NM1 - ___63____

ANNUAL REPORT

2020



OWL Landfill Services, LLC (dba) Northern Delaware Basin Landfill 8201 Preston Rd. Suite 520 Dallas, Texas 75225 (214) 292-2011

Date: August 25, 2021

Mr. Brad Jones **EMNRD Oil Conservation Division** 1220 S. Saint Francis Dr. Santa Fe, NM 87505

RE: **Annual Reporting**

OWL Landfill Services, LLC, (dba) Northern Delaware Basin Landfill, Lea County,

New Mexico

Commercial Surface Waste Management Facility Permit NM1-63. Section 23, Township 24 South, Range 33 East NMPM, Lea County, New Mexico dated 08/17/2017

Dear Mr. Jones:

As part of our Commercial Surface Waste Management Facility Permit NM1-63, located in Lea County, New Mexico, OWL Landfill Services, LLC is required to submit an annual report to the Oil Conservation Division (OCD) by September 1st of each year, providing information for the preceding year.

Section 2. General Facility Operations, Item D. specifically states:

Annual Report. The operator must submit an annual report to the OCD by September 1st of each year providing the following information for the preceding year: 1) all inspection forms including those for leak detection systems along with analytical results, 2) hydrogen sulfide monitoring results, 3) process piping integrity test results, 4) training records, 5) complaint logs and resolutions, and 6) a summary of the nature and amount of any reportable releases.

To address this requirement, I would like to offer the following as it pertains to Section 2, D of our Commercial Surface Waste Management Facility Permit:

- 1) All inspection forms including those for leak detection systems along with analytical results - The facility officially opened in May 2020 and the leak detection systems were inspected in accordance with the facility operating permit. Accordingly, the inspection forms are attached as required for the preceding year 2020. Additionally, no fluids were detected in the leak detection sumps and no issues with the leak detection sumps were noted during the inspection; therefore, there are no analytical results to present.
- 2) Hydrogen Sulfide monitoring results The Hydrogen Sulfide (H2S) monitoring systems as detailed in the constructions plans around the disposal pit, evaporation

pond(s), drying pad(s), liquids processing facility, were installed and operational in May 2020. Additionally, the site was to monitor loads of incoming wastes for the presence of H2S. Accordingly, the H2S monitoring system which monitors the site and cycles multiple times per day is tested and calibrated monthly by a third-party vendor, Safety Solutions, LLC. There have been no instances of H2S on site in 2020. Incoming waste loads are also checked at the point of unloading at the mud plant and the results are entered into our Point-of-Sale system and kept in an on- line data base. Each load of incoming waste has the results of the monitoring, either pass or fail, and can be viewed at any time on-site. Any load that fails is rejected and taken off site. In 2020 there were not any loads that tested positive for the presence of H2S.

Each OWL employee is issued a personal H2S Monitor to wear under circumstances where H2S may be present, including when they are testing or unloading materials that may contain H2S.

While the option exists to treat incoming waste loads containing H2S, it is the operating policy to reject loads that contain H2S to further protect the employees and public which utilize the site. In the year 2020, no incoming waste loads were rejected due the presence of H2S as tests resulted in "no presence" of H2S.

3) Process piping integrity test results – Process piping as detailed in the construction plans were completed in May 2020. It is a matter of daily operations that the employees working the site inspect the process piping daily weekly and monthly for leaks in welded joints, loose fittings and flanged connections and immediately report the issue for prompt correction.
As part of the monthly inspections, the site personnel walk / inspect the process piping and note deficiencies if found, and immediately address the issue. In 2020,

there have been no process piping failures and no integrity issues noted.

- 4) Training records Training is completed by third party safety company, Got Safety, LLC out of Hobbs, NM. All new and current employees are trained on site by the safety company and training records are kept in a database for review at any time. The hiring process began in February 2020 and in 2021, largely due to COVID 19, the site will be transitioning to an on-line Learning Management system due to the shortage of on-site trainers available.
- 5) Complaint logs and resolutions –The facility became operational in May 2020 and as part of the permit requirement, OWL is to provide complaint logs and resolutions if any are reported. For the period of May 2020, through December 2020 there were no issues and/or complaints filed with landfill personnel by any user or member of the public.
- 6) Summary of the nature and amount(s) of any reportable releases The facility became operational in May of 2020. OWL is to provide a summary of the nature and amount(s) of any reportable releases if any occur. Releases, if any occur are to be reported both verbally and timely written notice on Form C141. For the period of May 2020 through December 2020, no reportable releases occurred, therefore no notice, either verbally or written was required.

 Accordingly, OWL cannot submit a summary of the nature and amount(s) of any

reportable releases (if any) as required for the preceding year 2020 as there have not been any reportable releases associated with the operation of the facility for the year 2020.

OWL Landfill Services. LLC is committed to the safety of the general public, our employees, and the environment and will operate in a productive, responsible manner. The OWL Facility is designed in compliance with 19.15.36 NMAC, and will be constructed and operated in compliance with our Surface Waste Management Facility Permit NM1-63.

If you have any further questions or feel this letter does not serve its intended purpose of reporting for the preceding year, please feel free to contact me at (281) 802-2038 or by e-mail at tshreve@ndblandfill.com. On behalf of OWL Landfill Services, LLC, I wish to thank you in advance for your continued support of this facility.

Sincerely,

Tim Shreve

Director of Landfill Operations OWL Landfill Services, LLC

Timothy Shreve

ATTACHMENT II.1.C

Inspection Form OWL Landfill Services, LLC

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Others.	Signatu	e: ->	
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Pit and Pond marker numbers			
Treatment Plant inspection			
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Blowing trash			
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Lea County Sheriff	575-397-3611	NWOOD Santa re	303 -4 70 - 3440
		Receipt & Approval	
		Name:	
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ATTACHMENT II.1.C

Inspection Form OWL Landfill Services, LLC

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OWL Office	nd of the Pond. If H ₂ S levels reasons 505-231-1071	nch 20 ppm, the Facility NMOCD Hobbs	will be closed and notification 575-393-6161
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ATTACHMENT II.1.C

