date: 12-23-13 Time: 3:10	
Delivered By: (Circle One) Sampler - UPS Bus Other		Sample Condition Cool Intake Yes No Checked By: MAI NEWBORN	

REMARKS: RUSH!!	
------------------------	--



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

**101 East Marland, Hobbs, NM 88240
(575) 383-2326 FAX (575) 393-2476**

Company Name: Etech		P.O. #:	
Project Manager: Fred Holmes		Company:	
Address:		Attn:	
City:	State:	Zip:	
Phone #:	Fax #:	Address:	
Project #:	Project Owner:		City:
Project Name: Quail State 1634 Area 3		State:	Zip:
Project Location:		Phone #:	
Sampler Name: Terry Osborn		Fax #:	

FOR LAB USE ONLY		MATRIX		PRESERV.	SAMPLING
Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS		
		GROUNDWATER			
		WASTEWATER			
		SOIL			
		OIL			
		SLUDGE			
		OTHER :			
		ACID/BASE:			
		ICE / COOL			
		OTHER :			
		DATE	TIME		

1. HAZARD NOTICE: Labeled and packaged. Containers labeled and clearly marked with the amount paid by the client for the analysis. All claims including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Certified within 30 days after completion of the applicable service. In no event shall Certified be liable for incidental or consequential damages, including without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors either past or related to the performance of services hereunder for Certified, regardless of whether such claim is based upon any of the above stated reasons or otherwise.	
Requisitioned By: 1-225022 Date: 5-10 Time:	Received By: Debi Henderson Date: 12-23 Time:
Delivered By: (Circle One) Sampler - UPS Bus Other:	Sample Condition Cool Intact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cont. HAZ <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Checked By: 6/11

REMARKS: PUSH!!	Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Phone #: _____ Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Fax #: _____
---------------------------	--



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

**101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476**

[illegible]



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBES, NM 88240

December 21, 2013

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 12/20/13 16:05.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Coley D. Keene". The signature is fluid and cursive.

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/20/2013
Reported: 12/21/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/20/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: SP 3 WEST WALL 4' (H303106-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: SP 3 EAST WALL 4' (H303106-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	528	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: SP 3 BOTTOM 11' (H303106-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	48.0	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: SP 4 WEST WALL 4' (H303106-04)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/21/2013	ND	400	100	400	3.92	

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/20/2013	Sampling Date:	12/20/2013
Reported:	12/21/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: SP 4 EAST WALL 4' (H303106-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: SP 4 BOTTOM 11' (H303106-06)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	80.0	16.0	12/21/2013	ND	400	100	400	3.92	

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

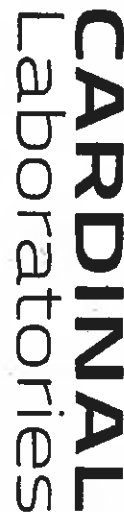
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*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

**101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476**

Company Name: Fresh		P.O. #: 328-3657-000
Project Manager: Fred Holmes		
Address:		Company:
City:	State:	Attn:
Phone #:	Fax #:	Address:
Project #: 328-3657-000		City:
Project Name: Q unit Skyle/KNO 3H		State:
Project Location:		Zip:
Sampler Name: Terry Ogden		Phone #:
FOR LAB USE ONLY		Fax #:

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						PRESERV	SAMPLING	DATE	TIME	
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
H303106	SP3 Westwall 4ft											12-20		
	2 SP3 Eastwall 4ft													
	3 SP3 Bottom 11ft													
	4 SP4 West wall 4ft													
	5 SP4 East wall 4ft													
	6 SP4 Bottom 11ft													

PLEASE NOTE: Liability and Damages. Contractor's liability and owner's exclusive remedy for any claim arising whether based in contract or tort, shall be limited to the amount paid by the client for the services. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Certified mail, 30 days after completion of the applicable service. In no event shall Certified mail be subject to the provisions of section 90-10, Hawaii Revised Statutes, which shall apply to the extent it does not conflict with the provisions of this agreement.

Relinquished By: [Signature] **Date:** 12-20-13 **Received By:** [Signature]

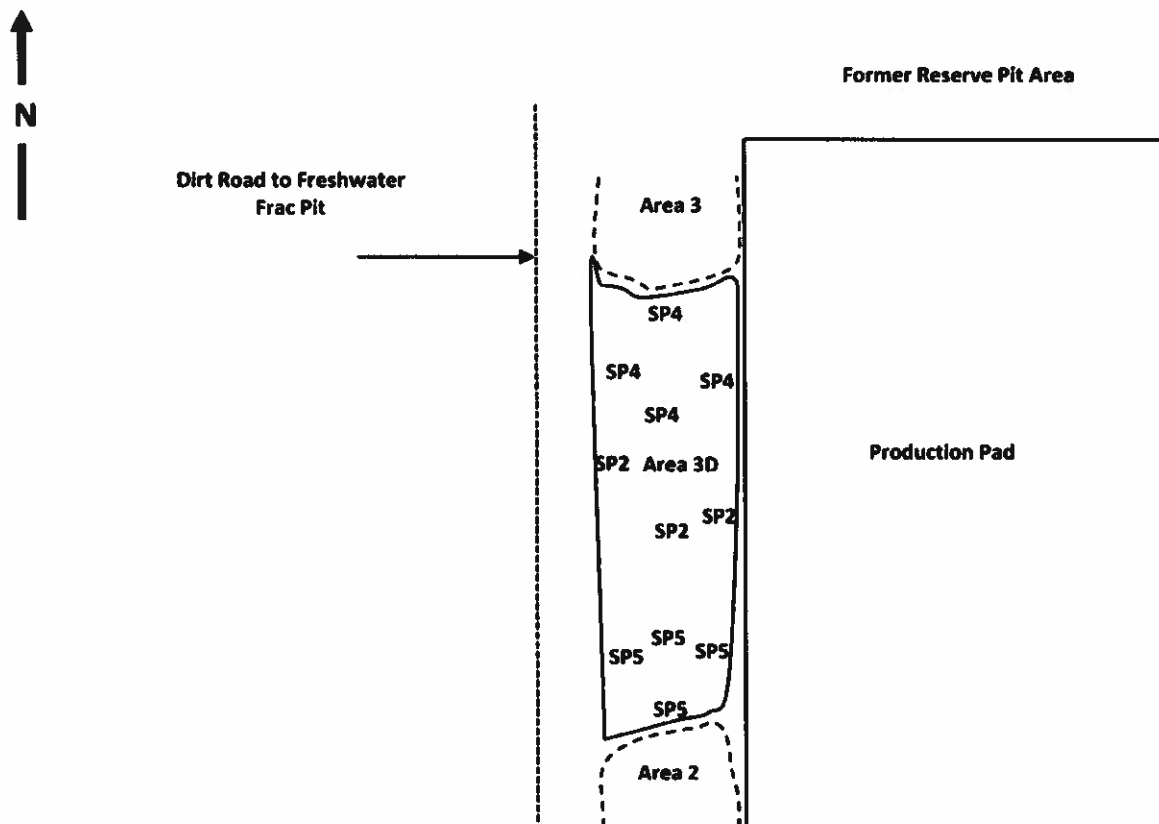
Relinquished By: [Signature] **Date:** 12-20-13 **Received By:** [Signature]

Delivered By: (Circle One) **Sample Condition** **CHECKED BY:**

Sampler - UPS - Bus - Other: 30.6°C ☒ Cool ☐ Intact ☐ Yes ☐ No ☐ Yes ☐ No

REMARKS: DUST!!

