NM1 - (O)

C-118

YEAR(S): 191-195

Form C-118 Sheet 1 and 1-A						FILE REVIEW	EW 07-10-2000	-2000	
Controlled Recovery Inc.	1990	1991	1992	1993	1994	1995	1996	1997	1998
January		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A		1&1-A	1&1-A
February		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A		1&1-A	1&1-A
March		1	1&1-A	1&1-A	1&1-A	1&1-A		1&1-A	1&1-A
April			1&1-A	1&1-A	181-A	1&1-A			1&1-A
May			1&1-A	1&1-A	1&1-A	1&1-A			
ann			1&1-A	1&1-A	1&1-A	1&1-A			1&1-A
ylut		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A			1&1-A
August		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A		
September		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A
October		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A
November		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A
December		1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	1&1-A	

Controlled Recovery Inc.	1999	2000	2001
January	1&1-A		
February	1&1-A		
March	1&1-A		
April	1&1-A	1&1-A	;
May	1&1-A	1&1-A	
eunr	1&1-A		
VinC			
August			
September	1&1-A		
October			
November			
December			

DISTRUCTI P.O.Box 1980, Hobbs, NM 88241-1980

DISTRICT II

P.O. Drawer DD, Anesia, NM 88211-0719

1000 Rio Brazos Rd, Azicc, NM 87410

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 OIL CONSERVACION TREATING PLANT OPERATOR'S MONTHLY REPORT

Revised 4-1-91 Sheet 1

Form C-118

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

____ Month & year <u>DECEMBER</u> 1995 Controlled Recovery Inc. Report of_ P.O. Box 369 Hobbs, NM 88241-0369 Address TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME 4402.82 Halfway Disposal Controlled Recovery Inc. 4402,82 TOTAL ALL PLANTS TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS 309.42 Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS 309.42 DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) BARRELS FROM MIDLAND JADCO OIL PURCHASING 656.70 Controlled Recovery Inc. 603.26 PETROLITE 1700.00 WATER 230.40 SOLIIDS TOTAL ALL PLANTS 3190.36 TOTAL STOCKS PIPLELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME BARRELS LOCATION Controlled Recovery Inc. Halfway Disposal 1521.88

hereby egalfy that this report is true and complete to the best of my knowledge and belief. DONNA I. ROACH / OFFICE MANAGER

TOTAL ALL PLANTS | 1521.88

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	DIL RECOVERED BY TREATI	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-18485	TRANSPORTER: SNYDER OIL TOTAL	GANDY CORPORATION MALJAMAR NORTH UNIT	65.00 65.00	20.8
H-18522	TRANSPORTER: TOTAL	PETROSOURCE STEVENS & TULL	FEDERAL 205.24	9 #1 <u>205.</u> 200.4
PEXAS	TRANSPORTER: ARCO TOTAL	MALCO TRUCKING RUSSEL STATION	<u>2.80</u> 2.80	0.1
H-18428	TRANSPORTER: RICE ENGINEERING TOTAL	MACLASKEY N-18	237.30 237.30	11.
H-18429	TRANSPORTER: RICE ENGINEERING TOTAL	SONNY'S OILFIELD N-18	232.20 232.20	76.
	TOTAL GROSS BARRELS	5	742.54	
	TOTAL NET BARRELS			309.
	e e			
·				

State of New Mexico

P.O.Box 1980, Hobbs, NM 88241-1989, NSER, Engreys Minorals and Natural Resources Department

Form C-118 Revised 4-1-91

P.O. Drawer DD, Artesia, NM 88211-0719

RECE VED CONSERVATION DIVISION

Sheet 1

P.O. Box 2088

Submit 2 copies to appropriate

DISTRICT III 'Q5 DE 1000 Rio Brazos Rd, Azicc, NM 87410

F AM 8 52 P.O. Box 2088
Santa Fc, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

District Office by 15th of next succeeding month.

Controlled Recovery Inc. Report of

Month & year NOVEMBER 1995

P.O. Box 369 Address

Hobbs, NM 88241-0369

	OIL BEGINNING OF MONTII (Attach additional sheet	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	7313.24
	·	
	TOTAL ALL PLANTS	
TOTAL PIPELINE (OIL RECOVERED (Attach additional sheets if necessary	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	304.92
·	TOTAL ALL PLANTS	
DELIVERIES P	IPELINE OIL (Attach additional sheets if necessary)	
FROM	ТО	BARRELS
Controlled Recovery Inc. FRANSFERED FROM TREATING PLANT FRANSFERED FROM TREATING PLANT	PETROSOURCE LTD DISPOSAL AREA - WATER DISPOSAL AREA - SOLIDS	1069.74 1800.00 345.60
	TOTAL ALL PLANTS	3215.34
TOTAL STOCKS PIPLELII	NE OIL END OF MONTH (Attach additional sheets if n	ccessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4402.82
		4402.82

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-18386	TRANSPORTER: AA OILFIELD TOTAL	A.A. OILFIELD SERVICE STATE AB SWD #1	125.00 125.00	0.00
H-18335 WATER	TRANSPORTER: BURRO PIPELINE TOTAL	GANDY CORPORATION LANE LAKE SWD	110.00 110.00	0.00
H-18424	TRANSPORTER: BTA TOTAL	I & W INC. GEM #4	45.90 45.90	35.80
H-18324 H-18350	TRANSPORTER: OXY USA RICE ENGINEERING TOTAL	LUCKY SERVICES LITTLE BOX CANYON #3 H 35 SWD BD SYSTEM	40.00 66.30 106.30	0.00
TEXAS	TRANSPORTER: ARCO PIPELINE TOTAL	MALCO TRUCKING DENVER CITY STATION	304.50 304.50	267.92
H-18356	TRANSPORTER: RICE ENGINEERING TOTAL	PATE TRUCKING H 35 SWD BD SYSTEM	10.00 10.00	2.00
WATER	TRANSPORTER: TEXACO TOTAL	ROWLAND TRUCKING REMUDA BASIN #3	240.00 240.00	0.00
	TOTAL GROSS BARRELS		941.70	
	TOTAL NET BARRELS			304.92

PART I:	Generator	ARCO Pipeline	
	Address	P.O. BOX 960	_ (806) <u>592-376</u> 5
	City/State	Denver City . 7X 79323	Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	Miola	ND, TEXAS	RRC No
Property Name	Russe	11 Station	
1 Topolty Ivamo	., , , , , , , , , , , , , , , , , , ,	ank Battery, Plant, Facility)	
WASTE IDEI	NTIFICATION A	AND AMOUNT (BARRELS, YARDS, TONS	, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	3	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements	er e de la composition de	Produced Water	Used Containers
General Refuse			
		Rinsate	Used Lube Oils
H2S Scavengers/Sweeter	ning	Scale	Completion Solids
BS&W/Crude	72.50		Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
The second secon			
CERTIFICATION:	below. I certify the	bed above is not hazardous pursuant to 40CFR Part 26 se foregoing is true and correct to the best of my knowle Generator's Authorized Agent	61 and was consigned to the transporter named edge. 11 30-95 11:15/M Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by Tr	
	Name	MALCO TRUCKING CO.	915-36b-4080
	Address	P.O. BOX 14787	Telephone No.
	City/State	Odessa, TX 79968-47	<u> 30 </u>
CERTIFICATION:	Loorlife that the w	vaste in quantity above was received by me for shipmer	Truck No.
OLITINIOATION.	Λ	raste in quantity above was received by me for shipmer	in to the destination below.
	Curtis	1 Willer	11-30-95 2.53pm
	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMA ⁻	FION SITE:	
	A.		
	Name	Controlled Recovery, Inc./Inland P	<u>roducts</u>
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
	Oity/State	1 10005, INIVI 0024 I	
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via the tra	nsporter described in Part II.
•	1	14	1/30.45 2:55,001
	1 was	10110	
	y Signat	ure of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Date and Time Received

PART I:	Generator Address City/State	ARCO Pipe line P.O. BAY 960 DONNER City, TX 79	· 323	(806) <u>592 3765</u> Telephone No.
ORIGINATION OF		7		
Operations Center	Midland	,TX		RRC No
Property Name		STATION Fank Battery, Plant, Facility)		
WASTE IDE	NTIFICATION	AND AMOUNT (BARRELS, YARD	S, TONS, CU.FT.,	LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids - Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Storm \ Used C Used C Used L Comple	ean-up & Debris Nater Run-off containers containers ube Oils etion Solids cion Liquids
CERTIFICATION:	below. I certify the	bed above is not hazardous pursuant to 40 ne.foregoing is true and correct to the best of the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the best of the foregoing is true and correct to the foregoing is true and correct to the best of the foregoing is true and the foregoing		consigned to the transporter named //-22-9
PART II:	TRANSPO	RTER: (To be completed in	full by Transport	er)
	Name Address City/State	Maleo Thucking (P.O. Box 14787 ODESSA, TX 797	E	915-366-4680 Telephone No.
CERTIFICATION:	I certify that the v	vaste in quantity above was received by me	e for shipment to the des	and the second of the second o
	Signatui	re of Transporter's Agent		Date and Time Received
PART III:	RECLAMA	TION SITE:		
	Name	Controlled Recovery, Inc./	Inland Products	
eri. No	Address City/State	P.O. Box 369 Hobbs, NM 88241		
OF DITIE! O A TION!				
CERTIFICATION:	DO	vaste described in Part I was received by museum of Facility Agent	ne via the transporter de	11295 12.15 pm
	Signal	ure or racinty Agent	The second secon	Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