Inspection Form

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OWL	Landfill	Services,	LLC

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Free oil on Pits-Ponds		/	
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Treatment Plant inspection		/	
Solid waste disposal area inspec	ction	/	
Blowing trash		/	
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Landfill Leachate Sump		/	
Groundwater Monitoring		/	
Pond Sludge Depth			
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OWL Office	505-231-1071	NMOCD Hobbs	575-393-6161
New Mexico State Police	575-392-5580	NMOCD Floods NMOCD Santa Fe	505-476-3440
Lea County Sheriff	575-397-3611	Timoob Jana 10	
		Receipt & Approval	5
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ATTACHMENT II.1.C Inspection Ferm OWL Landfill Services, LLC

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ATTACHMEN'I II.1.C Inspection Ferm

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OWL	Landfill Serv	ces.	LLC

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OWL Office	575-231-1071	MOCD Hobb	s 575-393-6161
New Mexico State Police	575-392-5580	MOCD Santa	
Lea County Sheriff	575-397-3611		
		l eceipt & App Name:	proval
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ATTACHMEN' II.1.C

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Date: 8/5/20		- 2	h Pamos
Others:			
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Inspec	etion will be in accordance with N	AOCD operati	ional conditions.
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Berms and outside pond levees			
Tank Labels			
Sumps			
Pond levels three-foot free board			
Free oil on Pits-Ponds		_/	
Pit and Pond condition			
Pit and Pond marker numbers			
Treatment Plant inspection			
Solid waste disposal area inspect	ion		Cleanel Da: 10
Blowing trash			CIEDANI DA: 11)
Fences and Gates			
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OWL Office	575-231-1071	MOCD Hobbs	575-393-6161
New Mexico State Police		MOCD Floods MOCD Santa I	
Lea County Sheriff	575-397-3611	MOCD Santa	303-470-3440
Lea County Sheriff	575-577-5011		
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Date:____

ATTACHMENT II.1.C Inspection Ferm

OWL Landfill Serv ces, LLC 9/11/2020 Print Name: Zalh Camos Others: Inspection will be in accordance with N AOCD operational conditions. Item Satisfactory **Action Required** Entrance Sign Berms and outside pond levees Tank Labels Sumps Pond levels three-foot free board Free oil on Pits-Ponds Pit and Pond condition Pit and Pond marker numbers Treatment Plant inspection Solid waste disposal area inspection CLEANY DAILY Blowing trash Mad Crew Walk grown past pickup Fences and Gates Leak detection sumps - Landfill - Liquid present? / Leak detection sumps - Evaporation Ponds - Liquid present? Leak detection sumps - Drying Pad - Liquid present? Landfill Leachate Sump Checks And Eppersel Workly Groundwater Monitoring Pond Sludge Depth *Comments & Repairs: All water is Bonn Stret To Water At the money H₂S READINGS ARE TO BE TAKEN 4 FT DOWNV IND FROM EVAPORATION PONDS Evaporation Pond (readings in ppm): **POND** 1 2 3 4 5 6 7 8 9 10 11 12 *In the event that a reading of 10 ppm is registered at the Facility, personnel will evacuate the area and operator will monitor H2S levels at the downwind of the Pond. If \(\frac{1}{2} \)S levels reach 20 ppi , the Facility will be closed and notification will be given to the following: OWL Office 575-231-1071 1 MOCD Hobbs 575-393-6161 New Mexico State Police 575-392-5580 MOCD Santa Fe 505-476-3440 Lea County Sheriff 575-397-3611

> l eceipt & Approval Name:

> > Date:

ATTACHMEN'I II.1.C

	Inspection F OWL Landfill Ser-		
Date: 10/17/2020	Print Name:	Bách	Rume <
Others:	Signature:		
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Inspec	tion will be in accordance with N	4OCD operat	ional conditions.
Item		Satisfactory	Action Required
Entrance Sign		/	
Berms and outside pond levees			
Tank Labels			
Sumps			
Pond levels three-foot free board			
Free oil on Pits-Ponds			
Pit and Pond condition			
Pit and Pond marker numbers			
Treatment Plant inspection			
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OWL Office		MOCD Hobbs	
New Mexico State Police		MOCD Santa	Fe 505-476-3440
Lea County Sheriff	575-397-3611		
			V2000 •
	1	eceipt & Appr	roval
		Name:	

Date:____

ATTACHMEN'I II.1.C Inspection Form OWL Landfill Services, LLC

Date: ///16/2020	Print Name	100 LLC	ah Ramos	
Others:	Signature:	N	2	
Inspe	ection will be in accordance with	h N 40CD operat	tional conditions.	
Item		Satisfactory	Action Required	
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		l eceipt & App		
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ATTACHMENT II.1.C Inspection Form OWL Landfill Services, LLC

OWL Landfill Serv	ces, LLC

Date: 12/29/20	>26 Print!	Name: Znc	harah Ramos
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Insp	ection will be in accordance	e with N 4OCD opera	tional conditions.
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Sumps			
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Free oil on Pits-Ponds		/	
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Pit and Pond marker numbers		/	
Treatment Plant inspection		/	
Solid waste disposal area inspe	ction	/	CLEANE DATY
Blowing trash		/	150
Fences and Gates		/	
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Leak detection sumps - Evapor	ation Ponds - Liquid preser	nt?	
Leak detection sumps - Drying	Pad - Liquid present?	/	
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Pond Sludge Depth		/	110011/
*Comments & Repairs:	Datier Stat	down linet	, Plant upaniel Riverais
And Drying	padgetting ch	raled.	1 1 min apart promise)
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OWL Office	575-231-1071	MOCD Hobb	
New Mexico State Police	575-392-5580	MOCD Santa	Fe 505-476-3440
Lea County Sheriff	575-397-3611		
		l eceipt & App Name:	oroval

ATTACHMENT II.8.B

Pond Integrity/Leak Detection Inspection Form OWL Landfill Services, LLC

				Page of
<u>Date:</u> <u>Time:</u>	(Inspector(s):	-MoS
			87 <u></u>	
Weather:	Q2,5			
	PATHY Cloy		Precipitation (last 24 hours	inches
		- 27		
	Transition of the second	mph		
Wind Direction	NW	(direction blowing from)		
		ographs, and Samples are p	has been taken. "S" indicate provided on attached pages.	
		Pond Condition	tem	
Location	Erosion	Vegetation Established	Vectors	Sample
Pond 1	good	good	good	Pond Empty
		E		
		(8)		
		Leak Detection System		
		Defi	iciency]
	Riser #	Depth of H₂O	Structural Defect	
	Pond 1	Ð		
	LEAKON			
	Landfill	0		
	Drying Pacl	4		_
]
NOTES:	p fly	rd in lead	k defection (