Attachment D-D3 **Area 3D Analytical Data**



Area 3D Sampling Results January 20 & 22, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
3D-5	South Wall	3	224
3D-5	East Wall	3	32.0
3D-5	West Wall	3	384
3D-5	Bottom	6	16.0
3D-2	West Wall	3	848
3D-2	East Wall	3	767
3D-2	Bottom	9	160
3D-4	North Wall	3	464
3D-4	East Wall	3	<16.0
3D-4	Bottom	10	32.0
January 22 Sampling Results			
3D-4	West Wall	3	64.0

January 22, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/21/14 16:05.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/21/2014	Sampling Date:	01/20/2014
Reported:	01/22/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Amanda Ponce
Project Location:	LEA COUNTY, NM		

Sample ID: 3D 5 S. WALL 3' (H400193-01)

Chloride, SM4500CI-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 5 E. WALL 3' (H400193-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 5 W. WALL 3' (H400193-03)

Chloride, SM4500CI-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	384	16.0	01/22/2014	ND	416	104	400	0.00		


Sample ID: 3D 5 BOTTOM 6' (H400193-04)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	01/22/2014	ND	416	104	400	0.00	

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/21/2014	Sampling Date:	01/20/2014
Reported:	01/22/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Amanda Ponce
Project Location:	LEA COUNTY, NM		

Sample ID: 3D 2 W. WALL 3' (H400193-05)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	848	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 2 E. WALL 3' (H400193-06)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	767	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 2 BOTTOM 9' (H400193-07)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 4 N. WALL 3' (H400193-08)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	464	16.0	01/22/2014	ND	416	104	400	0.00	

Sample ID: 3D 4 E. WALL 3' (H400193-09)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	01/22/2014	ND	416	104	400	0.00	

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*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/21/2014	Sampling Date:	01/21/2014
Reported:	01/22/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Amanda Ponce
Project Location:	LEA COUNTY, NM		

Sample ID: 3D 4 BOTTOM 10' (H400193-10)**Chloride, SM4500Cl-B****mg/kg****Analyzed By: AP**

Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	01/22/2014	ND	416	104	400	0.00	

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



CARDINAL LABORATORIES

101 East Merland, Hobbs, NM 88240

(505) 393-2326 Fax (505) 393-2476

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Page 6 of 6

ANALYSIS REQUEST

Company Name: F Tech

Project Manager: Fred Holmes

Address:

City:

State:

Zip:

Phone #: 432-563-2200 Fax #:

Project #: 328 3657001 Project Owner:

Project Name: Quail State 16 No 34 Area 3D

Project Location: New County

Sampler Name: Humphries, Karen

FOR LAB USE ONLY

Lab I.D.

Sample I.D.

HYDRO 3

1 3D5 S.Wall 3'

2 3D5 E.Wall 3'

3 3D5 W.Wall 3'

4 3D5 Bottom 6'

5 3D2 W.Wall 3'

6 3D2 E.Wall 3'

7 3D2 Bottom 9'

8 3D4 N.Wall 3'

9 3D4 E.Wall 3'

10 3D4 Bottom 10'

(G)RAB OR (C)OMP.

CONTAINERS

GROUNDWATER

WASTEWATER

SOIL

OIL

SLUDGE

OTHER :

ACID/BASE:

ICE / COOL

OTHER :

DATE TIME

Chloride

MATRIX

PRESERV.

SAMPLING

Sampler Relinquished:

Date: 11/21/14

Received By:

Phone Result:

Yes ☐ No ☐

Add'l Phone #:

Yes ☐ No ☐

Add'l Fax #:

Yes ☐ No ☐

Relinquished By:

Date: 11/21/14

Received By:

Phone Result:

Yes ☐ No ☐

Add'l Phone #:

Yes ☐ No ☐

Add'l Fax #:

Yes ☐ No ☐

Relinquished By:

Date: 11/21/14

Received By:

Phone Result:

Yes ☐ No ☐

Add'l Phone #:

Yes ☐ No ☐

Add'l Fax #:

Yes ☐ No ☐

Delivered By: (Circle One)

Temp.

Sample Condition

Checked By: (Initials)

Sampler - UPS - Bus - Other:

20.2C FTS4

Cool ☐ Intact ☐

Yes ☐ No ☐

† Cardinal cannot accept verbal changes. Please fax written changes to 576-393-2476.

January 23, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/22/14 15:30.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

 ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

Received:	01/22/2014	Sampling Date:	01/22/2014
Reported:	01/23/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: 3 D 4 W. WALL @ 3' (H400208-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	64.0	16.0	01/23/2014	ND	416	104	400	0.00		

Sample ID: AREA 2 SP 14 W. WALL @ 3' (H400208-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	32.0	16.0	01/23/2014	ND	416	104	400	0.00		

Sample ID: AREA 1 SP 3 1' DEEP @ 25' OUT (H400208-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	1020	16.0	01/23/2014	ND	416	104	400	0.00		

Cardinal Laboratories

* = Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



101 East Marland, Hobbs, NM 88240
(505) 393-2326 Fax (505) 393-2476

Page of

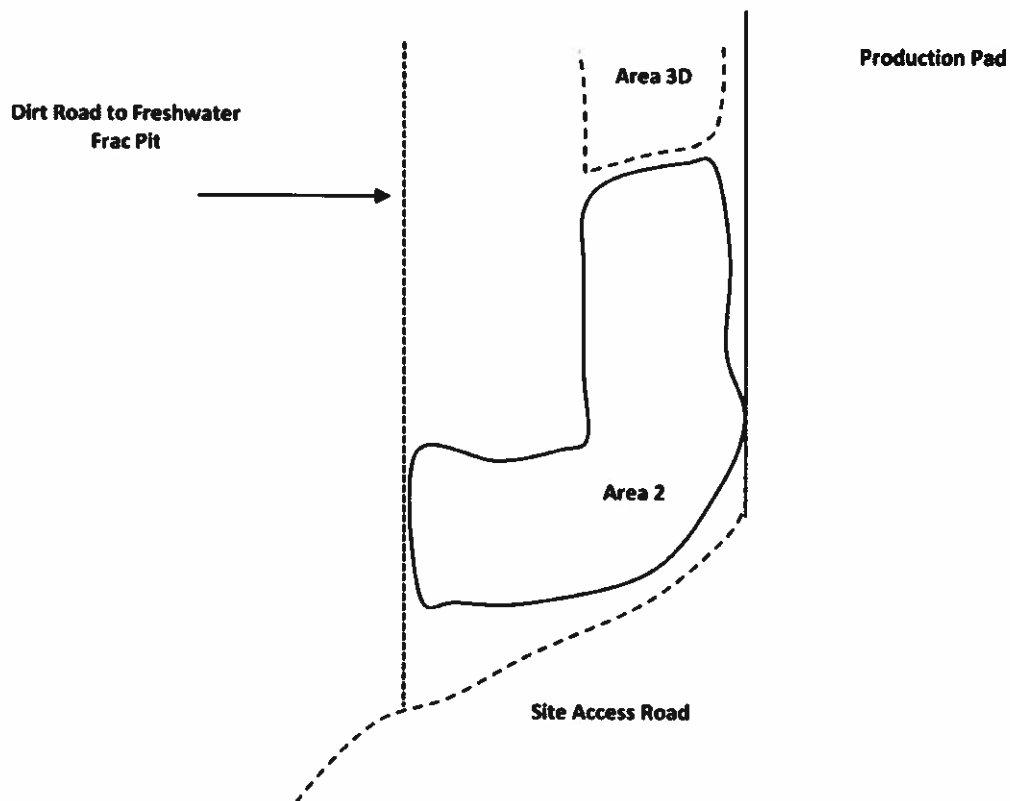
CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

[illegible]

† Cardinal cannot accept verbal changes. Please fax written changes to 614-393-2479

to 678-383-2478
#54

Attachment D-D4 Area 2 Analytical Data



Area 2 Sampling Results December 23, 2013 & January 22, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP14	Bottom	8	64.0
SP14	East Wall	5	32.0
SP14	West Wall	5	2000
SP15	Bottom	5	48.0
SP15	East Wall	5	<16.0
SP15	West Wall	5	<16.0
SP16	Bottom	5	<16.0
SP16	East Wall	5	32.0
SP16	West Wall	5	<16.0
January 22, 2014 Results			
SP14	West Wall	3	32



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

December 26, 2013

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 12/23/13 17:10.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	12/23/2013	Sampling Date:	12/23/2013
Reported:	12/26/2013	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-000	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 2 SP 14 BOTTOM 8' (H303124-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 2 SP 14 E. WALL 5' (H303124-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 2 SP 14 W. WALL 5' (H303124-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	2000	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 2 SP 15 BOTTOM 5' (H303124-04)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	48.0	16.0	12/26/2013	ND	432	108	400	0.00	

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/23/2013
Reported: 12/26/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/23/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 2 SP 15 E. WALL 5' (H303124-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 2 SP 15 W. WALL 5' (H303124-06)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	0.00	

Sample ID: AREA 2 SP 16 BOTTOM 8' (H303124-07)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	12/26/2013	ND	432	108	400	7.14	

Sample ID: AREA 2 SP 16 E. WALL 5' (H303124-08)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	12/26/2013	ND	432	108	400	7.14	

Sample ID: AREA 2 SP 16 W. WALL 5' (H303124-09)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CK						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	<16.0	16.0	12/26/2013	ND	432	108	400	7.14		