GOLDENROD COPY - Transporter

PART I:	Generator	Mas Risela		
	Address	Pol. B-11960		(846) 592 3765
	City/State	De willes 1X	79323	Telephone No.
ORIGINATION OF	WASTE:			
		1 1 AV		
Operations Center	MUDLA	CA. A. M	_	RRC No
Property Name	Rec	ell Status		
	(Well,	Tank Battery, Plant, Facility)		
<u>j</u>				
WASTE IDE	NTIFICATION	AND AMOUNT (BARRELS, Y	ARDS, TONS, CU.FT.	, LBS., UNITS, ETC.)
Commercial/Site Waste		OilviMosto	6 -311 6	laca de O Dahala
	e	_ Oily Waste		lean-up & Debris
Drilled Solids		_ Plant Waste Water		Water Run-off
Drilled Pit Liquids		_ Produced Sand		Containers
Filter Elements		_ Produced Water _		Containers
General Refuse		Rinsate		ube Oils
H2S Scavengers/Sweete		_ Scale		etion Solids
-BS&W/Crude	7650			tion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other	
To the consequence by the second		V		
CERTIFICATION:	below. I certify	ribed above is not hazardous pursuant the foregoing is true and correct to the Of Generator's Authorized Agent		consigned to the transporter named // JS 95 2:00 PM Date and Time of Shipment
PART II:	TRANSPO	RTER: (To be completed	l in full by Transpor	ter)
	Name	Maleo Wucking	ω	915.366.4080
	Address	P.O. BY 14787		Telephone No.
	City/State	Dossa, Ty 79	768-4787	and the second s
				Truck No.
CERTIFICATION.	I certify that the	waste in quantity above was received	by me for shipment to the de	stination below.
				Il a new 11 days
	- 8 Call-2	- blotter		11-28-95 2.4000
	Signatu	ure of Transporter's Agent		Date and Time Received
PART III:	RECLAMA	TION SITE;		
	Name	Controlled Recovery, I	nc /Inland Products	
	Address	P.O. Box 369		
	City/State	Hobbs, NM 88241		
CERTIFICATION:	I certify that the	waste described in Part I was received	by me via the transporter de	escribed in Part II.
	THE			11 sect d'illiam
	1/6.640	Ature of Facility Agent		11 18 42 11 11/1
• •				

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generato

PART I:	Generator Acco Pipeline Address P.C. Bix 960	(SUE) <u>592.3765</u>
	City/State Dealer City, TX 79323	Telephone No.
ORIGINATION OF	WASTE	
Operations Center	Michain TX	RRC No
Property Name	Kussell STATION.	
	(Well, Tank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION AND AMOUNT (BARRELS, YARDS, TON	IS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	eOily Waste	Spill Clean-up & Debris
Drilled Solids	Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids	Produced Sand	Used Containers
Filter Elements	Produced Water	Used Containers
General Refuse	Rinsate	Used Lube Oils
H2S Scavengers/Sweete		Completion Solids
BS&W/Crude	76 50 Sludge (Water)	Completion Liquids
(Tank Bottoms)	Sludge (Petroleum)	Other
The state of the s		
<u> </u>		
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFR Part	
	below. I certify the foregoing is true and correct to the best of my kno	wledge.
	below. I certify the foregoing is true and correct to the best of my kno	
	Signature of Generator's Authorized Agent	wledge. /-25-9-5 8.∞ AM Date and Time of Shipment
	f I Can	11-25-95 8:00 AM
PART II:	f I Can	1-28-95 8.00 AM Date and Time of Shipment
PART II:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Macco Rucking Co.	1-25-9-5 8.00 AM Date and Time of Shipment
PART II:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787	Date and Time of Shipment Transporter) 915-366-4080 Telephone No.
PART II:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Maco Rucking 40.	Date and Time of Shipment Transporter) 915-366-4080 Telephone No.
PART II:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787	Date and Time of Shipment Transporter) 915-366-4080 Telephone No.
PART II:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State ODESSA, TX 79768: 478	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No.
	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State Dessa, TX 79768: 478	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below.
	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State ODESSA, TX 79768: 478	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No.
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Maco Rucking 40. Address P.O. Box 14787 City/State ODESSA, TX 79768: 478 I certify that the waste in quantity above was received by me for shipn with the waste of Transporter's Agent	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below.
	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State Dessa, TX 79768: 478	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below.
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Macco Rucking Co. Address P.O. Box 14787 City/State ODESSA, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE:	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1138-95 11:15 Am Date and Time Received
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Macco Rucking Co. Address P.O. Box 14787 City/State ODESCA, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1138-95 11:15 Am Date and Time Received
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State Dessa, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Address P.O. Box 369	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1138-95 11:15 Am Date and Time Received
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Macco Rucking Co. Address P.O. Box 14787 City/State ODESCA, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1138-95 11:15 Am Date and Time Received
CERTIFICATION: PART III:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State Dessa, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Address P.O. Box 369	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1/38-95 //// Am Date and Time Received
CERTIFICATION:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Address P.O. Box 14787 City/State Dessa, TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Address P.O. Box 369	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1/38-95 //:/5 Am Date and Time Received
CERTIFICATION: PART III:	Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Name Macco Rucking Co. Address P.O. Box 14797 City/State ODESSA.TX 79768: 478 I certify that the waste in quantity above was received by me for shipm Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Address P.O. Box 369 City/State Hobbs, NM 88241	Date and Time of Shipment Transporter) 915-366-4080 Telephone No. Truck No. ment to the destination below. 1/ 18-45 // // // // // // // // // // // // //

PINK COPY - Generator

GOLDENROD COPY - Transporter

YELLOW COPY - CRI

1094-50-2ptbk2

WHITE ORIGINAL - CRI

DISTRUCTI P.O.Box 1980, Hobbs, NM 88241-1980

DISTRICT II P.O. Drawer DD, Artesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd, Aziec, NM 87410 State of New Mexico Energy, Minerals and Natural Resources Department 5 1995

OIL CONSERVATION DIVISION OIL CONSERVATION DIVISION

Form C-118 Revised 4-1-91 Sheet 1

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 TREATING PLANT OPERATOR'S MONTHLY REPORT Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled	Recovery Inc.		Month & yearOCTOBER 1995	
Address	P.O. Box 369	Hobbs, NM	88241-0369		

	IL BEGINNING OF MONTH (Attach additional sheets i	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	8885.05
	TOTAL ALL PLANTS	8885.05
TOTAL PIPELINE O	IL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2709.17
DELIVERIES PIL	TOTAL ALL PLANTS PELINE OIL (Attach additional sheets if necessary)	2709.17
	TO TO	BARRELS
FROM	10	BARRELS
Controlled Recovery Inc. CONTROLLED RECOVERY INC. TRANSFERRED FROM TREATING PLANT TRANSFERRED FROM TREATING PLANT	PETROLITE PETRO SOURCE LTD DISPOSAL AREA - WATER DISPOSAL AREA - SOLIDS	1214.00 1794.18 1100.00 172.80
	TOTAL ALL PLANTS	4280.98
TOTAL STOCKS PIPLELIN	E OIL END OF MONTH (Attach additional sheets if no	cessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	7313.24
	·	
	TOTAL ALL I'LANTS	7313.24

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-18315 H-18259 H-18284 H-18247	TRANSPORTER: AA OILFIELD AA OILFIELD AA OILFIELD OXY USA TOTAL	A.A. OILFIELD SERVICE STATE AB SWD #1 ALPHA PHI CRUDE STATE AB SWD #1 CENTRAL CORBIN QUEEN	220.00 125.00 260.00	168.25
H-18317 TEXAS	TRANSPORTER: BURRO PIPELINE HARVARD PETROLEUM TOTAL	GANDY CORPORATION LANE LAKE SWD M.A. CARE C	360.00 <u>60.00</u> 360.00	27.00
A-8925 H-18246 H-18363	TRANSPORTER: SOUTHWEST ROYALTIES I & W DEVON ENERGY TOTAL	I & W INC. CAT CLAW FED #1 L.C. STATE #2 KEEL WEST LEASES	130.00 60.00 <u>130.00</u> 320.00	0.00
H-18342 TEXAS		KELLY MACLASKEY LEA FARMS ON TAYLOR A	70.00 <u>50.00</u> 120.00	7.50
H-18240 TEXAS TEXAS	TRANSPORTER: ARCO PIPELINE PRIDE PIPELINE MERIDIAN OIL CO. TOTAL	MALCO TRUCKING HOBBS STATION STATION #24 VARIOUS LEASES	1858.59 485.00 <u>2400.00</u> 4743.59	
TEXAS H-18321	TRANSPORTER: MERIDIAN OIL CO. SCURLOCK PERMIAN TOTAL	ROWLAND TRUCKING CO VARIOUS LEASES ROAMER SWD	2740.00 <u>715.00</u> 3455.00	
TEXAS	TRANSPORTER: PLACID OIL TOTAL	PATE TRUCKING RED DOG #1	<u>45.00</u> 45.00	
H-18321	TRANSPORTER: YATES PETROLEUM TOTAL	RAPID TRANSPORT WELCH ABU FED #1	<u>50.00</u> 50.00	
H-18309	TRANSPORTER: RICE ENGINEERING TOTAL	SONNY'S OILFIELD HOBBS DISPOSAL	<u>318.75</u> 318.75	
	TOTAL GROSS BARRELS	3	10497.3	4 2709.17

Manifest Nº 1934 PART I: PRIDE PIPELINE CU. DISPOSAL Onsite Offsite Address LOCATION Telephone No. Facility City/State ____ FOR OFFICE USE ONLY Lease Well FLAC ___ **ORIGINATION OF WASTE** ☐ Drilling Workover/ **Operations Center** Completion Property Name CRANE STA. # 24 WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Asbestos Oily Waste () _____ Spill Clean-up & Debris () _ Storm Water Runoff Commercial/Site Waste Plant Waste Water-Trans Used Containers **Drilled Solids** Produced Sand **Drilled Pit Liquids** Produced Water-Trans Used Lube Oils Filter Elements Rinsate Workover/Compl. Solids (1) _____ (2) _____ Scale Workover/Compl. Liquids Other Sludge (water) TANK BUHOMS General Refuse Sludge (petroleum) H₂S Scavengers/Sweetening () Sludge (chemical) CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigned to the transporter named below. I certify that the foregoing is true and correct to the best of my knowledge. 10-25-95 Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) MALCO TRUCKING INC. (915) 366-4080 Name __ 2800 W. 42nd. Address Odessa, TX 79764 City/State __ Trailer License No. Estimated Transportation Cost ____ CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent PART III: **DISPOSAL SITE:** Name COUTPULCO KECOVERY INC City/State Hebbs m.m. Method of Disposal ____ Estimated Disposal Fee ___ CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