				Page	_ of
<u>Date:</u> <u>Time:</u>	5/21/2020 11:00 AM		Inspector(s): Zachlama	5	
Weather:					
Temperature	840	deg. F	Precipitation (last 24 hours)	0	_ inches
Skies	P/c	•			
	20 mph	mph	•		
		(direction blowing from)			
			nas been taken. "S" indicates i provided on attached pages. I		
		It	em		
Location	Erosion	Vegetation Established	Vectors	Sampl	c
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	×				
		Leak Detection System			
	D: #		ciency Structural		
	Riser#	Depth of H₂O	Defect		
	Poned	0			
	LANGE !!	0			
	Dryng Pod	V			
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l	((1)				
NOTES:	No tly.	d in len	12 defections	,	

				Page of
<u>Date:</u> <u>Time:</u>	7/23/2020 Z:30pn		Inspector(s):	
Skies	FA.T	deg. F	Precipitation (last 24 hours)	inches
	ency has been noted. "P" inc		has been taken. "S" indicates provided on attached pages.	
		POND CONDITION		
520 TO			tem	
Location	Erosion	Vegetation Established	Vectors	Sample
Portal		_	_	
	LE	CAK DETECTION SYST	EM iciency	
	Riser#	Depth of H ₂ O	Structural Defect	
	Pond	-6-		
	Dry. M. Procl	0		
	LANDEN	d		
NOTES:	No flivid	hatha lo	ak dek cton 1	<u> </u>

	,	TVL Landini Services, Li	LC .	
				Page of
<u>Date:</u> <u>Time:</u>	8/27/2021 9:15 am	-	Inspector(s):	70
Weather:				
	19	deg. F	Precipitation (last 24 hours)) inches
Skies	FAY			
Wind Speed	15	mph		
Wind Direction	5.5 E	(direction blowing from)		
			nas been taken. "S" indicates provided on attached pages.	
	r	Pond Condition	★ 17007b	
Location		Vegetation It	tem	Γ
	Erosion	Established	Vectors	Sample
Portel 1	good	90001	9001	
		Look Detection Contons		
		Leak Detection System Defic	ciency	ľ
	Riser #	Depth of	Structural	
	Inwo(C)	H ₂ O	Defect	
	Pond	4		
	DryingPad	t)		
NOTES:	& fluid	IN /EAK	detect out	

				Page of
Date:	9/15/2020		Inspector(s):	
Time:	9/15/2020 10:15 Am	<u>-</u>	Zach Ramo	5
			(0. 14 St.)	
Weather:				
Temperature	12 Partly Cloud	deg. F	Precipitation (last 24 hours	inches
Skies	partly Cloud	ly		
Wind Speed	4	mph		
Wind Direction	South	(direction blowing from)		
NOTES: "X" indicates that a Deficie collected. Complete description.	ency has been noted. "P" in options of Deficiencies, Phot	ographs, and Samples are	has been taken. "S" indicate: provided on attached pages.	s that a Sample has been Items are referenced by
		POND CONDITION	tem	
Location	Erosion	Vegetation Established	Vectors	Sample
Poul #1		_	-	
	Li	AK DETECTION SYST	ЕМ	
			iciency	
	Riser#	Depth of H₂O	Structural Defect	
	LANDFILL TOPAN	1		
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	Pond	/		
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NOTES:	ØF	luid	0	

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<u>Date</u> :	: 10/8/2020 8:00 Am	_	Inspector(s):	
1 ime:	7.00 Am	-	Zachkamos	
Weather	<u>.</u>			<i>x</i>
Temperature	57	_deg. F	Precipitation (last 24 hou	inches
Skies	9000	- .:		
Wind Speed	3mph	_mph		
Wind Direction	South WEST	_(direction blowing from)		
NOTES: "X" indicates that a Deficicollected. Complete describeration.	ency has been noted. "P" in iptions of Deficiencies, Pho	ndicates that a Photograph tographs, and Samples are	has been taken. "S" indica provided on attached page	ntes that a Sample has been s. Items are referenced by
	1	POND CONDITION	Item	
Location	Erosion	Vegetation Established	Vectors	Sample
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	L	EAK DETECTION SYST Def	TEM Telency	
	Riser #	Depth of H ₂ O	Structural Defect	
	Pond	Mone		_
	LANGE:11	MONE		_
	DANG	NONE		-
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				7
NOTES:	No fluid is	NIZAK DE	tection/	

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<u>Date:</u> <u>Time:</u>	0:50		Inspector(s): Zach Pance	2.
Weather:				
Temperature	Blo D goal Klear	deg. F	Precipitation (last 24 hours)	inches
Skies	goal Klen			
Wind Speed	6 mph	mph		
Wind Direction	South sorthwest	(direction blowing from)		
		ographs, and Samples are p	nas been taken. "S" indicates i provided on attached pages. I	
	<u> </u>	POND CONDITION I	lem	
Location	Erosion	Vegetation Established	Vectors	Sample
Pordl	9001	9001	good	
	LF	AK DETECTION SYST	EM	
ĺ			ciency	
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	LANdf:11	/		
	DPAcl	/		
	Prijel			
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				Page of
<u>Date:</u>	12/29/2020 2:15 pm	·	Inspector(s): Zacharinh	Ramo s
Weather: Temperature Skies	110	deg. F	Precipitation (last 24 hours)	inches
Wind Speed	6	mph		
Wind Direction	Mass West	(direction blowing from)		
NOTES: "X" indicates that a Deficie collected. Complete description. Location.	ency has been noted. "P" inc ptions of Deficiencies, Photo	dicates that a Photograph h ographs, and Samples are p POND CONDITION	nas been taken. "S" indicates provided on attached pages.	that a Sample has been Items are referenced by
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Location	Erosion	Vegetation Established	Vectors	Sample
Pland 1	good	good	good	
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	Pord #1		-	
	LANdfill			
	Dryny Parl			
NOTES:	Ø fluid	I'M LEAK	defections	