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476

ANALYSIS REQUEST

Company Name: Fresh		P.O. #: 328-3657-000	
Project Manager: Fred Holmes		Company:	
Address:		Attn:	
City:		Address:	
Phone #: 328-3657-000		City:	
Fax #: 328-3657-000		State: 328	
Project Name: Quail State 16 3H		Zip: Area 2	
Project Location:		Phone #:	
Sampler Name: Terry O'Sullivan		Fax #:	
FOR LAB USE ONLY		MATRIX	
Lab I.D. Area 2 SPH Bottom 8'		(G)RAB OR (C)OMP	
Sample I.D. Area 2 SPH W. Wall 5'		# CONTAINERS	
1 Area 2 SPH Bottom 8'		GROUNDWATER	
2 Area 2 SPH W. Wall 5'		WASTEWATER	
3 Area 2 SPH Bottom 5'		SOIL	
4 Area 2 SPH Bottom 5'		OIL	
5 Area 2 SPH W. Wall 5'		SLUDGE	
6 Area 2 SPH W. Wall 5'		OTHER:	
7 Area 2 SPH Bottom 8'		ACID/BASE:	
8 Area 2 SPH W. Wall 5'		ICE / COOL	
9 Area 2 SPH W. Wall 5'		OTHER:	
DATE 12-23		TIME	
REMARKS: chlorides			
Relinquished By: 12-23-03		Received By: 12-23-03	
Relinquished By: 12-23-03		Received By: 12-23-03	
Delivered By: 12-23-03		Sample Condition	
Sampler - UPS - Bus - Other: 12-23-03		Cool <input type="checkbox"/> Insulated <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
		CHECKED BY: 12-23-03	
		Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Add'l Phone #: 12-23-03	
		Add'l Fax #: 12-23-03	



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 21, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/17/14 12:45.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/17/2014	Sampling Date:	01/16/2014
Reported:	01/21/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: AREA 2 SP 14 WEST WALL 5' (H400158-01)

Chloride, SM4500Cl-B

mg/kg

Analyzed By: AP

Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1010	16.0	01/20/2014	ND	416	104	400	0.00	

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

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RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene, Lab Director/Quality Manager



**101 East Marland, Hobbs, NM 88240
(505) 393-2326 Fax (505) 393-2476**

Page ____ of ____

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

[illegible]

Page 4 of 4

† Cardinal cannot accept verbal changes. Please fax written changes to 575-393-2476.

#54



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 23, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/22/14 15:30.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 01/22/2014
Reported: 01/23/2014
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-001
Project Location: LEA COUNTY, NM

Sampling Date: 01/22/2014
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: 3 D 4 W. WALL @ 3' (H400208-01)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	01/23/2014	ND	416	104	400	0.00	

Sample ID: AREA 2 SP 14 W. WALL @ 3' (H400208-02)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	01/23/2014	ND	416	104	400	0.00	

Sample ID: AREA 1 SP 3 1' DEEP @ 25' OUT (H400208-03)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	1020	16.0	01/23/2014	ND	416	104	400	0.00		

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

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RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene, Lab Director/Quality Manager



101 East Marland, Hobbs, NM 88240
(505) 393-2326 Fax (505) 393-2476

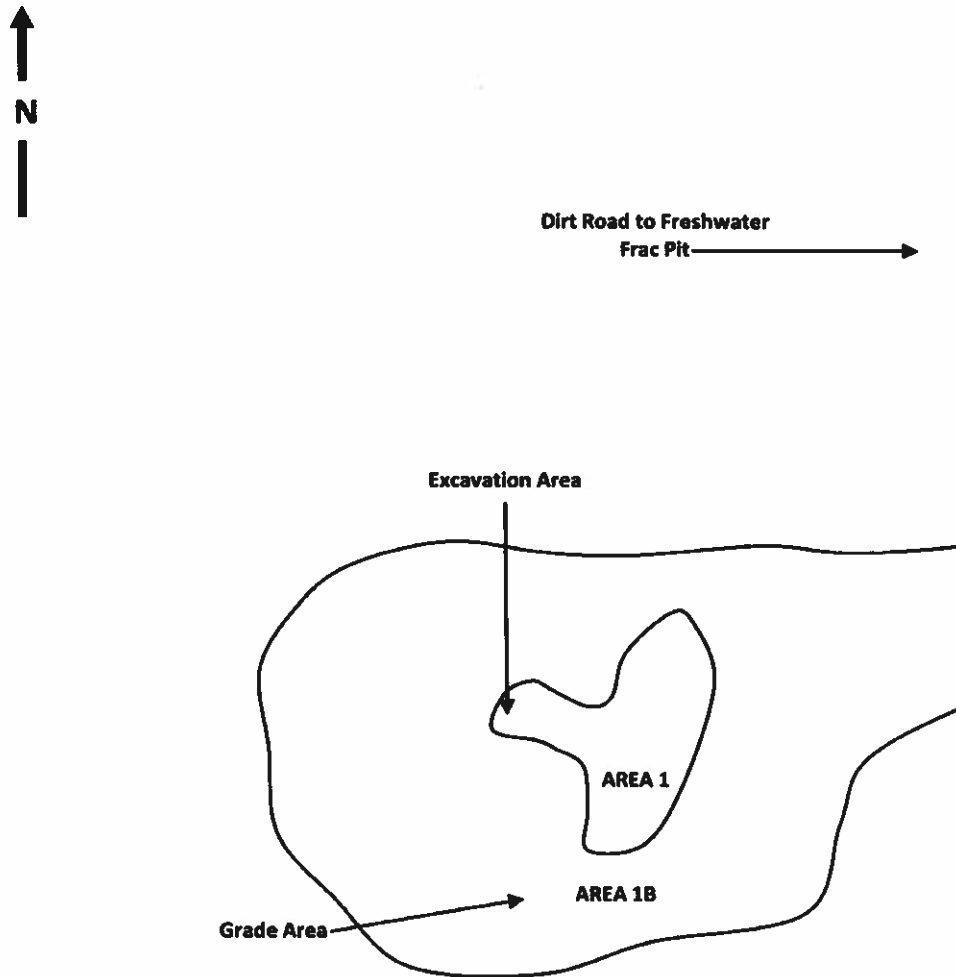
Page of

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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† Cardinal cannot accept verbal changes. Please fax written changes to 616-383-2419

Attachment D-D5 **Area 1 Analytical Data**



Area 1 Sampling Results January 22 & 24, 2014			
Sample I.D.	Reference	Depth (ft)	Chlorides (mg/kg)
SP3-25' Horizontal	Bottom	1	1020
January 24, 2014 Results			
SP3-60' Horizontal	Bottom	1	112



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 23, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/22/14 15:30.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, reading "Coley D. Keene". The signature is written in a cursive, flowing style.

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received:	01/22/2014	Sampling Date:	01/22/2014
Reported:	01/23/2014	Sampling Type:	Soil
Project Name:	QUAIL STATE 16 NO. 3H	Sampling Condition:	** (See Notes)
Project Number:	328-3657-001	Sample Received By:	Jodi Henson
Project Location:	LEA COUNTY, NM		

Sample ID: 3 D 4 W. WALL @ 3' (H400208-01)

Chloride, SM4500CI-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	01/23/2014	ND	416	104	400	0.00	

Sample ID: AREA 2 SP 14 W. WALL @ 3' (H400208-02)

Chloride, SM4500CI-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	32.0	16.0	01/23/2014	ND	416	104	400	0.00	

Sample ID: AREA 1 SP 3 1' DEEP @ 25' OUT (H400208-03)

Chloride, SM4500CI-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1020	16.0	01/23/2014	ND	416	104	400	0.00	

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene, Lab Director/Quality Manager



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(505) 393-2326 Fax (505) 393-2476**

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Page ____ of ____

[illegible]

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PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 27, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/24/14 15:50.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 01/24/2014
Reported: 01/27/2014
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-001
Project Location: LEA COUNTY, NM

Sampling Date: 01/24/2014
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: AREA 1 SP 3 @ 1' DEEP, W. 60' (H400241-01)

Chloride, SM4500Cl-B

mg/kg

Analyzed By: AP

Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	01/27/2014	ND	416	104	400	3.92	

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500C-B does not require samples be received at or below 6°C Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene, Lab Director/Quality Manager



101 East Marland, Hobbs, NM 88240

(505) 393-2326 Fax (505) 393-2476

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Page of

Company Name: E Tech		P.O. #: 228 3657 001	
Project Manager: Fred Holmes		Company:	
Address:		Attn:	
City:	State:	Zip:	Address:
Phone #: 437-563-2200		Fax #:	
Project #: 328 3657 001		Project Owner:	
Project Name: Quail State 16 No 3H		City:	
Project Location: Area 1		State:	
Sample Name: Herbicides/Insect		Zip:	
FOR LAB USE ONLY		Phone #: 437-563-2200	
Lab I.D.		Fax #:	
Sample I.D.		PRESERV	
Matrix		SAMPLING	
(G)RAB OR (C)OMP.		DATE	
# CONTAINERS		TIME	
GROUNDWATER		<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Chloride </div>	
WASTEWATER			
SOIL			
OIL			
SLUDGE			
OTHER :			
ACID/BASE:			
ICE / COOL			
OTHER :			