Signature of Facility Agent

YELLOW COPY - FIELD

PINK COPY - TRANSPORTER

GOLDEN ROD COPY - DISPOSAL SITE

WHITE ORIGINAL - FIELD - SENDS TO MAIN OFFICE

Manifest Nº 1935 PART I: DISPOSAL ☐ Onsite Generator: Offsite Address LOCATION Telephone No. Facility City/State . FOR OFFICE USE ONLY ☐ Lease ☐ Well FLAC _ **ORIGINATION OF WASTE** ☐ Drilling ☐ Workover/ **Operations Center** Completion _____ Field 497497 Property Name ((Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Asbestos Oily Waste Spill Clean-up & Debris Plant Waste Water-Trans Storm Water Runoff Commercial/Site Waste **Used Containers Drilled Solids** Produced Sand **Drilled Pit Liquids** Produced Water-Trans Used Lube Oils Workover/Compl. Solids Filter Elements (1) Rinsate Workover/Compl. Liquids Scale (2) _____ Sludge (water) Other General Refuse Sludge (petroleum) H₂S Scavengers/Sweetening () Sludge (chemical) CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigned to the transporter named below. I certify that the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) MALCO TRUCKING INC. (915) 366-4080 Name _ 2800 W. 42nd. Address Odessa, TX 79764 City/State Trailer License No. Estimated Transportation Cost _ CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: **DISPOSAL SITE:** Name 1 CRI Address _ CONTROLLED RECOVERY, INC. City/State . P.O. BOX 369 HOBBS, N.M. 88241 Method of Disposal Estimated Disposal Fee . CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

WHITE ORIGINAL - FIELD - SENDS TO MAIN OFFICE

YELLOW COPY - FIELD

Signature of Facility Agent

PINK COPY - TRANSPORTER

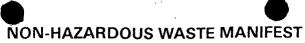
GOLDEN ROD COPY - DISPOSAL SITE

Date and Time Received

	Manifest No. 1936
PART I: DISPOSAL Onsite Offsite Offsite	
LOCATION Address	Telephone No.
Facility City/State	FOR OFFICE USE ONLY
ORIGINATION OF WASTE	FLAC
Drilling	
☐ Workover/ Completion Operations Center ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	N#24 Field #F/297
Property Name (RANE STATIC) (Well, Tank Battery, Pl	
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YA	RDS, TONS, CU.FT., LBS., UNITS, ETC.)
Asbestos Oily Waste (Commercial/Site Waste Plant Waste Water-Trans Drilled Solids () Produced Sand Drilled Pit Liquids () Produced Water-Trans (Filter Elements (1) Rinsate ((2) Scale ((3) Sludge (water) (General Refuse Sludge (petroleum) (H ₂ S Scavengers/Sweetening () Sludge (chemical)	Spill Clean-up & Debris () Storm Water Runoff Used Containers () Used Lube Oils () Workover/Compl. Solids Workover/Compl. Liquids Other
CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 2 foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Ag	
PART II: TRANSPORTER: (To be completed in full by Transporter)	
Name MALCO TRUCKING INC.	(915) 366-4080
Address 2800 W. 42nd.	20H 113
City/State Odessa, TX 79764	Truck License No.
:	Trailer License No.
Estimated Transportation Cost	
CERTIFICATION: I certify that the waste in quantity above was received by me for shipmed and shipmed a	
PART III: DISPOSAL SITE:	
Name CONTROLLO NECO	WER, INC
Address _C 2	/ '
City/State CONTROLLED RECOVERY, IN	IG.
P.O. BOX 369	
Estimated Disposal Fee	
CERTIFICATION: I certify that the waste described in Part Lwas receiced by me via the tri	ansporter described in Part II.
Signature of Facility Agent	Date and Time Received

Signature of Facility Agent

Date and Time Received



Manifest No

Mar	nifest No. 1932
PART I: DISPOSAL Queste Offsite LOCATION Pracility Lease PART I: DISPOSAL City/State City/State	Telephone No.
ORIGINATION OF WASTE Operations Center Property Name	FLAC
(Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., U.S.)	INITS ETC.)
Asbestos Oily Waste Spill Clean-to-commercial/Site Waste Plant Waste Water-Trans Storm Water Drilled Solids Produced Sand Used Contain Drilled Pit Liquids Produced Water-Trans Used Luber Contain Drilled Pit Liquids Produced Water-Trans Used Luber Contain Used Luber Contain Drilled Pit Liquids Used Luber Contain Used Luber Co	up & Debris () r Runoff ners () Dils ()
CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigned to the transforegoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent	sporter named below. I certify that the 1
	Date and Title of Shipment
PART II: TRANSPORTER: (To be completed in full by Transporter)	/- / - \
Name MALCO TRUCKING INC.	(915) 366-4080 Telephone No.
Address2800 W. 42nd.	Truck License No.
City/State Odessa, TX 79764	Trailer License No.
Estimated Transportation Cost CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent	Date and Time Received
PART III: DISPOSAL SITE: Name (INTROLLED RECOVERY, INC. P.O. BOX 369 Method of Disposal HOBBS, N.M. 88241 Estimated Disposal Fee	
CERTIFICATION: Learnify that the waste described in Part I was received by me via the transporter described in Part II. Signature of Facility Agent	Date and Time Received

Manifest No

1933

PART I:	
DISPOSAL Generator: RIDE HOLLINE	
Offsite	
LOCATION City/State	Telephone No.
Lease	FOR OFFICE USE ONLY
ORIGINATION OF WASTE	FLAC
Workover/ Operations Center	
Property Name(Well, Tank Battery, Plant, Facility)	Field
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.F	T LBS UNITS ETC.)
	oill Clean-up & Debris ()
· · · · · · · · · · · · · · · · · · ·	orm Water Runoff
	sed Containers ()
1	sed Lube Oils
	orkover/Compl. Solids
(2) Scale () W	orkover/Compl. Liquids
(3) Sludge (water) () Ot	her J. A. Alan
General Refuse Sludge (petroleum) ()	ANIC DOLLOWS HORSE
H ₂ S Scavengers/Sweetening () Sludge (chemical) ()	
CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigner foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent	Date and Time of Shipment
PART II: TRANSPORTER: (To be completed in full by Transporter)	
Name MALCO TRUCKING INC.	(915) 366-4080
Address 2800 W. 42nd.	<u> </u>
City/State Odessa, TX 79764	Truck License No.
Estimated Transportation Cost	·
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination I	below.
Signature of Transporter's Agent	Date and Time Respired
PART III: DISPOSAL SITE:	Date and time Received
CRI	
CONTROLLED RECOVERY, INC.	
Address P.O. BOX 369	
HOPEN ALL ST	
Method of Disposal	
Estimated Disposal Fee	
CERTIFICATION: I certify that the waste described in Part I was receized by me via the transporter described in	Part II.
Signature of Facility Agent	Date and Time Received

		•		110 000-
		· 100 .	Manife	st N2 2685
PART I: DISPOSAL				4
Onsite Offsite	Generator:	Meridian Oil		
LOCATION	Address		(
Facility	City/State	a roue		Telephone No.
Lease Well	(į.	FLAC
Drilling	ORIGINATION OF Y		-	
Workover/ Completion	Operations Cer		_	
:	Property Name	(Well, Tank Battery, Plant, Facility)	F	ield <u>00914</u>
r i de la compania del compania de la compania del compania de la compania del compania de la compania del compania de la compania de la compania de la compania de la compania del comp	WASTE IDENTIFICA	TION AND AMOUNT (BARRELS, YARDS, TOI	NS, CU.FT., LBS., UN	TS, ETC.)
Asbestos		Oily Waste ()	p +p	
Commercial/S	ite Waste	Plant Waste Water-Trans	Storm Water R Used Containe	
Drilled Solids Drilled Pit Liqui	() ids	Produced Sand Produced Water-Trans ()	Used Container Used Lube Oils	, ,
Filter Elements	• • •		Workover/Com	, , , , , , , , , , , , , , , , , , , ,
	(2)		Workover/Com	•
i t	(3)		Other	· · · · · · · · · · · · · · · · · · ·
General Refuse		Sludge (2	
H₂S Scavengers/	Sweetening ()	Sludge (chemical) ()		
PART II: <u>T</u>		Signature of Generator's Authorized Agent completed in full by Transporter) MALCO TRUCKING INC.		Date and Time of Shipment (915) 366-4080
	1101110	2800 W. 42nd.		Telephone No.
	Add1035	Odessa, TX 79764		Truck Libense No.
	City/State	Ouessa, 17 19104		Trailer License No.
		n Cost		Bill
CERTIFICATION:	I certify that the waste in	quantity above was received by me for shipment to the de	estination below.	
		Signature of Transporter's Agent		Date and Time Received
PART III: D	DISPOSAL SITE:		 	
	Name	CRT		
		CRI		
	Address	CONTROLLED DEC	OVEDV INO	
	City/State	P.O. BOX 369	OVERT, INC.	
N	Method of Disposal	HOBBS, N.M. 88241		•
	stimated Disposal Fee			
	•			
CERTIFICATION:	I certify that the waste des	scribed in Part Was received by the via the transporter de	escribed in Part II.	A 2295 57

Signature of Facility Agent

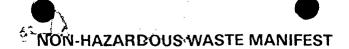
YELLOW COPY - FIELD

PINK COPY - TRANSPORTER

WHITE ORIGINAL . FIELD . SENDS TO MAIN OFFICE

Date and Time Received

GOLDEN ROD COPY - DISPOSAL SITE



Manifest No

2684

PART I: DISPOSAL	
Onsite Generator: Merudian Od	-
LOCATION Address	_ (
Facility City/State Coul T	Telephone No.
Lease Well	FLAC
Drilling ORIGINATION OF WASTE	
Workover/ Operations Center Completion	
Property Name (Well, Tank Battery, Plant, Facility)	Field
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LB	S., UNITS, ETC.)
Commercial/Site Waste	van-up & Debris () Vater Runoff ontainers () vbe Oils () er/Compl. Solids er/Compl. Liquids
H₂S Scavengers/Sweetening () Sludge (chemical) ()	
foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name MALCO TRUCKING INC. Address 2800 W. 42nd. City/State Odessa, TX 79764 Estimated Transportation Cost CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below.	Date and Time of Shipment (915) 366-4080 Telephone No. Truck License No. Trailer License No.
Signature of Transporter's Agent	Date and Time Received
PART III: <u>DISPOSAL SITE:</u>	
NameCRFCDI	
Chi	
Address Controlled Recover	Y, INC.
HOBBS, N.M. 88241	
Method of Disposal	
Estimated Disposal Fee	-
CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	102395 Just
Signature of Facility Agent	Date and Time Received

PART I: Generator MEridian Oil Address 1112 W. Hwy. 329 HCR65 Box58 (915) 563-0. City/State CRANE, Tox. 79731 Telephone No ORIGINATION OF WASTE: Operations Center Midland, Tof RRC No. 00921

Property Name

J. F. LANE B BITTY.

(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Spill Clean-up & Debris Oily Waste Commercial/Site Waste Storm Water Run-off Plant Waste Water **Drilled Solids Drilled Pit Liquids** Produced Sand **Used Containers** Produced Water Used Containers Filter Elements Used Lube Oils General Refuse Rinsate H2S Scavengers/Sweetening Scale Completion Solids BS&W/Crude Sludge (Water) Completion Liquids Sludge (Petroleum) Other (Tank Bottoms) **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. Steve D. Walker 10-17-95 7:00 Date and Time of Shipment Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) 505-394-2581 Name Address Telephone No. 57 City/State **CERTIFICATION:** I certify that the waste in quantity above was received by me for shipment to the destination below. 10-17-95 7:00 Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: Toartify that the waste described in Part I was received by me via the transporter described in Part II.