Company Name: Northern Delaware Bosin Landfill

	City:	St. St.		7 Zip: 800	200	
Monthly Attendance Record Monthly Sa	fety:Yea	arly Block:X_	_ Make U	Ip Meeting:	Month:	
Date: 2 / 19 / 20 Expiration Date:	19121	Contact Name:	70	ich 1	Phone: 432)55	56-3076
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2. Zar hariah Kam	, <	>/				
3. E.L. EL.		0/2				
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 □ Abrasive Sandblasting 1910.94(a) □ Asbestos Awareness 1910.1001 □ Benzene Awareness 1910.1028 □ Behavior Based Safety Program □ Blood-borne Pathogens 1910.1030 □ Confined Space Entry Awareness 1910.146 □ Entrant Level □ Attendant Level □ Supervisor □ Defensive Driving 29CFR Part 500 Subpart D □ Drug & Alcohol Training □ Supervisor □ Electrical Safety/GFCI 1910.304 □ NFPA-70E □ Arc Flash Training □ Emergency Response Procedure 1910.38 □ First Aid 1910.151 CPR □ Fire Safety 1910.150 □ Bullex Hands-On □ Fire Watch Training 1915.504 □ Hand & Power Tools 1926.300 □ HAZCOM Complies GHS 1910.1200 □ Job Safety Analysis Other: □ Other Contact 	Gas Hazards C Heat Stress HAZWOPER C Awareness Hydrogen Sulfic Incident Repor Ladder Safety Lead Safety 19 Lockout/Tagou Manual Lifting Noise Exposur N.O.R.M. 1910 Personal Fall F	Bhr 24hr 4 de Certification ANSI Z3 rting & Investigation 1 & Stairways 1910.24- 910.1025 ut 1910.147 4 Auth Back 4 Hand re 1910.95 0.7 App A Protection 1910.66 Ap ective Equipment 1910 rotection 1910.134	0.101 40hr 390.1-2017 960.29 -27 norized d Safety	□ Rigging Material □ Process Safety M □ Scaffolds 1910.1 □ Short Service Er □ Stop Work Author □ Trenching/Excav □ Welding/Hot Wo □ Walking & Worki □ Oxy Orientation □ Environmental A □ Disciplinary Polic □ Winter Safety □ Aerial Lift Certificat □ Model: □ □ Forklift Certificat □ Model: □ □ Respirator Prote □ Fit Test □ Me	Management 1910 128 Inployee Drity Vation 1926.650 In 1910.253 Ing Slips Trips Fall Inwareness Incomparison Expires: Wt. Cap Wt. Cap Wt. Cap Wt. Cap Section 1910.134 A	s 1910.22 1926.453 1910.178
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and discussed test	t. Issued	cords.		~		
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Safety Passports:Ticket	#:59359 Bu	ımp Test: 🖳	Instruc	ctor: None	races	

Got Safety? LLC • 529 West Spears • Hobbs, NM 88240 • 575.738.1140

Got	Safety	?LEC
	teafatytrain	ing com

Company Name: Mothern Delaware Bosin Lander William State: MM zip: 88252

Monthly Attendance Record Monthly Safe	00		Up Meeting:	Month: Phone: <u>439 -</u> _	556-3075
Date <u>03/02/202</u> 6 Expires: <u>03</u>	1021202			ID #	SPP
Name (Must Print)		Signatu	ore		d d
1. Fabir Folela		Fell Fills		1185	
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3. Millie OHO		110010		1184	_<_
4. Zach RAMOS		7/6			9
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324 East Harris • San Angelo, TX 76903 • 325.227.8834

Revised: 04/19/2018



	City:	State: [U]	2 2	Month	
onthly Attendance Record Monthly Sa	- · · ·	20	Up Meeting:	_ Month:	
ate: 05/01/20 Expiration Date: 0	2/0/18/	Contact Name:		hone:	SPP
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O. T. T. T.		77			
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5. Seth Fstrada			/		_
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Behavior Based Safety Program	☐ HAZWOPER (On-Line 1910.120	☐ Short Service Emp	ployee	
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Confined Space Entry Awareness 1910.146		de Certification ANSI Z390.1-2017	☐ Trenching/Excava		
Entrant Level Attendant Level Supervisor	TO	rting & Investigation 1960.29	☐ Welding/Hot Work		. 1010 20
Defensive Driving 29CFR Part 500 Subpart D Drug & Alcohol Training Supervisor	☐ Ladder Safety	& Stairways 1910.24-27	Walking & WorkingOxy Orientation	g Slips Trips Falls	5 1910.22
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NFPA-70E Arc Flash Training		☐ Back ☐ Hand Safety	□ Disciplinary Policy		
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Fire Safety 1910.150 Bullex Hands-On	☐ Personal Fall F	Protection 1910.66 App C	☐ Model:	Wt. Cap	1926.4
Fire Watch Training 1915.504	☐ Personal Prote	ective Equipment 1910.132	☐ Forklift Certification	on Expires:	
. The framework of the first terms of	□ Respiratory Pr	rotection 1910.134	■ Model:	Wt. Cap	1910.1
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Hand & Power Tools 1926.300	■ Medical Case	Management	Respirator Protect	tion 1910.134 Ap	p C
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Time In:

Got Safety? LLC • 529 West Spears • Hobbs, NM 88240 • 575.738.1140

Ticket #:\o€

Course Location:

Safety Passports:

324 East Harris • San Angelo, TX 76903 • 325.227.8834



Got Safety? LEC	ny Name: Northern C	elauare	pasin Long	3821 Hull
www.gotsafetytraining.com	State: N	Mzip: 8825	2	
•	ALED N	Jp Meeting:	Month:	
Monthly Attendance Record Monthly Safety:	7-	la	SPOT	7
Date: 05/01/20 Expiration Date: 95/01 &	Contact Harrier		none: TO XX	CDD
Name (Must Print)	Signatur	e	ID#	SPP
1. MELHAEL Montanez	befrehael totontar		1197	
2. Gine Fohelo	Coino Sebello)	1195	
3. Mike Dennistan	2224	-	1193	
I THE SELLING	1		1196	0
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5. Edgar Cruz	Edging Cruz		1190	7
6. ULISES D CABOLLO	Prof.			
7. Gerordo Arrupada		7	1192	
8. SRINA PAMORA	En 6	~~	7227	
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□ Asbestos Awareness 1910.1001 □ Benzene Awareness 1910.1028 □ Behavior Based Safety Program □ Blood-borne Pathogens 1910.1030 □ Confined Space Entry Awareness 1910.146 □ Entrant Level □ Attendant Level □ Supervisor □ Defensive Driving 29CFR Part 500 Subpart D □ Drug & Alcohol Training □ Supervisor □ Drug & Alcohol Training □ Supervisor □ Drug & Alcohol Training □ Supervisor □ Electrical Safety/GFCI 1910.304 □ NFPA-70E □ Arc Flash Training □ Emergency Response Procedure 1910.38 □ First Aid 1910.151 CPR □ Fire Safety 1910.150 □ Bullex Hands-On □ Fire Watch Training 1915.504 □ Hand & Power Tools 1926.300 □ HAZCOM Complies GHS 1910.1200 □ Medical □ Medical □ Incident □ Incide	PER On-Line 1910.120	Rigging Material H Process Safety Ma Scaffolds 1910.12 Short Service Emp Stop Work Authori Trenching/Excavat Welding/Hot Work Walking & Working Oxy Orientation Environmental Aw Disciplinary Policy Winter Safety Aerial Lift Certificat Model: Forklift Certification Respirator Protect Fit Test Medi	anagement 1910. 8 bloyee ity tion 1926.650 1910.253 g Slips Trips Falls areness Ation Expires: Wt. Cap bn Expires: Wt. Cap tion 1910.134 App	1910.22
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Course Attendance Record NM 79 Company Name: North Delaware Basin Landfill LIC

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Got Salety! L		Ti (Ti)	ST.	MIL 20011				
	Col	ntact Name: ZO	ch Mar	MOU 1	Phone #: <u>L</u>	1325	5630	12
www.gotsafetytraining.co	City	n: Jal	Stat	e: NM	Zip:	882	52	
Date: 5 / 28/20 Expiration Date: 5 / 38	7/21 New Emplo	oyee Safety:	- Yearly Block:	Make Up Meeting	y:	Month:		_
Name (Print)			Signature		ID#	Passport	Card	
1. Sandra alvarez	2	andra	alvant	$\sqrt{}$	5485		SA	
2. Amy Montanez	a	my mont	meis	0	8323		SSIM	m
3. Bruce Davidson	Z	True IN	udson		7189		61	7
4. Christian Espinost	Chr	184191 158	onosA		7363		CE	
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hatten Francisco Orientation	Additional Tan	ios		Contractor C)rientatio	n	-	
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Bloodborne Pathogens 1910.1030 Back Safety	☐ Behavior Based			Oxy Orientation	on			
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Emergency Response Procedure 1910.38	☐ Hand & Power To			0	-:- 14 - T			
Fire Safety Awareness 1910.150	☐ Incident Reportir	ng & Investigation 19	960.29	Spe	ecialty Tra	aining		
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Lockout/Tagout Training 1910.147	☐ First Aid 1910.15	1 CPR		☐ Fit Test 1910	.134 App A		QNFT	
Noise Exposure 1910.95	☐ Personal Fall Pro		o C	Respirator Bran				
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Walking & Working Surfaces Slips Trips Falls 1910.22	☐ Fire Watch Train			☐ Aerial Lift 191				
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Hydrogen Sulfide Certification ANSI Z390.1-2017	Other:	<u>^</u>	<u></u>	Other:	- 112	P		
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Bave out Tests & Rev	riented n			~			4	
Instructor: Lilliana Aranga	Jo	b Ticket #: US	54 Passpo		Bump		4	
Course Location: JAL, NM		Time In:() · (Time	Out: 7:30 AM	_ Page:		f	



Got Safety! LE	Company N	Name: Northern Delaular	e Basin Landfil	1 Uc	0777
www.gotsafetytraining.com	City:	. 1		_	
Monthly Attendance Record Monthly Safe	V	arly Block: Make \		Month:)ne
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5. Chustan Espinosa		Ame Steant	S81,1080		
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☐ Abrasive Sandblasting 1910.94(a)	☐ Hazard ID Risk	Assessment 1910 Subl App B	☐ Rigging Material H	landling 1926.25	1
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☐ Entrant Level ☐ Attendant Level ☐ Supervisor	☐ Incident Repo	rting & Investigation 1960.29	■ Welding/Hot Work	1910.253	
☐ Defensive Driving 29CFR Part 500 Subpart D	■ Ladder Safety	& Stairways 1910.24-27	■ Walking & Working	Slips Trips Falls	1910.22
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Job Safety Analysis			☐ Fit Test ☐ Medi	cal Questionnaire	÷
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Comments: Watched Video	& Disc	USSED LOTO	Went 01	ser PF	T
& Electrical Safet	y WI C	lass their P	Leviewed	Tests	·
Course Location: Oct NM	Tin	ne In: U: W AMTime C	Out: 7:00 AM	Page:c	of
Safety Passports: Ticket #	: <u>U5754</u> Bu	mp Test: Instruc	tor: 80 2 9	3tivaliz	alden



Company Name: NOTH	1ern	Delau	lare	Basir	1
City: (VI)	State	NM	Zin:	8835	7

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Monthly Attendance Record Monthly Sa	fety: Ye			Meeting:		
Date: 7 / 9 / 30 Expiration Date: 7 / 9 / 31		Contact Name: Z	zact	1 Pr	one:432550	03072
Name (Must Print)		Si	ignature		ID#	SPP
1. Dominione Tellez		Han tell	es			< -
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4. Milagros Rabago		A Takel	19		6177	Õ
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15. Edgar Cruz		Edgar (1	ruz			
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324 East Harris - San Angelo, TX 76903 • 325.227.8834

Revised: 10/2019



Company Name:	orthurn Odaware Basin Land 7, 178	
City:	State: NM Zip: 580+0	

Monthly Attendance Record Monthly Sa	afety:Ye	early Block: Ma	ake Up Meeting:	Month:	
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Job Safety Analysis Other: DRUNAVIRUS Comments: Sel Page	- 0		☐ Fit Test ☐ Med		
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Company Name: Northern Delaware Pasin Landfill City: Ual State: NM zip: 88340