DELIVERED BY: (Circle One)

Sampler - UPS - Bus - Other:

Temp. **23.40 C**

Sample Condition

Cool ☒ Intact ☐

Yes ☐ No ☐

CHECKED BY: **[Signature]**

RECEIVED BY:

Date: **7/24/14**

Time: **3:50**

Received By: **[Signature]**

REMARKS: **Rush 24**

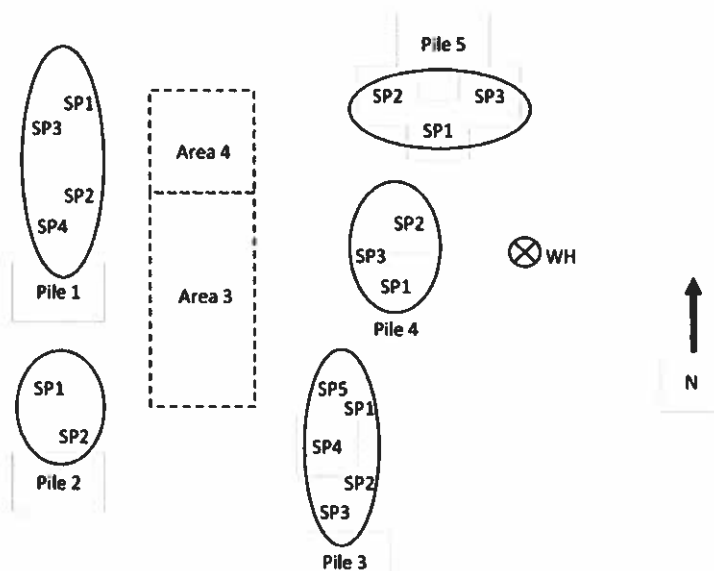
PLEASE NOTE: Liability and Damages. Customer's liability and direct costs shall remain the responsibility of the client for the analysis. All claims including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Certified within 30 days after completion of the applicable service. In no event shall Certified be liable for incidental or consequential damages, including without limitation, business interruption, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services furnished by Certified, regardless of whether such claims in based upon any of the above stated reasons or otherwise.

Terms and Conditions: Invoices will be prepared on all accounts more than 30 days past due at the rate of 2.5% per annum from the original date of invoice, and all costs of collection, including attorney's fees.

† Cardinal cannot accept verbal changes. Please fax written changes to 575-393-2476.

#54

Attachment D-D6 **Soil Pile Analytical Data**



Soil Piles December 20, 2013 Sampling Results		
Sample I.D.	Reference	Chlorides (mg/kg)
Pile 1 - SP1	Northeast Side	<16.0
Pile 1 - SP2	Southeast Side	<16.0
Pile 1 - SP3	Northwest Side	96.0
Pile 1 - SP4	Southwest Side	112
Pile 2 - SP1	Northwest Side	1070
Pile 2 - SP2	Southeast Side	656
Pile 3 - SP1	Northeast Side	576
Pile 3 - SP2	Southeast Side	<16.0
Pile 3 - SP3	Southwest Side	1010
Pile 3 - SP4	West Side	576
Pile 3 - SP5	Northwest Side	2880
Pile 4 - SP1	South Side	416
Pile 4 - SP2	Northeast Side	2720
Pile 4 - SP3	West Side	2000
Pile 5 - SP1	South Side	112
Pile 5 - SP 2	Northeast Side	64
Pile 5 - SP3	Northwest Side	176



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBES, NM 88240

December 21, 2013

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 12/20/13 16:50.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/ga/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Coley D. Keene", written in a cursive style.

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

 ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

 Received: 12/20/2013
 Reported: 12/21/2013
 Project Name: QUAIL STATE 16 NO. 3H
 Project Number: 328-3657-000
 Project Location: LEA COUNTY, NM

 Sampling Date: 12/20/2013
 Sampling Type: Soil
 Sampling Condition: ** (See Notes)
 Sample Received By: Jodi Henson

Sample ID: PILE 1 SP 1 (H303105-01)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 1 SP 2 (H303105-02)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 1 SP 3 (H303105-03)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	96.0	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 1 SP 4 (H303105-04)

Chloride, SM4500Cl-B		mg/kg	Analyzed By: AP						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	12/21/2013	ND	416	104	400	3.92	

Cardinal Laboratories

* = Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 12/20/2013
Reported: 12/21/2013
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 12/20/2013
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: PILE 2 SP 1 (H303105-05)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1070	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 2 SP 2 (H303105-06)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	656	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 3 SP 1 (H303105-07)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	576	16.0	12/21/2013	ND	416	104	400	3.92	

Sample ID: PILE 3 SP 2 (H303105-08)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	<16.0	16.0	12/21/2013	ND	416	104	400	3.92	


Sample ID: PILE 3 SP 3 (H303105-09)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1010	16.0	12/21/2013	ND	400	100	400	3.92	

Cardinal Laboratories

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

 ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

 Received: 12/20/2013
 Reported: 12/21/2013
 Project Name: QUAIL STATE 16 NO. 3H
 Project Number: 328-3657-000
 Project Location: LEA COUNTY, NM

 Sampling Date: 12/20/2013
 Sampling Type: Soil
 Sampling Condition: ** (See Notes)
 Sample Received By: Jodi Henson

Sample ID: PILE 3 SP 4 (H303105-10)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	576	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 3 SP 5 (H303105-11)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	2880	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 4 SP 1 (H303105-12)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	416	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 4 SP 2 (H303105-13)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	2720	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 4 SP 3 (H303105-14)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	2000	16.0	12/21/2013	ND	400	100	400	3.92	

Cardinal Laboratories

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Celey D. Keene, Lab Director/Quality Manager

Analytical Results For:

 ETECH Environmental & Safety Solutions, Inc.
 FRED HOLMES
 P. O. BOX 8469
 MIDLAND TX, 79708
 Fax To: (432) 563-2213

 Received: 12/20/2013
 Reported: 12/21/2013
 Project Name: QUAIL STATE 16 NO. 3H
 Project Number: 328-3657-000
 Project Location: LEA COUNTY, NM

 Sampling Date: 12/20/2013
 Sampling Type: Soil
 Sampling Condition: ** (See Notes)
 Sample Received By: Jodi Henson

Sample ID: PILE 5 SP 1 (H303105-15)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 5 SP 2 (H303105-16)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	64.0	16.0	12/21/2013	ND	400	100	400	3.92	

Sample ID: PILE 5 SP 3 (H303105-17)

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AP					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	176	16.0	12/21/2013	ND	400	100	400	3.92	

Cardinal Laboratories

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Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476

Company Name: E Tech

Project Manager: Fred Holmes

Address:

City:

Phone #:

Project #:

Project Name:

Project Location:

Sampler Name:

FOR LAB USE ONLY

P.O. #: 328-3657-000

Company:

Attn:

Address:

City:

State:

Zip:

Phone #:

Fax #:

ANALYSIS REQUEST

Lab I.D. Sample I.D.

H303105

11 pie 3 SPS

12 pie 4 SPS

13 pie 4 SPS

14 pie 4 SPS

15 pie 5 SPS

16 pie 5 SPS

17 pie 5 SPS

(G)RAB OR (C)OMP.

CONTAINERS

GROUNDWATER

WASTEWATER

SOIL

OIL

SLUDGE

OTHER :

ACID/BASE:

ICE / COOL

OTHER :

DATE

TIME

Chlorides

Relinquished By: Aug 22
Date: 8/22/03
Time: 11:50 AM
Received By: Michael

Date:

Time:

Delivered By: (Circle One)

Sampler - UPS - Bus - Other:

Sample Condition

Cool Intact Yes No

CHECKED BY:

Initials

Phone Result: ☐ Yes ☐ No Add'l Phone #:
Fax Result: ☐ Yes ☐ No Add'l Fax #:

REMARKS:

RUSH!!



PHONE (575) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

January 09, 2014

FRED HOLMES

ETECH Environmental & Safety Solutions, Inc.

P. O. BOX 8469

MIDLAND, TX 79708

RE: QUAIL STATE 16 NO. 3H

Enclosed are the results of analyses for samples received by the laboratory on 01/08/14 16:45.

Cardinal Laboratories is accredited through Texas NELAP under certificate number T104704398-13-5. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/ga/lab_accred_certif.html.