WHITE ORIGINAL - CRI

GINAL - CRI YELLOW

Signature of Facility Agent

YELLOW COPY - CRI

PINK COPY - Generator

Date and Time Received

	City/State	COMPOSE , NOODS . C. C.	PANE, TEX 79731 Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	MidlAN	d, TEX.	RRC No. <u>00943</u>
Property Name	J. F. LA	UE (ODOM) BTT Y. ank Battery, Plant, Facility)	
	(4461, 18	ark ballery, Flant, Facility)	
WASTE IDE	NTIFICATION A	ND [,] AMOUNT (BARRELS, YAI	RDS, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Scale	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	Stevo D, 2	ed above is not hazardous pursuant to foregoing is true and correct to the best of the best of the details. Generator's Authorized Agent	40CFR Part 261 and was consigned to the transporter named st of my knowledge. 10-10-45 (1.30 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in	full by Transporter)
	Name Address City/State	Rowland Truck P.O. Box 99 Eunice, N.M.	Telephone No.
CERTIFICATION:	I certify that the wa	ste in quantity above was received by	Truck No. me for shipment to the destination below.
	To any signature	of Transporter's Agent	10:-10-75 11:30 Date and Time Received
PART III:	RECLAMAT	ION SITE:	and the second s
	Name Address City/State	Controlled Recovery, Inc P.O. Box 369 Hobbs, NM 88241	./Inland Products
CERTIFICATION:	Means the	<i>7</i> ~	me via the transporter described in Part II.
	Signatur	re of Facility Agent	Date and Time Received

YELLOW COPY - CRI

PART I:

PART I:	Generator	METIDIAN OIL	- 3	(0)
	Address City/State	1112 W. HWY, 329 HCR 65 CRANE, TEX, 79731		(9/5) <u>563-0274</u> Telephone No.
ORIGINATION OF	•			
	M. Ila.	id Tel		DDON: 00922
Operations Center	MIGIAN	122		RRC No. <u>00933</u>
Property Name	ROGERS	BTTY.		
	(Well, T	ank Battery, Plant, Facility)		*
A			- Aug - Aug	
WASTERDE	NIFICATIONA	IND AMOUNT (BARRELS, YARDS, T	UNS, CU.FI., I	.BS., UNITS, ETC.)
Commercial/Site Wast	e	Oily Waste		an-up & Debris
Drilled Solids		Plant Waste Water Produced Sand	Storm W Used Co	ater Run-off
Drilled Pit Liquids Filter Elements		Produced Sand Produced Water	Used Co	
General Refuse		Rinsate	Used Lu	
H2S Scavengers/Sweete	nina	Scale		ion Solids
BS&W/Crude	70 BBLS.		Completion	
(Tank Bottoms)	1-23	Sludge (Petroleum)	Other	
(12				
CERTIFICATION:	The waste describ	ped above is not hazardous pursuant to 40CFR l	Part 261 and was co	onsigned to the transporter named
		e foregoing is true and correct to the best of my		
	STEWN.	Nalker		
	Signature of	Generator's Authorized Agent		Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full b	y Transporte	er)
,	Name Address	Rowland Trucking P.O. Box 99	· · · · · · · · · · · · · · · · · · ·	505-394-2581
	City/State	EUNICE, N.M. 1823	? /	Telephone No.
•	Oity/State	<u></u>		Truck No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for si	hipment to the desti	
	01//			10 10 6
	Signature	of Transporter's Agent		Date and Time Received
	,			
PART III:	RECLAMAT	TION SITE:		
	Name	Controlled Recovery, Inc./Inlar	nd Products	
	Address	P.O. Box 369		
	City/State	Hobbs, NM 88241		
	Ony/Olale	TIODOS, INVI OUZA I		
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via	the transporter des	cribed in Part II.
and the second	Signatu	re of Facility Agent		Date and Time Received

PART I:	Generator Address City/State	Meridian Oil 1112 W. Hwy. 329 HCR 65 B CRANE, TEX. 79731	UX 58 (9/5) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	MidlAN		RRC No. 00943
Property Name		UE (ODOM) BTTY. ank Battery, Plant, Facility)	
WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	Stulo D.	ned above is not hazardous pursuant to 40CFR Part 26 to foregoing is true and correct to the best of my knowled with the best of my knowled to the best of my knowled with	
PART II:	TRANSPOR	RTER: (To be completed in full by Tr	ansporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice, Nim. 88231	505-394-258/ Telephone No.
CERTIFICATION:	alper	este in quantity above was received by me for shipment of Transporter's Agent	Truck No. It to the destination below. 10
PART III:	RECLAMAT		
	Name Address City/State	Controlled Recovery, Inc./Inland Pr P.O. Box 369 Hobbs, NM 88241	
CERTIFICATION:	I certify that the wa	aste described in Part I was received by me via the trai	nsporter described in Part II.
	Signatu	re of Facility Agent	Date and Time Received

	NON-HAAI	POQUS WASTE MANIFI	ES RUN TICI	KET
PART I:	Generator Address City/State	MErIdIAN Oil 1112 W. HWY. 329 HCR CRANE, TEX. 7913	-65 Box 58	(915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:			
Operations Center	Midland	, TEX,	F	RRC No. <u>00933</u>
Property Name	ROGERS	"4" BTTY.		
l	(Well, Ta	nk Battery, Plant, Facility)		
WASTE IDE	NTIFICATION AN	ND AMOUNT (BARRELS, YARDS	, TONS, CU.FT., LE	S., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean Storm Wat Used Cont Used Cont Used Lube Completion Completion Other	ainers ainers Oils Solids
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 40CF foregoing is true and correct to the best of records and correct to the best of records a few and correct to the best of records and correct to the correct to the correct to the correct to the best of the correct to the correct t	my knowledge.	eigned to the transporter named - 1/ - 4 5 2 : 3 0 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in ful	ll by Transporter)	
	Name Address City/State	Rowland Truct in AO. Box 99 EUNICE, N.M. 883	231	505-394-2581 Telephone No.
CERTIFICATION:	Tonny me			tion below.
	Signature of	of Transporter's Agent	·	Date and Time Received

PART III:

RECLAMATION SITE:

Name

Controlled Recovery, Inc./Inland Products

Address

P.O. Box 369

City/State

Hobbs, NM 88241

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

Date and Firme Received



GOLDENROD COPY - Transporter



BOOUS WASTE MANIFES RUN TICKET

PART I:	Generator Address City/State	MEridiAN Dil 1112 W. HWY 329 HCR 65 B CRANE, TEX. 79731	0X58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:		
Operations Center			RRC No. <u>00933</u>
Property Name		"4". BTTY.	
	(Well, T	ank Battery, Plant, Facility)	٠,
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS,	CU:FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify th	ped above is not hazardous pursuant to 40CFR Part 261 e foregoing is true and correct to the best of my knowled with the contract of the best of my knowled Generator's Authorized Agent	
PART II:	TRANSPOR	RTER: (To be completed in full by Tra	nsporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Qunice, N.M. 88231	505-394-258/ Telephone No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipment	Truck No. to the destination below.
	Tonny M Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland Pro P.O. Box 369 Hobbs, NM 88241	oducts
CERTIFICATION:	Da	aste described in Part I was received by me via the trans Work Ire of Facility Agent	sporter described in Part II. Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI-

PINK COPY - Generator

Date and Time Received

_PART I:	Generator Address	AMERICAN EXPLORATION	
	City/State		Telephone No.
ORIGINATION OF	WASTE:		•
Operations Center		.	RRC No
Property Name	<u>TAY los A</u> (Well, T	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARD	s, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Produced Sand Produced Water Rinsate	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	e foregoing is true and correct to the best σ	CFR Part 261 and was consigned to the transporter named of my knowledge.
PART II:	TRANSPOR	RTER: (To be completed in f	full by Transporter)
	Name Address Çity/State	MAC Jasken P.O. Box 580 Hobbs, NM 88241	505-393-1016 Telephone No.
CERTIFICATION:	Planis	aste in quantity above was received by me	for shipment to the destination below. 10 - 10 - 95
PART III:	RECLAMAT	ION SITE:	<i>;</i>
	Name Address City/State	Controlled Recovery, Inc./I P.O. Box 369 Hobbs, NM 88241	nland Products
CERTIFICATION:	Acron	aste described in Part I was received by m re of Facility Agent	e via the transporter described in Part II. 10-10-95 Date and Time Received

PART I:	Generator American Explanation Address City/State	() Telephone No.
ORIGINATION OF	WASTE:	•
Operations Center		RRC No
Property Name	(Well, Tank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION AND AMOUNT (BARRELS, YARDS,	TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	Plant Waste Water Produced Sand Produced Water Rinsate	Used Containers Used Containers Used Lube Oils Completion Solids
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFF below. I certify the foregoing is true and correct to the best of management of Generator's Authorized Agent	
PART II:	TRANSPORTER: (To be completed in full	by Transporter)
	Name MAC Jaskey Address P.O. Bet 580 City/State Llc bbs, NM 9834/	
CERTIFICATION:	I certify that the waste in quantity above was received by me for Signature of Transporter's Agent	Truck No. shipment to the destination below. 10 95
PART III:	RECLAMATION SITE:	
	Name Controlled Recovery, Inc./Inla Address P.O. Box 369 City/State Hobbs, NM 88241	and Products
CERTIFICATION:	I certify that the waste described in Part I was received by me vi	ia the transporter described in Part II. 10 95 4 396