Monthly Attendance Record Monthly Sa		early Block: Make t	{p Meeting:	Month:	-1.7/-
Date: 8/1/20 Expiration Date:	8/7/31	Contact Name: AQC1		one:4305	55050
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□ Behavior Based Safety Program		On-Line 1910.120	☐ Short Service Empl		
□ Blood-borne Pathogens 1910.1030		□ 8hr □ 24hr □ 40hr	☐ Stop Work Authorit		
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☐ Entrant Level ☐ Attendant Level ☐ Supervisor		rting & Investigation 1960.29	☐ Welding/Hot Work		
	1	& Stairways 1910.24-27	☐ Walking & Working		e 1010 22
□ Defensive Driving 29CFR Part 500 Subpart D	☐ Lead Safety 1		☐ Oxy Orientation	Olips Tips I all	3 1310.22
□ Drug & Alcohol Training □ Supervisor	10.70			ranaaa	
□ Electrical Safety/GFCI 1910.304	□ Lockout/Tago		☐ Environmental Awa	reness	
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☐ Fire Safety 1910.150 ☐ Bullex Hands-On		Protection 1910.66 App C	☐ Model:W		
☐ Fire Watch Training 1915.504		ective Equipment 1910.132	□ Forklift Certification		
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☐ Job Safety Analysis			☐ Fit Test ☐ Medic	al Questionnai	re
☐ Other:					
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324 East Harris San Angelo, TX 76903 • 325.227.8834



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lastlance	Dalawaya Dana	NM 8955
Company Name: NOrthorn City: (1 01 State	Veryour rapiri	Lanafill
City: State	: NM_ Zip: 88d40	

Monthly Attendance Record Monthly Sa	fety:Ye	early Block: Ma	ake Up Me	eting: Mor	nth:	- > 21-
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☐ Benzene Awareness 1910.1028	☐ Heat Stress		☐ Sc	affolds 1910.128		
□ Behavior Based Safety Program	☐ HAZWOPER C	On-Line 1910.120	☐ Sh	ort Service Employee		
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☐ Entrant Level ☐ Attendant Level ☐ Supervisor	☐ Incident Repo	rting & Investigation 1960.2	29 🗖 We	elding/Hot Work 1910.2	253	
☐ Defensive Driving 29CFR Part 500 Subpart D	Ladder Safety	& Stairways 1910.24-27	☐ Wa	alking & Working Slips	Trips Falls	1910.22
□ Drug & Alcohol Training □ Supervisor	Lead Safety 19	910.1025	□ 0>	y Orientation		
☐ Electrical Safety/GFCI 1910.304	☐ Lockout/Tago	ut 1910.147 🔲 Authorize	d 🗆 En	vironmental Awarenes	s	
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☐ Emergency Response Procedure 1910.38	■ Noise Exposur	re 1910.95	☐ Wi	inter Safety		
☐ First Aid 1910.151 CPR	□ N.O.R.M. 1910	0.7 App A	☐ Ae	erial Lift Certification Ex	cpires:	
☐ Fire Safety 1910.150 ☐ Bullex Hands-On	☐ Personal Fall F	Protection 1910.66 App C	□ Mo	odel:Wt. Car	p	_1926.453
☐ Fire Watch Training 1915.504	☐ Personal Prote	ective Equipment 1910.132	☐ Fo	rklift Certification Expir	res:	
☐ Hand & Power Tools 1926.300		rotection 1910.134		odel:Wt. Car		
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☐ Job Safety Analysis				Test Medical Que		
Other:				. Test = Medical da	ootiorinaire	5
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Course Location: Jal, NM	Tin	ne In: <u>UAM</u> Ti	me Out:	AM Page:	2	of_2_

____Ticket #: _____ Bump Test: ____ Instructor: 4_

Course Attendance Record	1
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NM 7785

Got Safety?	Company Name: NOTH. /LIQW (are basing Lang	<u>ahli </u>	<u> </u>
out outcity.	Contact Name: ZQCH	Phone	#.422.551	0.2072
www.gotsafetytraining.c			Zip:	~ () ()
Date: 8 / 20 / 20 Expiration Date: 8 / 20	New Employee Safety: Yearly Block:			
Name (Print)	Signature Signature	ID	# Passport	Card
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10. Sando Pinos -	Manda Domor			
n Adam Ochelas	and and			
New Employee Orientation	Additional Topics	Contractor Orienta	<u>ation</u>	
Bloodborne Pathogens 1910.1030	☐ Alcohol & Drug Supervisor Training	☐ Other:		
Back Safety	☐ Behavior Based Safety Program	□ Oxy Orientation		
Electrical Safety/GFCI 1910.304	☐ Defensive Driving 29CFR Part 500 Subpart D	☐ Marathon Orientation	ו	
Emergency Response Procedure 1910.38 Fire Safety Awareness 1910.150	Hand & Power Tools 1926.300	Specialty	/ Training	
HAZCOM-Globally Harmonized System 1910.1200	☐ Incident Reporting & Investigation 1960.29 ☐ Ladder Safety 1910.24-27			
Lockout/Tagout Training 1910.147	☐ First Aid 1910.151 CPR	☐ Confined Space 191		
Noise Exposure 1910.95	Personal Fall Protection 1910.66 App C	Fit Test 1910.134 Ap Respirator Brand		
Personal Protective Equipment 1910.132	☐ Short Service Employee	Respirator Brand		_
Respiratory Protection 1910.134	☐ Stop Work Authority	☐ Medical Questionnai		
Walking & Working Surfaces Slips Trips Falls 1910.22	· · · · · · · · · · · · · · · · · · ·	Aerial Lift 1910.68 M	, ,	
Confined Space Awareness 1910.146	☐ Bullex-Fire Extinguisher Training Hands on 1910.157(g)(1)			
Hydrogen Sulfide Certification ANSI Z390.1-2017	n Other: On Alert	Other:	odeivvi.oap	
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Course Location: VI IN	Time In: LO OD AIM Time Out:	7/5-44/\		2
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Got Safety? I	PC	Company Name:_	Nor	th Dek	rure P	asin	Land-	fill
_		Contact Name: 7					432-551	0-3072
www.gotsafetytraining.c	om	City: SU	_	State:_	MM	Zip	_	
Date: 9 / 24 / 20 Expiration Date: 9 / 2	6/21 New		Yearly L	Block:	Make Up Meeting	g:	Month:	
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3. Donathan Frias				-0				
4. Brandon Contierer	-	116	 >					
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6. Reyna Selman		Quinu S	Mon				 	
7. FISA ONTIVIVOS			() ¬					_
8. Jose Quesada		100	1) 1000	/_		1	
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10. Ogar Martinez		Oscar Wart						
□ New Employee Orientation	Additional	Topics			Contractor C	Orientatio	<u>on</u>	
Bloodborne Pathogens 1910.1030		Drug Supervisor Trainir	g		Other:			
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Lockout/Tagout Training 1910.147 Noise Exposure 1910.95	☐ First Aid 19	ภย.151 CPR all Protection 1910.66 /	Ann C		Fit Test 1910			
Personal Protective Equipment 1910.132		ice Employee	-thh C		Respirator Bran Respirator Bran			
Respiratory Protection 1910.134	☐ Stop Work				☐ Medical Ques		910.134 App C	
Walking & Working Surfaces Slips Trips Falls 1910.22		Training 1915.504			☐ Aerial Lift 191			
☐ Confined Space Awareness 1910.146	■ Bullex-Fire	Extinguisher Training I	Hands on 1	1910.157(g)(1)	Forklift 1910.		•	
☐ Hydrogen Sulfide Certification ANSI Z390.1-2017	Other:			-	Other:			
Comments:	-5-	000		00	1			
Instructor:	— Ye	C 7 C C C	YX-	UIV	L -			
Instructor:		Job Ticket #:	-	_ Passports:		Bump	Test:	3