Cardinal Laboratories is accredited through the State of Colorado Department of Public Health and Environment for:

Method EPA 552.2	Haloacetic Acids (HAA-5)
Method EPA 524.2	Total Trihalomethanes (TTHM)
Method EPA 524.4	Regulated VOCs (V1, V2, V3)

Accreditation applies to public drinking water matrices.

This report meets NELAP requirements and is made up of a cover page, analytical results, and a copy of the original chain-of-custody. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Celey D. Keene

Lab Director/Quality Manager

Analytical Results For:

ETECH Environmental & Safety Solutions, Inc.
FRED HOLMES
P. O. BOX 8469
MIDLAND TX, 79708
Fax To: (432) 563-2213

Received: 01/08/2014
Reported: 01/09/2014
Project Name: QUAIL STATE 16 NO. 3H
Project Number: 328-3657-000
Project Location: LEA COUNTY, NM

Sampling Date: 01/08/2014
Sampling Type: Soil
Sampling Condition: ** (See Notes)
Sample Received By: Jodi Henson

Sample ID: PILE 3 SP 5 (H400071-01)

Chloride, SM4500CI-B

mg/kg

Analyzed By: AP

Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1040	16.0	01/09/2014	ND	400	100	400	0.00	

Cardinal Laboratories

*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



Celey D. Keene, Lab Director/Quality Manager

Notes and Definitions

ND	Analyte NOT DETECTED at or above the reporting limit
RPD	Relative Percent Difference
**	Samples not received at proper temperature of 6°C or below.
***	Insufficient time to reach temperature.
-	Chloride by SM4500Cl-B does not require samples be received at or below 6°C
	Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of the services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise. Results relate only to the samples identified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.



Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

**101 East Marland, Hobbs, NM 88240
(575) 393-2326 FAX (575) 393-2476**

Company Name: Etech		P.O. #:	
Project Manager: Fred Holmes		Company:	
Address:		Attn:	
City:	State:	Zip:	
Phone #:	Fax #:	Address:	
Project #:	Project Owner:	City:	
Project Name:		State:	Zip:
Project Location:		Phone #:	
Sample Name: Jerry Osborn		Fax #:	
FOR LAB USE ONLY			
Lab I.D. 71	Sample I.D.	(G)RAB OR (C)OMP.	
1400070	1	# CONTAINERS	
	1	GROUNDWATER	
		WASTEWATER	
		SOIL	
		OIL	
		SLUDGE	
		OTHER :	
		ACID/BASE:	
		ICE / COOL	
		OTHER :	
		DATE	
		TIME	
			Chlorides
REMARKS:			
DELIVERED BY: (Circle One) Sampler - UPS - Bus - Other:			
Relinquished By:			
Received By:			
Date:			
Time:			
Sample Condition Cool <input checked="" type="checkbox"/> Warm <input type="checkbox"/> Intact <input checked="" type="checkbox"/> Leaked <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/>			
CHECKED BY:			
Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Add'l Phone #:			
Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Add'l Fax #:			

Attachment E
Manifests



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 01
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter

Signatures

Generator: Terry D. Shash Operator 1-6-2014
Title Date
Transporter: Raul Quezada Sr 1-6-14
Title Date
Receiving Facility: Gate Master 1-6-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

- 02
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chlone contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Terry O. Oakes Operator 1-6-2014
Title _____ Date _____
Transporter: Jaime Quezada Sr _____ 1-6-14
Title _____ Date _____
Receiving Facility: S. Gonzalez _____ 1-6-14
Title _____ Date _____



P.O. Box 8469
Midland TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

03
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No.: _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No.: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

Operator

Title

1-6-2014

Date

Transporter

[Signature]

Driver

Title

1-6-14

Date

Receiving
Facility

[Signature]

Scale Master

Title

1-6-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

04

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 15 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	20	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature] Operator 1-6-2014
Title Date

Transporter

[Signature] Driver 1-6-14
Title Date

Receiving Facility

[Signature] Scalemaster 1-6-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 5
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. 19

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Terry O. Slater Operator 1-6-2014
Title Date
Transporter: Ponderosa Trucking Driver 1-6-14
Title Date
Receiving Facility: Lealand Scalemaster 1-6-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

026
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	20	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Terry & son Operator 1-5-2014
Title Date
Transporter: Ponderosa Trucking Driver 1-6-14
Title Date
Receiving Facility: S. Gonzalez 1-6-14
Title Date



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Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

37
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 1-6-2014
Title Date
Transporter: [Signature] Driver 1-6-14
Title Date
Receiving Facility: [Signature] [Signature] 1-6-14
Title Date



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Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

8
(Load No.)

Generator Information

~~FASHER OIL & GAS~~
~~Drilling~~
Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator [Signature] Operator 1-6-2014
Title Date

Transporter [Signature] Driver 1-6-14
Title Date

Receiving Facility [Signature] Scalemaster 1/6/14
Title Date



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Midland, TX 79708
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Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 009
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 6-5-14
Title Date
Transporter: JAIME QUEZADA Sr 1-6-14
Title Date
Receiving Facility: [Signature] 1-6-14
Title Date



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Fax 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 0/0
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: operator 6 Jun 14
Title Date
Transporter: Driver 1-6-14
Title Date
Receiving Facility: 1-6-14
Title Date



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Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 011
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 6-25-14
Title Date
Transporter: Dondrea Trucking Driver 1-16-14
Title Date
Receiving Facility: _____
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 012
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator [Signature] operator 6 Jan 14
Title Date

Transporter PONDEROSA truck operator 1-6-14
Title Date

Receiving Facility [Signature] Echofer 1-6-14
Title Date



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Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 013
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: San Hile operator 6-5-14
Title Date
Transporter: JAIME QUELADA _____ 1-6-14
Title Date
Receiving Facility: J Gonzalez _____ 1-6-14
Title Date



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Midland, TX 79708
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Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 014
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 6-5-14
Title Date
Transporter: [Signature] Driver 1-6-14
Title Date
Receiving Facility: [Signature] Gonzalez 1-6-14
Title Date



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Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 015
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Leon J. L. Operator 6-16-14
Title Date
Transporter: Ponderosa Trucking Driver 6-16-14
Title Date
Receiving Facility: _____
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 016
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: _____ Title _____ Date _____
Transporter: PONDEROSA truck chofer Title _____ Date 1-6-14
Receiving Facility: S. Gonzalez Title _____ Date 1-6-14



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Midland, TX 79708
Tel. 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 017
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 7 Jan 14
Title Date
Transporter: JAIME QUEZADA Sr DRIVER 1-7-14
Title Date
Receiving Facility: [Signature] 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 018
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Title: Mr Date: 7 Jan 14
Transporter: [Signature] Title: 1-7-14 Driver Date: 1-7-14
Receiving Facility: [Signature] Title: _____ Date: 1-7-14

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Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 019
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations		CY	

Transporter Information

Transporter:	<u>Blade</u>	I.D. No.:	<u>4096</u>
Address:	<u>1100 East Michigan Dr</u>	Phone:	<u>575-390-5004</u>
City/State:	<u>Hobbs, NM</u>	Truck No.	

Receiving Facility Information

Facility:	<u>Lealand</u>	Phone:	<u>405-236-4257</u>
Address:	<u>180 US 62</u>	Permit No:	<u>SWM131401</u>
City/State:	<u>Carlsbad, NM</u>		

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility. I certify that the designated waste(s), were received via the designated transporter.