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7-95-150-4pt-bk25

WHITE ORIGINAL - CRI

ARDOUS WASTE MANIFES ON TICKET

Address City/State CROSE TELL 79731 ORIGINATION OF WASTE: Operations Center Maland, Tell. ORIGINATION OF WASTE: Operations Center Midnay, Tell. Operations Center Midna	PART I:	Generator	METATO 01/	
ORIGINATION OF WASTE: Operations Center MidNM, Tex. Property Name J. F. LANE BETTY. (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Drilled Pil Liquids Plant Waste Water Storm Water Run-off Drilled Pil Liquids Produced Water Used Containers General Refuse Rinsate Used Lube Oils BS&W/Crude (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learthy the foreignoifs is riche and correct to the best of my knowledge. Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name ROWLAND TRUCKING P.O. BOX 189 Telephone No. Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address City/State Loartly that the waste described in Part II. CERTIFICATION: Loartly that the waste described in Part II.			CPART TO TETAL	
Operations Center MidANA, Tex. Property Name J. F. LANE B. BTT Y. **Wast, Tank Battery, Plant, Facility) **WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS, UNITS, ETC.) **Commercial/Site Waste Oily Waste Spill Clean-up & Debris Drilled Solids Plant Waste Water Storm Water Run-off Drilled Solids Produced Sand Used Containers Fifter Elements Produced Water Used Containers Fifter Elements Figure Used Lube Oils Elements Figure Used Lube Oils Figure Used Lube Oils Figure Used Figure Fifter Elements Figure		City/State	CRADE, 18x. 79 /31	I elephone No.
Property Name J. F. LANE B. BTT Y. West, Tank Battery, Plant, Facility	ORIGINATION OF	WASTE:	1	:
Property Name J. F. LANE B. BTT Y. West, Tank Battery, Plant, Facility	Operations Center	MialANO	d. Tex.	RRC No. 00921
Waste IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, GU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Drilled Solids Plant Waste Water Storm Water Run-off Used Containers Used Containers Used Containers Produced Sand Used Containers Used Used Used Used Used Used Used Use	,		•	
Commercial/Site Waste Oily Waste Spill Clean-up & Debris Drilled Solids Plant Waste Water Storm Water Run-off Drilled Pit Liquids Produced Sand Used Containers Produced Sand Used Containers Produced Water Used Containers Used Containers Produced Water Used Containers Used Containers Used Containers Used Completion Solids Completion Solids Sale Completion Solids Completion Solids Sale Completion Solids Sale Completion Solids Completion Solids Sale Completion Solids Sales Completion Solids Other (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foreigoing is the and correct to the best of my knowledge. The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foreigoing is the and correct to the best of my knowledge. The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foreigoing is the and correct to the best of my knowledge. The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foreigoing is the and correct to the best of my knowledge. The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. The waste of scriber is the analysis of the part 10 for the part 10 for in the destination below. The part 10 for in the part 10 f	Property Name	J.F. LAN	IE B BTTY.	e e e e e e e e e e e e e e e e e e e
Commercial/Site Waste Drilled Solids Drilled Solids Drilled Pit Liquids Plant Waste Water Storm Water Run-off Drilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers General Refuse Rinsate Used Lube Oils Completion Solids BS&W/Crude (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Pant 261 and was consigned to the transporter named below. Locrity the foregoing is the and correct to the best of my knowledge. Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Bar 99 City/State CERTIFICATION: I certify that the waste in quantify above was received by me for shipment to the destination below. Truck No. CERTIFICATION: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	चा पुरुषकाञ्चल । प्रतिकार १००० सम्बद्धाः १ १ ५०० स	(Well, Ta	ank Battery, Plant, Facility)	:
Commercial/Site Waste Drilled Solids Drilled Solids Drilled Pit Liquids Plant Waste Water Storm Water Run-off Drilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers General Refuse Rinsate Used Lube Oils Completion Solids BS&W/Crude (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Pant 261 and was consigned to the transporter named below. Locrity the foregoing is the and correct to the best of my knowledge. Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Bar 99 City/State CERTIFICATION: I certify that the waste in quantify above was received by me for shipment to the destination below. Truck No. CERTIFICATION: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
Drilled Solids Plant Waste Water Drilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers Used Containers Seneral Refuse Rinsate Used Lube Oils Scale Completion Solids Used Lube Oils Plas Scavengers/Sweetening Scale Completion Solids Used Used Used Used Used Used Used Us	WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	6, CU.FT., LBS., UNITS, ETC.)
Drilled Pit Liquids Filter Elements Filter Elements Produced Water Seneral Refuse Rinsate Used Cube Oils Reneral Refuse Rinsate Used Lube Oils Scale Completion Solids Completion Solids Studge (Water) Completion Solids Studge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Certify the foreigning is inthe and correct to the best of my knowledge. The Database Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. 57 Truck No. CERTIFICATION: 1 certify that the waste in quantity above was received by me for shipment to the destination below. To no profess Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: 1 certify that the waste described in Part I was received by me via the transporter described in Part II.	Commercial/Site Wast	e	Oily Waste	
Filter Elements General Refuse Rinsate Rinsate Used Lube Oils Resource Used Lube Oils Scale Completion Solids Completion Solids Completion Solids Completion Solids Completion Liquids Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 1. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2. Learlify the foregoing is tribe and correct to the best of my knowledge. Fig. 2.	Drilled Solids		Plant Waste Water	Storm Water Run-off
General Refuse H2S Scavengers/Sweetening (Tank Bottoms) Completion Solids Scale (Tank Bottoms) Completion Solids Scale (Tank Bottoms) Completion Solids Scale (Tank Bottoms) Completion Solids Studge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is tribe and correct to the best of my knowledge. HAND. Malke Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. City/State Lunici, Nim. Plast Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tony motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: Lecrify that the waste described in Part I was received by me via the transporter described in Part II.	Drilled Pit Liquids		Produced Sand	Used Containers
H2S Scavengers/Sweetening BS&W/Crude (Tank Bottoms) Scale Sludge (Water) Sludge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is tribe and correct to the best of my knowledge. H2D Lalkw Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Transporter) Name Address City/State Cunic L, Nim. 8/23/ Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. To no y notes Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: CERTIFICATI	Filter Elements		Produced Water	Used Containers
H2S Scavengers/Sweetening BS&W/Crude (Tank Bottoms) Scale Sludge (Water) Sludge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Loerify the foregoing is trie and correct to the best of my knowledge. H2F Scavengers/Sweetening Sludge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Loerify the foregoing is trie and correct to the best of my knowledge. H2F D. Loerify the foregoing is trie and correct to the best of my knowledge. FOR Signature of Generator's Authorized Agent TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. City/State FOR D. Box 99 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: CERT	General Refuse		Rinsate	Used Lube Oils
BS&W/Crude (Tank Bottoms) Studge (Water) Completion Liquids Other	H2S Scavengers/Sweete	ning		Completion Solids
CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foreigning is tree and correct to the best of my knowledge. The D. Walker IIII In the Waste of Generator's Authorized Agent IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				
CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Locatify the foregoing is ride and correct to the best of my knowledge. The D. Lolland 10-9-95 6:00 Signature of Generator's Authorized Agent 10-9-95 6:00 TRANSPORTER: (To be completed in full by Transporter) Name Rowland Trucking 505-394-2581 Address P.O. Box 99 Telephone No. 57 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny notes Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs. NM 88241 CERTIFICATION: I certify that the waste described in Part II was received by me via the transporter described in Part II.			- '	· · · · · · · · · · · · · · · · · · ·
Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 City/State CERTIFICATION: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State CITY/State Hobbs, NM 88241 CERTIFICATION: Lecrify that the waste described in Part I was received by me via the transporter described in Part II.	(
Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Certify that the waste described in Part I was received by me via the transporter described in Part II.				
Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	CERTIFICATION:	The waste describe	ed above is not hazardous pursuant to 40CFR Part 2	61 and was consigned to the transporter named
PART III: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. City/State Cunic L, Mim. Plas/ Truck No. CERTIFICATION: CERTIFICATION: RECLAMATION SITE: Name Address P.O. Box 369 City/State Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Certify that the waste described in Part I was received by me via the transporter described in Part II.		below. I certify the	foregoing is true and correct to the best of my knowl	ledge.
PART III: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. City/State Cunic L, Mim. Plas/ Truck No. CERTIFICATION: CERTIFICATION: RECLAMATION SITE: Name Address P.O. Box 369 City/State Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Certify that the waste described in Part I was received by me via the transporter described in Part II.		Strk) D.	1 Salper	10-9-95 6100
PART II: TRANSPORTER: (To be completed in full by Transporter) Name Rowland Trucking Address P.O. Box 99 Telephone No. City/State Cunict, Nim. Plast Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
Name Address P.O. Box 99 Telephone No. City/State Certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
Name Address P.O. Box 99 Telephone No. City/State Certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	PART II	TRANSPOR	TER: (To be completed in full by T	ransporter)
City/State Euwice, Nim. 1883/ Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·anoponory
City/State Euwice, Nim. 1883/ Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		Name	Rowland TRucking	505-394-2581
City/State Euwice, Nim. 1883/ Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	•		DO 3-/ 99	
Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.			En 101 100 11	relephone No.
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	7	Olly/State	CODICE, WIM. 18831	
Tonny motes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	CEDTIEICATION.			
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	CENTIFICATION.			e _
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	•	Tonny	70TC5	10-9-93 6:00
Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		Signature	of Transporter's Agent	Date and Time Received
Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		,		
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	PART III:	RECLAMAT	ION SITE:	:
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				i t
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		Name	Controlled Recovery, Inc./Inland P	Products
City/State Hobbs. NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
24.9 20-01		Ony/Olale	TIODDS, THIS OUZ TI	1
24.9 20-01	CERTIFICATION:	I certify that the wa	iste described in Part I was received by me via the tri	ansporter described in Part II
Signature of Facility Agent Date and Time Received	22	1	L	anoportor accompagnit Faith.
Signature of Facility Agent Date and Time Received		Tele screll	Sa	10-8-95 7.45
		Signatur	re of Facility Agent	Date and Time Received

-	NON-HEA	APDOUS WASTE MANIFES	RUN TICKET
PART I:	Generator Address City/State	MEridiAN Oil 1112 W. HWY, 329 HCRG CRANE, TEX. 79731	5 Box 58 (915) <u>563-0374</u> Telephone No.
ORIGINATION OF	WASTE:		·
Operations Center	Mid lAM	ud, Text.	RRC No. 0092/
	J.F. LAN	1	
Property Name		ank Battery, Plant, Facility)	9.
*	* (************************************		
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	e	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse	nina	Rinsate	Used Lube Oils
H2S Scavengers/Sweete BS&W/Crude	33 BBLS.	Scale Sludge (Water)	Completion Solids Completion Liquids
(Tank Bottoms)	22 03037	Sludge (Water) Sludge (Petroleum)	Other
(/ 4 2 6 1			
•	Signature of	Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPOF	RTER: (To be completed in full by	Transporter)
	Name	Rowland Trucking	505-394-2581
	Address	P.O. Box 99	Telephone No.
	City/State	P.O. Box 99 Cunice, N.M. 88231	Telapianie No.
055550151015	•		Truck No.
CERTIFICATION:		aste in quantity above was received by me for ship	
		noTes	10-9-95 1:30
	Signature	o of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	or the state of t
	Name	Controlled Recovery, Inc./Inland	Products
		_	— ——
	Address	P.O. Box 369	·
	Address City/State	P.O. Box 369 Hobbs, NM 88241	· ·
CERTIFICATION:	City/State		e transporter described in Part II.
CERTIFICATION:.	City/State	Hobbs, NM 88241	e transporter described in Part II.