NM 7786-1 **Course Attendance Record** Company Name: North Schauare Basin Landfill Got Safety? LLC City: Jal www.gotsafetytraining.com State:_ Date: 0 / 00 / 10 Expiration Date: 1 16 20 New Employee Safety: Yearly Block: ____ Make Up Meeting: ____ Month: ____ Passport Card ID# Signature Name (Print) 2. 3. 5. 6. 7. 8. 9. 10. **Contractor Orientation Additional Topics** □ New Employee Orientation ☐ Other:_____ ☐ Alcohol & Drug Supervisor Training Bloodborne Pathogens 1910.1030 Oxy Orientation ☐ Behavior Based Safety Program **Back Safety** ☐ Defensive Driving 29CFR Part 500 Subpart D Electrical Safety/GFCI 1910.304 ☐ Hand & Power Tools 1926.300 Specialty Training Emergency Response Procedure 1910.38 ☐ Incident Reporting & Investigation 1960.29 ☐ Confined Space 1910.146 ☐ Entrant Level ☐ Attenda Fire Safety Awareness 1910.150 ☐ Ladder Safety 1910.24-27 HAZCOM-Globally Harmonized System 1910.1200 ☐ Fit Test 1910.134 App A ☐ QLFT ☐ QNFT ☐ First Aid 1910.151 CPR Respirator Brand _____ Lockout/Tagout Training 1910.147 Personal Fall Protection 1910.66 App C Noise Exposure 1910.95 Respirator Brand _____ ☐ Short Service Employee Personal Protective Equipment 1910.132 ☐ Medical Questionnaire 1910.134 App C ☐ Stop Work Authority Respiratory Protection 1910.134 ☐ Aerial Lift 1910.68 Model: _____Wt.Cap: ____ ☐ Fire Watch Training 1915.504 Walking & Working Surfaces Slips Trips Falls 1910.22 ☐ Bullex-Fire Extinguisher Training Hands on 1910.157(g)(1) ☐ Forklift 1910.178 Model: ____Wt.Cap: ____ ☐ Confined Space Awareness 1910.146 Other: _____ ☐ Other: ______ ☐ Hydrogen Sulfide Certification ANSI Z390.1-2017

oh Ticket#

Time In: _

Passports: ______Bump Test: _

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Time Out:

Comments: ______

Course Location: _____

Instructor: ___

Got Safety? LE www.gotsafetytraining.com	Company	Name: Northurn	Zlaunie Basi	n Lan	8979 - (
Monthly Attandance Pagerd Monthly Sa	J., J.	early Block: State:	Zip: XX	- 	
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Company Name: Northern Delaubre Basin Landfill
City (a) State: N.M. Zin:

Monthly Attendance Record Monthly Sa	afety: Ye	early Block: Make	•	- _ Month:	
Date: 9/4/20 Expiration Date:			•	ione! 433 55	5630
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9. Bryan Villa		Bur We	le l	T304	V
10. Judy Rongulli					
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☐ Abrasive Sandblasting 1910.94(a)	D Hazard ID Riel	k Assessment 1910 Subl App B	☐ Rigging Material Ha	andling 1926 251	
□ Asbestos Awareness 1910.1001		Compressed Gas 1910.101	☐ Rigging Material Ha☐ Process Safety Mai	_	
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☐ Behavior Based Safety Program		On-Line 1910.120	☐ Short Service Empl	oyee	
☐ Blood-borne Pathogens 1910.1030		□ 8hr □ 24hr □ 40hr	Stop Work Authority		
Confined Space Entry Awareness 1910.146	☐ Hydrogen Sulfice	de Certification ANSI Z390.1-2017	☐ Trenching/Excavation	on 1926.650	
☐ Entrant Level ☐ Attendant Level ☐ Supervisor	☐ Incident Repo	rting & Investigation 1960.29	■ Welding/Hot Work	1910.253	
☐ Defensive Driving 29CFR Part 500 Subpart D	□ Ladder Safety	& Stairways 1910.24-27	■ Walking & Working	Slips Trips Falls	1910.22
☐ Drug & Alcohol Training ☐ Supervisor	☐ Lead Safety 19	910.1025	Oxy Orientation		
□ Electrical Safety/GFCI 1910.304	☐ Lockout/Tagou	ut 1910.147 Authorized	☐ Environmental Awa	reness	
■ NFPA-70E ■ Arc Flash Training	Manual Lifting	☐ Back ☐ Hand Safety	□ Disciplinary Policy		
☐ Emergency Response Procedure 1910.38	■ Noise Exposur	re 1910.95	Winter Safety		
☐ First Aid 1910.151 CPR	□ N.O.R.M. 1910	0.7 App A	 Aerial Lift Certificati 	on Expires:	···-
☐ Fire Safety 1910.150 ☐ Bullex Hands-On	Personal Fall F	Protection 1910.66 App C	☐ Model:W	t. Cap	1926.453
☐ Fire Watch Training 1915.504	☐ Personal Prote	ective Equipment 1910.132	□ Forklift Certification	Expires:	
☐ Hand & Power Tools 1926.300	Respiratory Pr	otection 1910.134	■ Model:W	t. Cap	_1910.178
☐ HAZCOM Complies GHS 1910.1200	Medical Case	Management	□ Respirator Protection	on 1910.134 App) C
□ Job Safety Analysis			☐ Fit Test ☐ Medic	al Questionnaire	
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NM 8980