Signatures

Generator	<u>Leon #8</u>	operator	<u>07 Jan 14</u>
		Title	Date
Transporter	<u>Armando Solis</u>	<u>Driver</u>	<u>01 07 14</u>
		Title	Date
Receiving Facility	<u>S Gonzalez</u>		<u>1-7-14</u>
		Title	Date



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Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 020
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator [Signature] operator 07 Jun 14
Title Date

Transporter PONDEROSA TRUCK chofer 1-7-2014
Title Date

Receiving Facility [Signature] _____ 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 02
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 7 Jan 14
Title Date
Transporter: [Signature] Driver 1-7-14
Title Date
Receiving Facility: [Signature] 1-7-14
Title Date



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Midland, TX 79708
Tel. 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 022
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No. 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 2 Jan 14
Title Date
Transporter: [Signature] Driver 1-7-14
Title Date
Receiving Facility: [Signature] scalemaster 1-7-14
Title Date



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Midland, TX 79708
Tel: 432-563-2200
Fax 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 023
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations		CY	

Transporter Information

Transporter: Blade I.D. No: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Leon [Signature] Title: operator Date: 7 Jan 14
Transporter: Armando Solis Title: DRIVER Date: 010714
Receiving Facility: S. Gonzalez Title: Date: 1-7-14



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 024
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator [Signature] operator 7 Jan 14
Title Date

Transporter PONDEROSA TRUCK driver 1-7-2014
Title Date

Receiving Facility S Gonzalez _____ 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 025
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter

Signatures

Generator: T. J. E. S. Operator 1-7-2014
Title Date
Transporter: Shane Quintero DRIVER 1-7-14
Title Date
Receiving Facility: S. Gonzalez 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 20
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 1-7-14
Title Date
Transporter: [Signature] Driver 1-7-14
Title Date
Receiving Facility: [Signature] S. Gonzalez 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

27
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 15 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 1-7-2014
Title Date
Transporter: ARMANDO SOUZA DRIVER 01-07-2014
Title Date
Receiving Facility: S. Gonzalez 1-07-2014
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

28

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Terry Osh

Operator

Title

1-7-2014

Date

Transporter

PONDEROSA truck

chefer

Title

1-7-2014

Date

Receiving
Facility

S. Gonzalez

Title

1-7-2014

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

29
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Title: operator Date: 8 Jan 14
Transporter: HERNANDO SOLIS Title: DRIVER Date: 01 08 14
Receiving Facility: S Gonzalez Title: Date: 1-8-14



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

30
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Title: Operator Date: 7 Jan 14
Transporter: [Signature] Title: Driver Date: 1-7-14
Receiving Facility: Santos Gonzalez Title: _____ Date: 1-7-14



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 31
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 7 Jan 14
Title Date

Transporter: [Signature] chafer 1-7-2014
Title Date

Receiving Facility: [Signature] Scale Master 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 32
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations		CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter

Signatures

Generator operator 7 Jan 14
Title Date
Transporter 1-7-14
Title Date
Receiving Facility 1-7-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 33
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Terry Osh Operator 1-8-14
Title Date
Transporter: Jimmy Gonzalez Driver 1-8-14
Title Date
Receiving Facility: S. Gonzalez 1-8-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 34
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No.: _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Title: operator Date: 8 Jun 14
Transporter: [Signature] Title: _____ Date: 1-8-14
Receiving Facility: [Signature] Title: _____ Date: 1-8-14



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 35
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	CY	

Transporter Information

Transporter: Blade T.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter

Signatures

Generator: [Signature] operator 8 Jan 14
Title Date

Transporter: PONDEROSA TRUCK chofer 1-8-2014
Title Date

Receiving Facility: Santa Gonzalez _____ 1-8-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No. 328-3657-001 - 36
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 8 Jan 14
Title Date
Transporter: [Signature] Driver 1-8-14
Title Date
Receiving Facility: [Signature] 1-8-14
Title Date



P O. Box 8469
Midland, TX 79708
Tel 432-563-2200
Fax 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 37
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr Phone: 575-390-5004
City/State: Hobbs, NM Truck No.

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 8 Jan 14
Title Date
Transporter: JAMES GONZALEZ Sr Driver 1-8-14
Title Date
Receiving Facility: Santos Gonzalez 1-8-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

38
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>30</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator  operator 8 Jan 14
Title Date

Transporter PONDEROSA truck chofer 1-8-2014
Title Date

Receiving Facility S. Gonzalez 1-8-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No)

39

(Load No)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

operator

Title

18 Jan 14

Date

Transporter

[Signature]

Driver

Title

1-8-14

Date

Receiving Facility

[Signature]

Title

1-8-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No)

40
(Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Lea 2/18 operator 9 Jan 14
Title Date
Transporter: James Quezada Driver 1-9-14
Title Date
Receiving Facility: Lea 2/18 Clerk 1-9-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel 432-563-2200
Fax 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No)

41
(Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 9 Jan 14
Title Date
Transporter: [Signature] DIAVER 1 9 14
Title Date
Receiving Facility: [Signature] Clerk 1-9-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

42
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator [Signature] operator 9 Jan 14
Title Date

Transporter PONDEROSA truck chofer 1-9-2014
Title Date

Receiving Facility [Signature] Clerk 1-9-2014
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

43
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Leon H. D. 6

operator

Title

9 Jan 14

Date

Transporter

ARMANDO SOUS

DRIVER

Title

01 09 14

Date

Receiving Facility

[Signature]

Clerk

Title

1-9-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.) 44

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

operator

Title

9 Jan 14

Date

Transporter

Driver

Title

1-9-14

Date

Receiving Facility

Clerk

Title

1-9-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.) 115

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave

Phone: 713-435-8100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Leon 9/6/14

operator

Title

9 Jan 14

Date

Transporter

[Signature]

Driver

Title

1 9 14

Date

Receiving Facility

[Signature]

Clerk

Title

1-9-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

46

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Leon H. [Signature]

operator

Title

9 Jan 14

Date

Transporter

P. W. Derosa

Truck chofer

Title

1-9-2014

Date

Receiving Facility

[Signature]

Clerk

Title

1-9-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 47
(Project No.) (Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Leon H. [Signature] operator 9 Jan 14
Title Date
Transporter: ARMAUNO SOUS DRIVER 01 09 14
Title Date
Receiving Facility: [Signature] Clerk 1-9-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

46
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavailee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Leon HKS

operator

Title

9 Jan 14

Date

Transporter

Jane Depaduk

DRIVER

Title

1-9-14

Date

Receiving Facility

[Signature]

Clerk

Title

1-9-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

49
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Sean Hobbs

operator
Title

9 Jan 14
Date

Transporter

[Signature]

DRIVER
Title

1 9 14
Date

Receiving Facility

[Signature]

Clerk
Title

1-9-14
Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 50
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] operator 9 Jan 14
Title Date
Transporter: [Signature] chofer 1-9-2014
Title Date
Receiving Facility: [Signature] Clerk 1-9-2014
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001 - 51
(Project No) (Load No)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: Jason H. [Signature] operator 9 Jan 14
Title Date
Transporter: [Signature] DRIVER 01 09 14
Title Date
Receiving Facility: [Signature] Clerk 1-9-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

3052
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	20	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Tony D. Lee

OPERATOR

Title

1-8-14

Date

Transporter

JAIME QUELARR

DRIVER

Title

1-8-14

Date

Receiving Facility

S. GONZALEZ

Title

1-8-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

37 53
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	20	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: T. J. S. [Signature] Title: operator Date: 1-8-14
Transporter: PONDEROSA truck Title: chofer Date: 1-8-2014
Receiving Facility: Santa Gonzalez Title: Date: 1-8-14



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

0154
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] Operator 23 Jan 14
Title Date
Transporter: [Signature] [Signature] 1-23-14
Title Date
Receiving Facility: [Signature] [Signature] 1-23-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

Title

23-Jan-14

Date

Transporter

[Signature]

Title

1-23-14

Date

Receiving Facility

[Signature]

Title

1-23-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	20	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

Operator

Title

23 Jan 14

Date

Transporter

JAIME GONZALEZ S2

[Signature]

Title

1-23-14

Date

Receiving Facility

J. Gonzalez

Title

1-23-14

Date



P.O. Box 8489
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

57
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] [Signature] 23 Jan 14
Title Date
Transporter: [Signature] [Signature] 1-23-14
Title Date
Receiving Facility: [Signature] [Signature] 1/23/14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.) 58

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

[Signature]

Title

24 Jan 14

Date

Transporter

[Signature]

[Signature]

Title

1-24-13

Date

Receiving Facility

[Signature]

Title

1-24-14

Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

104
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator: [Signature] OPERATOR/SETE SUP 1-27-14
Title Date
Transporter: [Signature] DRIVER 1-27-14
Title Date
Receiving Facility: S. Gonzalez 1-27-14
Title Date



P.O. Box 8489
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

72 65
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.: _____
County/State: Lea, NM Facility Type: Gas Well

Waste Information			
Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No. _____

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator K. O. S. Operator / Site Sup. 1-27-14
Title Date
Transporter Travis G. Gentry Driver 1-27-14
Title Date
Receiving Facility S. Gonzalez _____ 1-27-14
Title Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

06 59
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

operator
Title

24 Jan 14
Date

Transporter

JAMES GARCIA SR

DRIVER
Title

1-24-14
Date

Receiving
Facility

S GUNZALIZ

Title

1-24-14
Date



P.O. Box 8489
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

(Load No.) 60

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.:

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No.:

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

[Signature]

operator
Title

24 Jan 14
Date

Transporter

[Signature]

Driver
Title

1-24-14
Date

Receiving Facility

[Signature]

Title

1-24-14
Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No)

(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Jan 24/14

operator
Title

24 Jan 14
Date

Transporter

James Brannon

Driver
Title

1-24-14
Date

Receiving Facility

S. Gonzalez

Title

1/24/14
Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001

(Project No.)