6	NON-HEA	RDOUS WASTE MANIFES	RUN TICKET
PART I:	Generator Address City/State	METIDIAN OIL 1112 W. HWY 329 HCR65 CRANE, TEX. 79731	Bux 58 (915) 563-0214 Telephone No.
ORIGINATION OF	WASTE:	X	
Operations Center	midle	IND, TEX.	RRC No. 00933
Property Name	Rogers (Well, Te	nk Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweets BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ded above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know and contact to the best of my know Generator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Envice, N.M. 88231	505-394-258/ Telephone No.
CERTIFICATION:	I certify that the wa	ste in quantity above was received by me for shipmo	Truck No. ent to the destination below.
·	Tonny B Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland F P.O. Box 369 Hobbs, NM 88241	Products
CERTIFICATION:	Dia	ste described in Part I was received by me via the tr	Pansporter described in Part II. Date and Time Received

GOLDENROD COPY - Transporter

PÄRT I:	Generato
•,	Address

City/State

1112 W. Hwy 329 HCR 65 BOX 58 79731

(915) 563-0274

Telephone No.

ORIGINATION OF WASTE:

Operations Center Midland, TEXAS

RRC No. 06485

Property Name

REESE 16 BATTERY

(Well, Tank Battery, Plant, Facility)

WASTE IDE	NTIFICATION AN	ND AMOUNT (BARRELS, YARDS, TON	IS, CU.FT., LBS., UNITS, ETC.)	
Commercial/Site Wast	ə <u></u>	Oily Waste	Spill Clean-up & Debris	
Drilled Solids		Plant Waste Water	Storm Water Run-off	
Drilled Pit Liquids		Produced Sand	Used Containers	
Filter Elements		Produced Water	Used Containers	
General Refuse		Rinsate	Used Lube Oils	
H2S Scavengers/Sweete	ning <u>125 BBC</u> ,	Scale	Completion Solids	
BS&W/Crude (Tank Bottoms)	10000	Sludge (Water) Sludge (Petroleum)	Completion Liquids Other	
(FAIIN DOLLOITIS)		Siddge (Fetroledin)	Other	
CERTIFICATION;	Steve L	d above is not hazardous pursuant to 40CFR Part foregoing is rue and correct to the best of my known achieves the best of my known and the best of	t 261 and was consigned to the transporter named wledge. 10-2-95-0960 Date and Time of Shipment	
PART II:	TRANSPORTER: (To be completed in full by Transporter)			
	Name	Rowland Trucking, P.O. Box 99	505-394-2581	
	Address	P.O. Box 99	Telephone No.	
	City/State	EUNICE, N.M. 882	3/	
			Truck No.	
CERTIFICATION:	I certify that the was	ste in quantity above was received by me for shipn	nent to the destination below.	
	RIOCL	2.	10-2-95	
	Signature	of Transporter's Agent	Date and Time Received	
PART III:	RECLAMATI	ON SITE:		
	Name	Controlled Recovery, Inc./Inland	Products	
	Address	P.O. Box 369		
	City/State	Hobbs, NM 88241		
CERTIFICATION:	I certify that the way	1.0	transporter described in Part II.	
	1,41	W_{s}	18291 ~141 T	
	Signature	of Facility Agent	Date and Time Received	

	Manifest 112 2661
PART I:	
DISPOSAL ☐ Onsite ☐ Offsite ☐ Offsite	
Address	
OCATION Facility City/State Crane TX.	Telephone No.
Lease City Ototo	FOR OFFICE USE ONLY
ORIGINATION OF WASTE	FLAC
Drilling Workover/ Operations Center CRANE TX	
Property Name, A.S. Durlesow A (Well, Tank Battery, Plant, Facility)	Field <u>0 3 / 7 2</u>
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT	., LBS., UNITS, ETC.)
Commercial/Site Waste Plant Waste Water-Trans Stor Orilled Solids Produced Sand Use Orilled Pit Liquids Produced Water-Trans Use Orilled Pit Liquids Rinsate Wor	I Clean-up & Debris () rm Water Runoff Ed Containers () ed Lube Oils () rkover/Compl. Solids rkover/Compl. Liquids er
RTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigned to	to the transporter named below. I certify that the
foregoing is true and correct to the best of my knowledge.	
Signature of Generator's Authorized Agent	/ Date and Time of Shipment
	Date and Time of Shipment
PART II: TRANSPORTER: (To be completed in full by Transporter)	
Name MALCO TRUCKING INC.	(915) 366-4080 Telephone No.
Address 2800 W. 42nd.	Yruck License No.
City/State Odessa, TX 79764	Trailer License No.
	Tratter License No.
Fotimeted Transportation Cost	•
Estimated Transportation Cost	
RTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination be	elow.
Signature of Transporter's Agent	Date and Time Received
PART III: DISPOSAL SITE:	
Name CRT	
CRI	
City/State Oduse P.O. BOX 369	COVERY, INC.
City/State	
Method of Disposal	
Estimated Disposal Fee	
RTIFICATION: I certify that the waste described in Parti was receiped by me via the transporter described in F	Part II. 10.205 / 25
Signature of Facility Agent	Date and Time Received

YELLOW COPY - FIELD

PINK COPY - TRANSPORTER

GOLDEN ROD COPY - DISPOSAL SITE

WHITE ORIGINAL - FIELD - SENDS TO MAIN OFFICE

. 48

NON-HAZARDOUS WASTE MANIFEST

			Man	ifest 112 2683
PART I:				
DISPOSAL General	tor: Meridian	Bel	<u> </u>	
Address				()
LOCATION City/Sta	Croul			Telephone No.
Lease	ite			FOR OFFICE USE ONLY
ORIGINATIO	N OF WASTE	:		FLAC
☐ Drilling ☐ Workover/ Operation	ons Center			,
Completion	Name JE LAN	e A	acility	Field 00958
	·	(VVCII, Talik Battory, Florit, F	domity,	
	NTIFICATION AND AMOU			
Asbestos Commercial/Site Waste	Oily Waste		Spill Clean-u Storm Water	
	Produced S		Used Contain	
Drilled Pit Liquids ()	Produced V		Used Lube O	
	Rinsate	() —	Workover/C	•
	Scale	()		ompl. Liquids
General Refuse	Sludge (wa	roleum) & & ()	Other	
H ₂ S Scavengers/Sweetening ()				
CERTIFICATION: The waste descri	ihad ahaya is not hazardayıs nyır	sugget to 40 CER Part 261 ar	nd was consigned to the trans	norter named below. I certify that the
	and correct to the best of my kn		id was consigned to the traits	porter named below. Teerthy that the
$\mathcal{E} \cdot \mathcal{O}$	Pound	•/		90-2-97
	Signature of Gen	erator's Authorized Agent		Date and Time of Shipment
PART II: TRANSPORTER:	(To be completed in full	by Transporter)		
Name .	MALCO TRUC	KING INC.		(915) 366-4080
Address	0000 W 405			Telephone No.
	Odene TV 7			Truck License No.
City/Sta	me <u>Guessa, 177 7</u>	0704		Trailer License No.
Estimated Trans	portation Cost		· <u>··</u> ··· <u>·</u> ···	
				,
CERTIFICATION: I certify that the		eived by me for shipment to	the destination below.	
Cus	Listin Janus of	Transporter's Agent		Date and Time Received
		Transportor 3 / Igent		
PART III; <u>DISPOSAL SITE</u>	<u>:</u>	CRI		
Name _	CKI	CONTROLLE		_
Address	· •	P.O. BOY 369	D RECOVERY, IN	C
City/Sta	1/-1/	HOSELEYN .	1201-12 X	
City/ Sta	ne	75 - 00 1		
Method of Dispo	osal			
Estimated Dispo	sal Fee		· .	
CERTIFICATION: I certify that the	waste described to the last	Add by many time the second	and a department in Dent H	,
CERTIFICATION, TOURING THAT THE	waste described in Fall ywas to	cerced by the via the transpo	orter described in Part II.	10205 900
	Signatur	of Facility Agent		Date and Time Received
WHITE ORIGINAL	· FIELD - SENDS TO MAIN OFFICE	YELLOW COPY - FIELD	PINK COPY - TRANSPORTER	GOLDEN ROD COPY - DISPOSAL SITE

NON-HARARDOUS	WASTE MANIFEST	WUN TICKET

PART I:	Generator⊆ Address City/State	1112 W. HWY 329 HO CRAVE, TEX. 7	:R 65 BOX 58	(915) <u>563-0214</u> Telephone No.
ORIGINATION OF	WASTE:	•		
Operations Center	Midle	and, TEX.	F	RRC No. <u>06485</u>
Property Name	-	ank Battery, Plant, Facility)		
	·f.}	ank battery, Frant, Facility		
WASTE IDE	NTIFICATION /	AND AMOUNT (BARRELS, YARI	S, TONS, CU.FT., LB	S., UNITS, ETC.)
Commercial/Site Waste	e	Oily Waste Plant Waste Water	Spill Clean-	-up & Debriser Run-off
Drilled Pit Liquids		Produced Sand	Used Conta	ainers
Filter Elements		Produced Water	Used Conta	
General Refuse			Used Lube	
H2S Scavengers/Sweete		Scale	Completion	
BS&W/Crude (Tank Bottoms)	125 BBL	Sludge (Water) Sludge (Petroleum)	Completion I Other	Liquids
(Tank Bottoms)		Cladge (1 choledin)		
CERTIFICATION:	below. I certify the	bed above is not hazardous pursuant to 40 te foregoing is true-and correct to the best O. Lolker Generator's Authorized Agent	of my knowledge.	igned to the transporter named - 3 - 95 - 0730 Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in	,	
	Name	ROW/AND TRUC P.O. Box 99	KING K	505) 394-2581
	Address	P.O. 130x 99	C) e72 2 1	Telephone No.
	City/State	EUNICE, N.M.	88231	Truck No.
CERTIFICATION:	I certify that the w	vaste in quantity above was received by me	e for shipment to the destinat	
	TOMMY	noTes.	10-	3-95 - 0730
	Signatur	noTc5. e of Transporter's Agent		Date and Time Received
PART III:	RECLAMA	FION SITE:		
	Name	Controlled Recovery, Inc./	Inland Products	
	Address	P.O. Box 369	and 1 roddoto	
	City/State	Hobbs, NM 88241		
CERTIFICATION:	ر ا certify that the w	raste described in Part I was received by n	ne via the transporter describ	ed in Part II.
	11.00 1.44	⇒		•
	Signati	ure of Facility Agent)a	Date and Time Received