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Company Name: Northern Delaware Basin Landfill
City: (A) State: NM Zip: 88252

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	State			
Monthly Attendance Record Monthly Safety: Ye	early Block: Mak	e Up Meeting:	Month:	- 7
Date: $10/2/20$ Expiration Date: $10/2/2$	Contact Name: ZC	PhPh	one4 <i>3</i> 35	1 <u>100 l</u> e
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·	orting & Investigation 1960.29	Welding/Hot Work	1910.253	
☐ Defensive Driving 29CFR Part 500 Subpart D ☐ Ladder Safety	/ & Stairways 1910.24-27	Walking & Working	Slips Trips Falls	1910.22
☐ Drug & Alcohol Training ☐ Supervisor ☐ Lead Safety 1	910.1025	Oxy Orientation		
☐ Electrical Safety/GFCI 1910.304 ☐ Lockout/Tago	out 1910.147 🚨 Authorized	Environmental Awa	areness	
☐ NFPA-70E ☐ Arc Flash Training ☐ Manual Lifting	g 🔲 Back 🔲 Hand Safety	Disciplinary Policy		
☐ Emergency Response Procedure 1910.38 ☐ Noise Exposu	ıre 1910.95	Winter Safety		
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☐ Fire Safety 1910.150 ☐ Bullex Hands-On ☐ Personal Fall	Protection 1910.66 App C	☐ Model:V	Vt. Cap	_1926.453
☐ Fire Watch Training 1915.504 ☐ Personal Prot	ective Equipment 1910.132	Forklift Certification	•	
☐ Hand & Power Tools 1926.300 ☐ Respiratory P	rotection 1910.134	☐ Model:V	Vt. Cap	_1910.178
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Got Safety? LLC • 529 West Spears • Hobbs, NM 88240 • 5	/5./38.1140 324 East	Harris √San Angelo/TX	. /0 9 03 • 325.2	47.5834

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www.gotsafetytraining.com	Company City:	Name: Northum Deloud	are Baujn Landf UM zip: 8825	<u> </u>	
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Got Safety? LLC • 529 West Spears • Hobbs, NM 88240 • 575.738.1140 324 East Harris • San Angelo, TX 76903 • 325.227.8834

Time In:

NM 9016

TX 2054

Company Name: Orthorn Delaware Basin www.gotsafetytraining.com city: Ja Q State: NW Zip: 88752 Monthly Attendance Record Monthly Safety: Yearly Block: _____ Make Up Meeting: ____ Monthly Overholds /06 200 Expiration Date: 11 / 06 / 2021 Contact Name: Phone (505) 231-1071 Name (Must Print) Signature// ID# SPP MECHAEL MONTANEZ 7/37 2786 2. (ruz 3. ils CPILZ aldo Martines 1248 7. 8. 9. varez 10. 234 11. 1269 12. astanecis 13. 12 41 1761 14. 15. ☐ Abrasive Sandblasting 1910.94(a) ☐ Hazard ID Risk Assessment 1910 Subl App B □ Rigging Material Handling 1926.251 ☐ Gas Hazards Compressed Gas 1910.101 Process Safety Management 1910.119 X Asbestos Awareness 1910.1001 Benzene Awareness 1910.1028 □ Heat Stress Scaffolds 1910.128 ■ Behavior Based Safety Program ☐ HAZWOPER On-Line 1910.120 □ Short Service Employee ☐ Blood-borne Pathogens 1910.1030 ☐ Awareness ☐ 8hr ☐ 24hr ☐ 40hr Stop Work Authority ☐ Confined Space Entry Awareness 1910.146 ☐ Hydrogen Sulfide Certification ANSI Z390.1-2017 □ Trenching/Excavation 1926.650 ☐ Entrant Level ☐ Attendant Level ☐ Supervisor ☐ Incident Reporting & Investigation 1960.29 ■ Welding/Hot Work 1910.253 ■ Defensive Driving 29CFR Part 500 Subpart D ☐ Ladder Safety & Stairways 1910.24-27 ■ Walking & Working Slips Trips Falls 1910.22 □ Lead Safety 1910.1025 □ Drug & Alcohol Training Supervisor Oxv Orientation □ Electrical Safety/GFCI 1910.304 ■ Lockout/Tagout 1910.147 Authorized Environmental Awareness □ NFPA-70E □ Arc Flash Training □ Manual Lifting □ Back □ Hand Safety Disciplinary Policy □ Emergency Response Procedure 1910.38 ■ Noise Exposure 1910.95 □ Winter Safety ☐ First Aid 1910.151 CPR ■ N.O.R.M. 1910.7 App A Aerial Lift Certification Expires: ___ ☐ Fire Safety 1910.150 ■ Bullex Hands-On □ Personal Fall Protection 1910.66 App C Wt. Cap Model: 1926.453 ☐ Fire Watch Training 1915.504 □ Personal Protective Equipment 1910.132 Forklift Certification Expires: _ __1910.178 ☐ Hand & Power Tools 1926.300 ■ Respiratory Protection 1910.134 _Wt. Cap____ Model: _ ☐ HAZCOM Complies GHS 1910.1200 ☐ Medical Case Management Respirator Protection 1910.134 App C Job Safety Analysis ☐ Fit Test ☐ Medical Questionnaire other General Wastemanagement Comments: Went wer Benzene/waste ppt wigenzene test. Watched 18 bestos video Unployees do Asbestos demo water/glitter, Good meeting Time In: Co ODEM Time Out: 7: 15HM Page: Course Location Ticket #:ҶѠ Bump Test: ___ Safety Passports: _

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14. David Deignol II/a	
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324 East Harris • San Angelo, TX 76903 • 325.227.8834

TX 2055

www.gotsafetytraining.com

Company Name: Aorthern De Jaware Basin City: State: Non zip: 88252

Monthly Attendance Record Monthly San Date: 1 / D(0 / 2000 Expiration Date:	afety: Yearly Block: Make	Up Meeting: Month: <u>೧೮೦M ber</u>
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TX 2056

Course Attendance Record

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Revised: 10/2019

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www.gotsafetytraining.com	City:	State	e: NM	Zip:		
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324 East Harris • San Angelo, TX 76903 • 325.227.8834

Revised: 10/2019