09 02
(Load No.)

Generator Information

Generator: Precision Drilling

Contact: Christian Lavallee

Address: 10350 Richmond Ave.

Phone: 713-435-6100

City/State: Houston, TX 77042

Property/Lease Name: Quail State 16 No 3H

Lease No.: _____

County/State: Lea, NM

Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	CY	

Transporter Information

Transporter: Blade

I.D. No.: 4096

Address: 1100 East Michigan Dr.

Phone: 575-390-5004

City/State: Hobbs, NM

Truck No. _____

Receiving Facility Information

Facility: Lealand

Phone: 405-236-4257

Address: 180 US 62

Permit No: SWM131401

City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

Signatures

Generator

Leon Z...

operator
Title

24 Jan 14
Date

Transporter

LAIME QUEZADA SR

Driver
Title

1-24-14
Date

Receiving Facility

S. GONZALEZ

Title

1-24-14
Date



P.O. Box 8469
Midland, TX 79708
Tel: 432-563-2200
Fax: 432-563-2213

Non-Hazardous Waste Manifest

Manifest No: 328-3657-001
(Project No.)

10 63
(Load No.)

Generator Information

Generator: Precision Drilling Contact: Christian Lavallee
Address: 10350 Richmond Ave. Phone: 713-435-6100
City/State: Houston, TX 77042
Property/Lease Name: Quail State 16 No 3H Lease No.:
County/State: Lea, NM Facility Type: Gas Well

Waste Information

Description	Quantity	Unit	Waste Code
Chloride contaminated soil from drilling operations.	<u>20</u>	<u>CY</u>	

Transporter Information

Transporter: Blade I.D. No.: 4096
Address: 1100 East Michigan Dr. Phone: 575-390-5004
City/State: Hobbs, NM Truck No.:

Receiving Facility Information

Facility: Lealand Phone: 405-236-4257
Address: 180 US 62 Permit No.: SWM131401
City/State: Carlsbad, NM

Certification Statements

Generator: The waste(s) described above is not a hazardous waste pursuant to 40 CFR Part 261 and any applicable state or local regulations based upon process knowledge, and/or analysis, and/or MSDS.

Transporter: I certify the waste in quantity above was received by me for shipment to the designated receiving facility.

Receiving Facility: I certify that the designated waste(s) were received via the designated transporter.

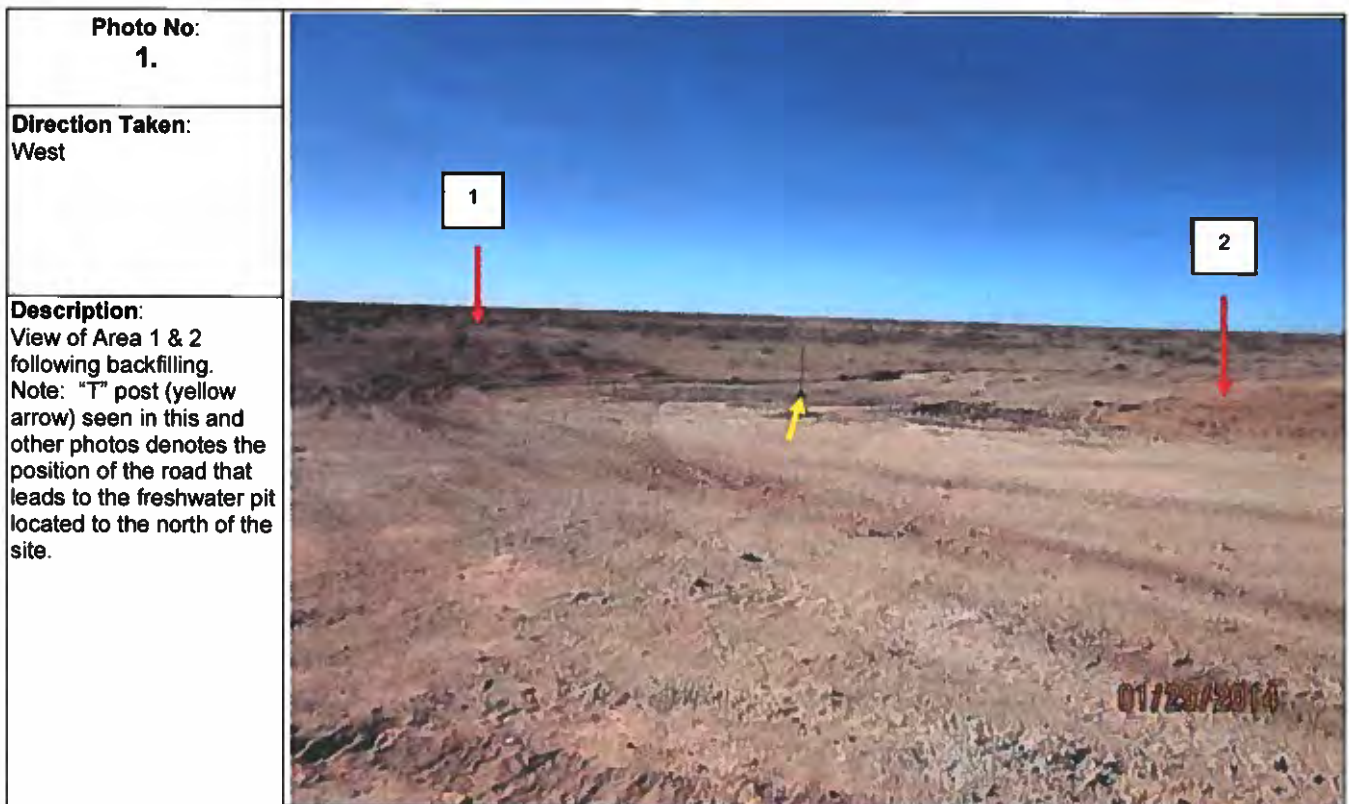
Signatures

Generator: [Signature] operator 24 Jan 14
Title Date
Transporter: [Signature] Driver 1-24-14
Title Date
Receiving Facility: [Signature] 1-24-14
Title Date

Attachment F
Photographs

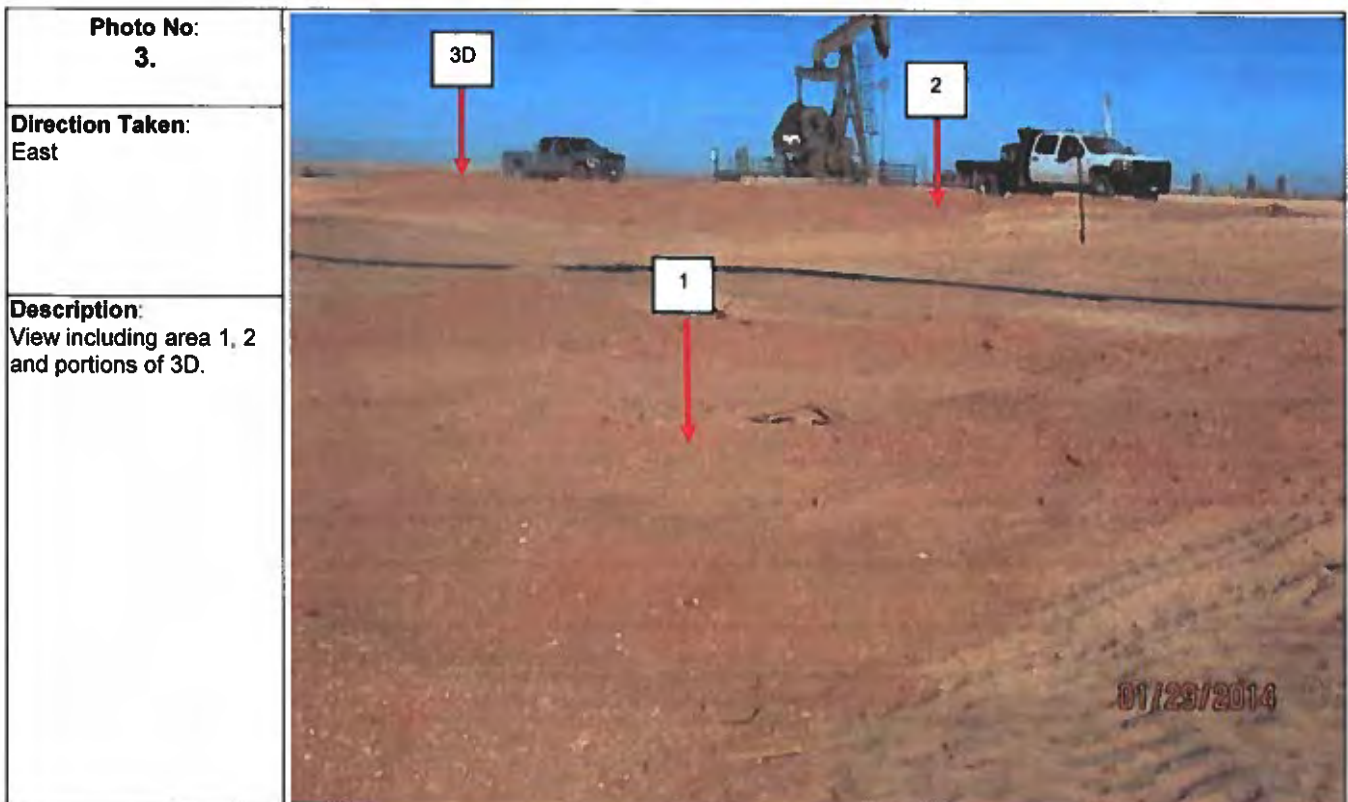
Project Name: Quail State 16 No. 3H
Project No: 328-3657-001