PART I:	Generator Address City/State	MERIDIAN OIL 1112 W. HWY 329 A CRANE, TEX 79	1CR 65 BOX 58	(915) <u>563.0274</u> Telephone No.
ORIGINATION OF	WASTE:			
Operations Center	Midla	ud, Tex	RF	RC No. 06485
Property Name	REES (Well, Tar	E 16 BTTY. nk Battery, Plant, Facility)		
WASTE IDE	NTIFICATION AN	ID AMOUNT (BARRELS, YAR	DS, TONS, CU.FT., LBS	., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-u Storm Water Used Contai Used Contai Used Lube C Completion Li Other	Run-off ners ners Dils Solids
CERTIFICATION:	below. I certify the $STEV(E)$ \mathcal{D} .	d above is not hazardous pursuant to deforegoing is true and correct to the best with the best and correct to the best and cor	t of my knowledge.	ned to the transporter named $\frac{7-95-0730}{1000}$ te and Time of Shipment
PART,II:	TRANSPOR	TER: (To be completed in	full by Transporter)	
	Name Address City/State	Rowland TRus P.O. Box 99 Cunice, N.M.		To5-394-258/ Telephone No. 42
CERTIFICATION:	Rel	ste in quantity above was received by not transporter's Agent	10-	Truck No. n below. 3 -95 - 0730 Date and Time Received
PART III:	RECLAMATI	ON SITE:		
	Name Address City/State	Controlled Recovery, Inc. P.O. Box 369 Hobbs, NM 88241	/Inland Products	
CERTIFICATION:	the ray	ste described in Part I was received by	10-3	-55 11:45
		or a mointy rigorit	Ļ	Date and Time Received

6	NUN-H, MF Serenda	MUUUS WASTE WANTE	·
PART I:	Generator Address City/State	MENJIANOJO	
ORIGINATION OF	WASTE:		
Operations Center			RRC No. 00958
Property Name	J. F. L.	ANCIAIII	
WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS,	TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge' (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify th	ped above is not hazardous pursuant to 40CFR e foregoing is true and correct to the best of my Generator's Authorized Agent	Part 261 and was consigned to the transporter named knowledge. 10-3-95
PART/II:	TRANSPOR Name Address City/State	Malco Trucking SOU W. 1705 ODESTA ITEMAS	915-366-40 Telephone No.
CERTIFICATION:	Alan	aste in quantity above was received by me for s	Truck No. shipment to the destination below. 10-3-95 Date and Time Received
PART III:	RECLAMAT	TION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inla P.O. Box 369 Hobbs, NM 88241	nd Products
CERTIFICATION:	certify that the w	aste described in Part I was received by me via	the transporter described in Part II.
	Signatu	re of Facility Agent	10-3-15 2:45 Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

NON-HARADOUS WASTE MANIFES THUN TICKET PART I: Generator Address City/State Telephone No. ORIGINATION OF WASTE: BBC No. 00958 **Operations Center** Property Name (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Spill Clean-up & Debris Commercial/Site Waste Oily Waste Storm Water Run-off **Drilled Solids** Plant Waste Water **Drilled Pit Liquids** Used Containers Produced Sand Filter Elements **Produced Water Used Containers** General Refuse Rinsate Used Lube Oils H2S Scavengers/Sweetening Scale Completion Solids BS&W/Crude Sludge (Water) Completion Liquids Sludge (Petroleum) Other (Tank Bottoms) **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below/ certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) 5-366-4080 Name Address Telephone No. City/State Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent PART III: **RECLAMATION SITE:**

CERTIFICATION:

I certify that the waste described in Part I was received by me via the transporter described in Part II.

Controlled Recovery, Inc./Inland Products

Signature of Facility Agent

Date and Time Received

Name

Address

City/State

P.O. Box 369

Hobbs, NM 88241

NON-HEARDOUS WASTE MANIFES RUN TICKET

PART I:	Generator Address City/State	Meridian Oil 1112 W. HWY. 329 HCR 65 BOX CRANE, TEX. 79721	(915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:	•	
Operations Center			RRC No. 00950
Property Name	BAKET (Well, T	ank Battery, Plant, Facility)	4
WASTE IDEI	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify th	ped above is not hazardous pursuant to 40CFR Part 26 e foregoing is true and correct to the best of my knowle	
PART II:	TRANSPOR	RTER: (To be completed in full by Tr	ansporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice, N.M., 88231	505-394-2581 Telephone No. 57 Truck No.
CERTIFICATION:	Tomm	aste in quantity above was received by me for shipmen	to the destination below. 10 -3 - 95 Date and Time Received
PART III:	RECLAMAT	TON SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland Pr P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via the transcription of Facility Agent	nsporter described in Part II. 10 395 Date and Time Received

NON-HARDOUS WASTE MANIFEST UN TICKET

PART I:	Generator Address City/State	METTO: AN 0,1 1112 W. HWY. 329 HCR 65 CRANE TEX. 79731	Box 58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF			
Operations Center Property Name	MidlAN	d, Tax.	RRC No. 00862
Property Name		nk Battery, Plant, Facility)	
	,	•	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	G, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know Calabase Generator's Authorized Agent	
PART II:	TRANSPOR'	TER: (To be completed in full by T	ransporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice N.M. 882	505-394-2581 Telephone No. 57
CERTIFICATION:	I certify that the was	ste in quantity above was received by me for shipmo	Truck No. ent to the destination below.
	Tonny me Signature	of Transporter's Agent	10-3-95 Date and Time Received
PART III:	RECLAMATI	ON SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland F P.O. Box 369 Hobbs, NM 88241	Products
CERTIFICATION:		ste described in Fan Was received by me via the tr	ansporter described in Part II. 20395 830 4 Date and Time Received

NON-HARDOUS WASTE MANIFES THUN TICKET

PART I:	Generator Address City/State	MoritiAN Oil	4CR 66 BOX 68	(915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:			
Operations Center Property Name	Midland ROGETS (Well, TE	d, Tey. # "4" ank Battery, Plant, Facility)	•	RRC No. <u>00933</u>
V WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YA	RDS, TONS, CU.FT., I	LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Storm W Used Co Used Co Used Lu Complet	ontainers
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to foregoing is true and correct to the be was a constant. Generator's Authorized Agent	st of my knowledge.	onsigned to the transporter named 0 - 3 - 95 - Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in	n full by Transporte	er)
	Name Address City/State	Rowland Truck		505-394-2581 Telephone No. 57 Truck No.
CERTIFICATION:	Tonny	aste in quantity above was received by		
PART III:	RECLAMAT	ION SITE:		
·	Name Address City/State	Controlled Recovery, Inc P.O. Box 369 Hobbs, NM 88241	:./Inland Products	
CERTIFICATION:	/h	is described in Par I was received by	y me via the transporter des	cribed in Part II.

NON-HARADOUS WASTE MANIFES THUN TICKET

PART I:	Generator Address / City/State	METIDIAN DI) 1112 W. Hwy. 329 HCR 65 B CRANE, FEX. 79731	8 ox 58 (915) 563-0274 Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	Midland	, TEX.	RRC No. 00934
Property Name	G.H. RCG	Ank Battery, Plant, Facility)	and the second s
		ND AMOUNT (BARRELS, YARDS, T	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Used Containers Used Containers Used Lube Oils Completion Solids
CERTIFICATION:	below. Certify the	foregoing is true and correct to the best of my	Part 261 and was consigned to the transporter named knowledge. 10-4-95 - 0900 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full b	by Transporter)
CERTIFICATION:	Name Address City/State	Rowland Trucking P.O. Box 99 EUNICE N.M. 8820	Truck No.
CERTIFICATION:	Tonnyn	uste in quantity above was received by me for star of the force of the	nipment to the destination below. 10-4-95 - 0900 Date and Time Received
PART III:	RECLAMAT	ION SITE:	· • • • • • • • • • • • • • • • • • • •
	Name Address City/State	Controlled Recovery, Inc./Inlar P.O. Box 369 Hobbs, NM 88241	nd Products
CERTIFICATION:	This way	e of Facility Agent	the transporter described in Part II. /o-4-55 10:35 Date and Time Received

NON-HAZARDOUS WASTE MANIFESTRUN TICKET

PART Į:	Generator Address	Mandian Oil	
	City/State	Crow	() Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	Crone		RRC No. 00958
Property Name	J, F LA		
	(٧٧٠١, ١٤	ank Battery, Plant, Facility)	
WASTE IDE	INTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate	Used Containers Used Containers Used Lube Oils
H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Scale Sludge (Water) Sludge (Petroleum)	Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Pa e foregoing is true and correct to the best of my kn Company of the best of my kn Company of the best of my kn Company of the best of my kn Company of the best of my kn	art 261 and was consigned to the transporter named nowledge. O - 4 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5
PART II:	TRANSPOR	TER: (To be completed in full by	/ Transporter)
	Name Address City/State	Maleo	Telephone No.
CERTIFICATION:	I certify that the wa	aste in quantity above was received by me for ship	Truck No.
	Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	d Products
CERTIFICATION:		iste described in Part I was received by me via the	e transporter described in Part II. 10 4 9 5 500 7 Date and Time Received