Photograph Log
Date Taken: January 29, 2014



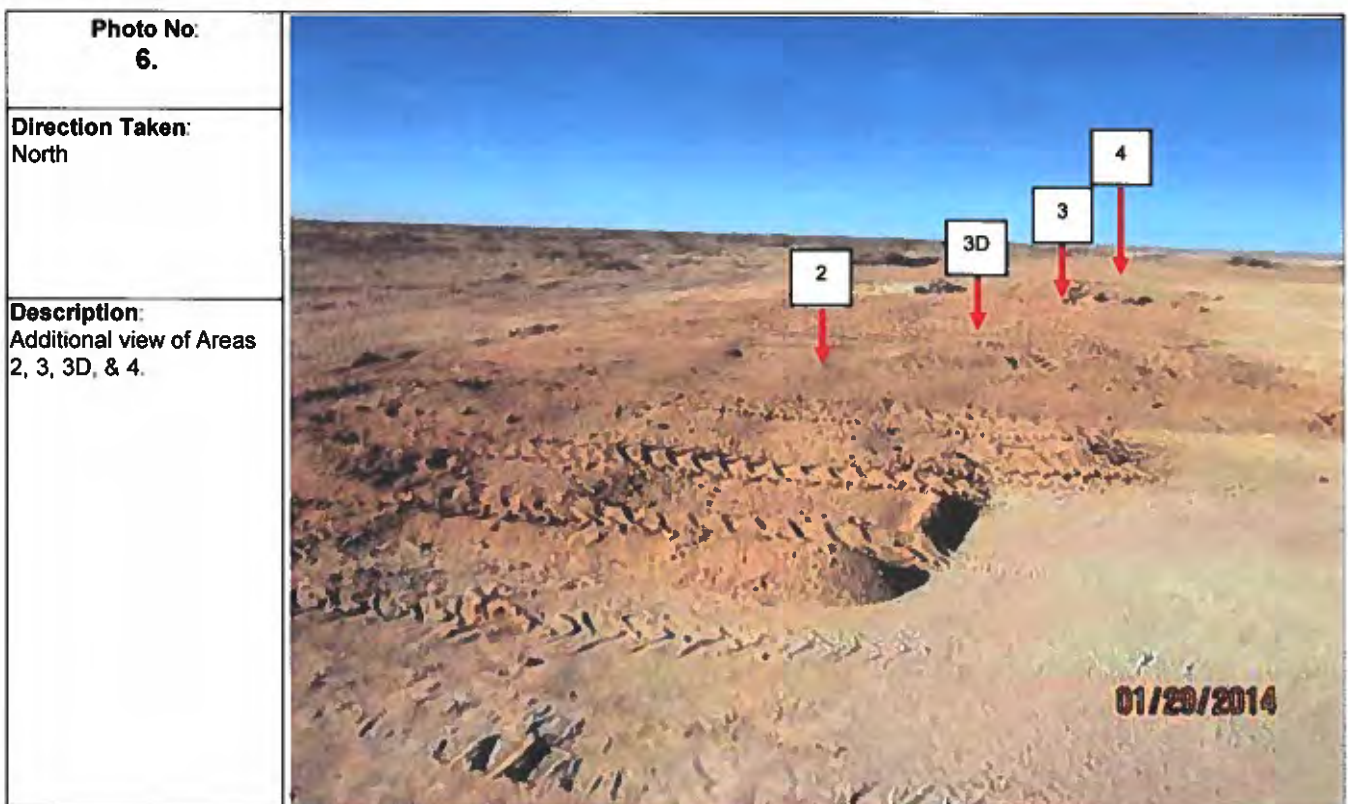
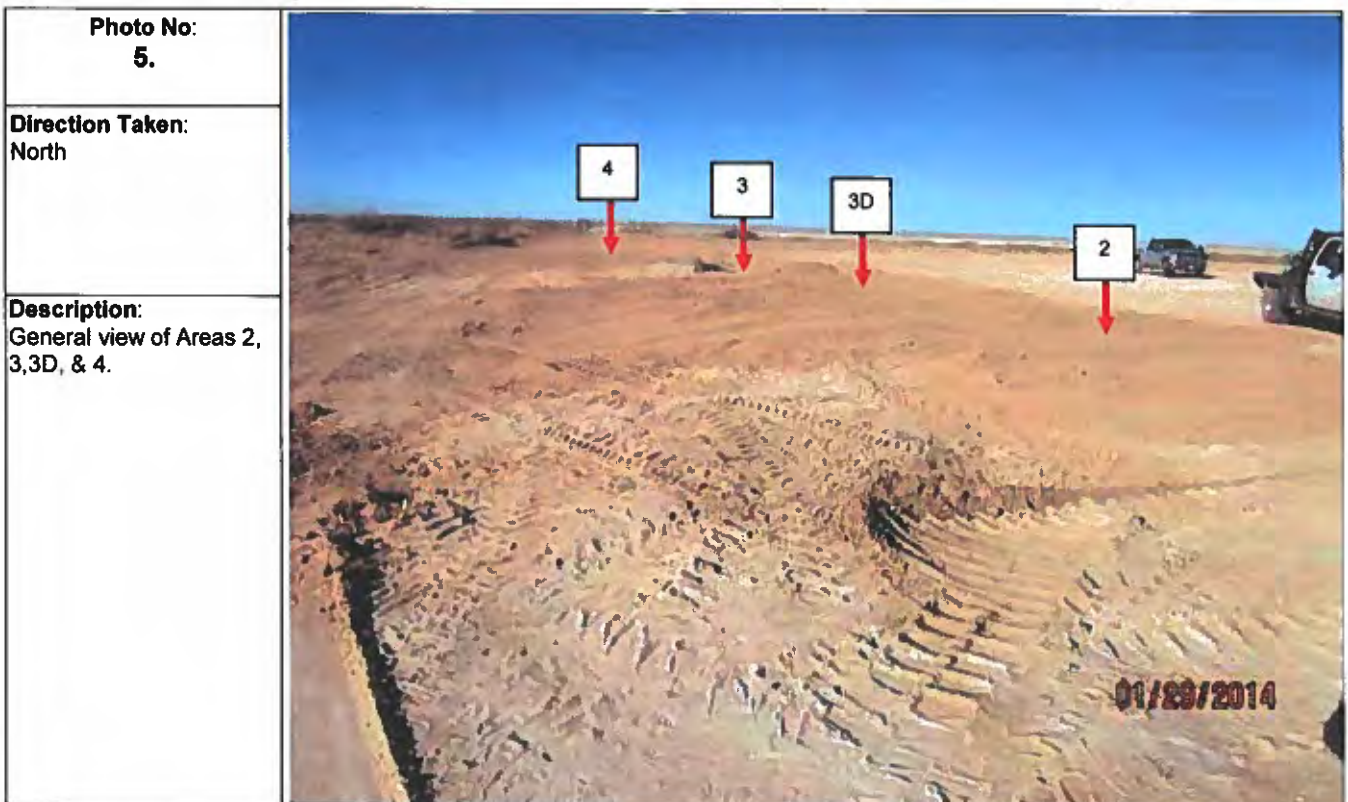
Project Name: Quail State 16 No. 3H
Project No: 328-3657-001

Photograph Log
Date Taken: January 29, 2014



Project Name: Quail State 16 No. 3H
Project No: 328-3657-001

Photograph Log
Date Taken: January 29, 2014



Project Name: Quail State 16 No. 3H
Project No: 328-3657-001

Photograph Log
Date Taken: January 29, 2014