· ,		ALE HOW	> _T
Truck Acceptance	INLAND	PRODUCTS, INC. TransAmerican Waste Industries, Inc. Nº 001049	
Ticket	A \$ 000 mily or	(A) = 10.107	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A Aobbs, NM -)
$\mathcal M$	alco	Truck No	Telephone No.
Transporter Permit or DDC 6	0994	Issued to	
Tender No.	11.11		
Pipe Line or Sau	ADUKE Y	udeson	No. <u>00994</u>
Operator	Merdi	Barrels Delivered Delivered	•
Top Gauge Ft	n Back G	auge Ft III Bärrels	
Water Gauge Ft	In	Water	
70	20	Gross Bbls Received	VITS, ETC.)
For Tran	sporter	INLAND PRODUCTS, INC	Debris
LOT 11an		Checked	1-off
Truck Mark	ussi	Ву	
09-02-500-3-#601-bk50		Used	Lube Oils
295,0,00000000	::IIIIg	Scale Comp	pletion Solids
BS&W/Crude	100_	<u> </u>	pletion Liquids
(Tank Bottoms)		Sludge (Petroleum) Other	
CERTIFICATION:	below. I certify the	ned above is not hazardous pursuant to 40CFR Part 261 and was a foregoing is true and correct to the best of my knowledge. Generator's Authorized Agent	as consigned to the transporter named / O - S - F S Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by Transpo	orter)
	Name	Malio	
1	Address	711200	Tolonhoon No.
			i elephone ino.
	City/State	Odessa	Telephone No.
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Odessa	Truck No.
CERTIFICATION:	City/State	aste in quantity above was received by me for shipment to the	Truck No.
CERTIFICATION:	City/State I certify that the wa	aste in quantity above was received by me for shipment to the o	Truck No.
CERTIFICATION:	City/State I certify that the wa		Truck No.
CERTIFICATION: PART III:	City/State I certify that the wa	aste in quantity above was received by me for shipment to the o	Truck No.
	City/State I certify that the war	aste in quantity above was received by me for shipment to the control of Transporter's Agent TION SITE:	Truck No. destination below. Date and Time Received
	I certify that the way	aste in quantity above was received by me for shipment to the country of Transporter's Agent TION SITE: Controlled Recovery, Inc./Inland Product	Truck No. destination below. Date and Time Received
	I certify that the was Signature RECLAMAT	aste in quantity above was received by me for shipment to the control of Transporter's Agent TION SITE:	Truck No. destination below. Date and Time Received
PART III:	City/State I certify that the war Signature RECLAMAT Name Address City/State	aste in quantity above was received by me for shipment to the controlled Recovery, Inc./Inland Product P.O. Box 369 Hobbs, NM 88241	Date and Time Received
	City/State I certify that the war Signature RECLAMAT Name Address City/State	aste in quantity above was received by me for shipment to the controlled Recovery, Inc./Inland Product P.O. Box 369	Date and Time Received
PART III:	City/State I certify that the war Signature RECLAMAT Name Address City/State I certify that the war	aste in quantity above was received by me for shipment to the controlled Recovery, Inc./Inland Product P.O. Box 369 Hobbs, NM 88241	Date and Time Received

TRANSPORTER'S MANEFEST

MANEFEST##/

	, ;	
SHIPPING FACILITY NAME & ADDRESS: PLACID OIL CO I WALL PLAZA 306 W. WALL SUITE 1000 MIDLAND, TX 79701		LOCATION OF MATERIAL:
TRANSPORTER NAME & ADDRESS: PATE TRUCKING CO. INC. P.O. BOX 639 HOBBS, N.M. 88240		
DESCRIPTION OF WASTE: BS & W RECYCLABLE MATERIAL		QUANTITY:
GARY D. REID	Date: 10/6/85	Signature of Contact:
NAME OF TRANSPORTER: (Driver)	Date: 10-6-95	Signature of Driver:
DISPOSAL SITE: Controlled Recovery, Inc. Mile Marker 66 Carlsbad Hwy Halfway, NM	Date:	Signature of CRI Representative

ARDOUS WASTE MANIFES RUN TICKET Generator Address City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center Crave TX. RRC No. 00 88/ Property Name AS Berlesow A (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Storm Water Run-off Plant Waste Wåter **Drilled Solids Drilled Pit Liquids** Produced Sand **Used Containers** Filter Elements Produced Water **Used Containers** General Refuse Used Lube Oils Rinsate H2S Scavengers/Sweetening Completion Solids Scale BS&W/Crude Sludge (Water) Completion Liquids (Tank Bottoms) Sludge (Petroleum) Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 10-4-85 Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address Telephone No. City/State Truck No. CATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: Locality that the waste described in Part I was received by me via the transporter described in Part II. Signature of Facility Agent Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator GOLDENROD COPY - Transporter

	A	•	4		
	A			7	
		MACTE		ALIMI '	エレヘレヒエ
NON-HAZ	ARDOUS	WASIE	MANIFES	ITHUN	HUCKET
	\sim				

The same of the sa	NON-HAZA	MDOOS WAS IE MARKI ESTAT	ON HORE!
S Transport	***	Maril 101	
PART I:	Generator	MEFIDIAN OIL	
	Address	1112.W. Huy 329 Her 65 Box 5	8 (915) 563-0274
	City/State	1112-W. Huy 329 HER 65 BOX 5 CRANE, TEX: 79731	Telephone No.
ORIGINATION OF			
		A	
Operations Center	MidIA	ud, Tex.	RRC No. <u>00876</u>
Dranarty Nama	TF /a.	16 19"	
Property Name		ank Battery, Plant, Facility)	
	(**************************************	and battery, internal admity	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	ρ	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete	nina	Scale	Completion Solids
BS&W/Crude	36 B315.	Sludge (Water)	Completion Liquids
(Tank Bottoms)	<u> </u>	Sludge (Petroleum)	Other
CERTIFICATION:	below. I certify the	ned above is not hazardous pursuant to 40CFR Part 261 e foregoing is true and correct to the best of my knowled O. Laise Generator's Authorized Agent	
PART II:	TRANSPOR	RTER: (To be completed in full by Tra	insporter)
	Name	Rowland Trucking	505-394-2581
,	Address	P.O. Box 99	Telephone No.
	City/State	EUNICE, N.M. 88231	57
			Truck No.
CERTIFICATION:	I certify that the wa	aste in quantity above was received by me for shipment	to the destination below.
	Tonny.	70/55	10-4-95 4:00
	Signature	of Transporter's Agent	10-4-95 4:00 Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Nama	Controlled Description for Makes ID	
	Name	Controlled Recovery, Inc./Inland Pro	Daucts
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
CERTIFICATION:	I cortify that the wa	aste described in Part I was received by me via the trans	
	T Ceruity triat trie wa	programmed and the first was received by the via the fialls	sporter described in Part II.
	r certify triat the Wa	The training of training of the training of th	sporter described in Part II.
	1	re of Secility Agent	Date and Time Received

dieser	NON-HAZARDOUS WASTE MANIFES	STRUN TICKET
PART I:	Generator MEXID: AN Oil Address 1112 W. Hwy 329 HCR 65 City/State CRANG TEX, 79731	130458 (915) 563-0274 Telephone No.
ORIGINATION OF	WASTE:	
Operations Center	Midland, Text. G. H. ROGERS B' BTTY.	RRC No. 00934
Property Name	G. H. ROGERS B' BTTY, (Well, Tank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION AND AMOUNT (BARRELS, YARDS, T	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)	Plant Waste Water Produced Sand Produced Water Rinsate	Used Containers Used Containers Used Lube Oils
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFR F below. I certify the foregoing is true and correct to the best of my foregoing is true and correct to the best	
PART II:	TRANSPORTER: (To be completed in full b	ov Transporter)
CERTIFICATION:	Name Address City/State Row/And TRucking Row	505-394-258/ Telephone No. 57 Truck No.
	Tomy noTes Signature of Transporter's Agent	Date and Time Received
PART III:	RECLAMATION SITE: Name Controlled Recovery, Inc./Inlan	
	Address P.O. Box 369 City/State Hobbs, NM 88241	

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Signature of Facility Agent

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

PINK COPY - Generator

<i>j</i> -	IAOIA-LIMZ	ANDOOS WASTE WANTED!	·
PART I:	Generator	MErid, AN Oil 1112 W. HWY 329 HCR 65 15 CRANE, TEX. 79731	
• •	Address	1112 W. Hwy 329 HCR 65 1	Box 58 (915) 563-0214
	City/State	CRANE, TEX. 79731	Telephone No.
ORIGINATION OF	WASTE:	· · · · · · · · · · · · · · · · · · ·	
Operations Center	Midle	ud, Tex.	RRC No. <u>00933</u>
Property Name	Roger	1'4"	
, , , , , , , , , , , , , , , , , , , ,	(Well,	Tank Battery, Plant, Facility)	
•			
/ WASTE IDE	NTIFICATION ,	AND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	e	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete			Completion Solids
BS&W/Crude	125 BBG	Sludge (Water)	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
	Signature of	of Generator's Authorized Agent	10-5-95 - 0730 Date and Time of Shipment
PART II:	TRANSPO	RTER: (To be completed in full by	ransporter)
N.	Name	Rowland Trucking	505-394-2581
	Address	P.O. Box 99	Telephone No.
`	City/State	EUNICE N.M. 88231	
CERTIFICATION:	Loartify that the v	vaste in quantity above was received by me for shipm	Truck No.
1		On	
•	RUL	lio	<u> 10-5-95 - 0730</u>
·.	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMA ⁻	TION SITE:	
	Name	Controlled Recovery, Inc./Inland I	Products
/	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
CERTIFICATION:	I certify that the w	vaste described in Part I was received by me via the t	ransporter described in Part II
	1	Soomsou arri was received by me via the t	anaportor described in Part II.
	the and	Wind Coulin Agost	19-7-17
	\ Signat	ure of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI

• • •	NON-HARDOUS WASTE MANIFEST	RUN TICKET
PART I:	Generator Meridian Oil Address 1112 W. Huy 329 HCR 65 B City/State CRANE, TESS 79731	70×58 (915) 563-0274 Telephone No.
ORIGINATION OF	WASTE:	
Operations Center	Midland, Tex.	RRC No. <u>00933</u>
Property Name	ROGETS 4 BTTY. (Well, Tank Battery, Plant, Facility)	Ann Se e de desa
WASTE IDE	NTIFICATION AND AMOUNT (BARRELS, YARDS, TON	IS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	Plant Waste Water Produced Sand Produced Water Rinsate	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFR Part below. I certify the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and correct to the best of my known that the foregoing is true and the foregoing is true and correct to the best of my known that the foregoing is true and the foregoing is true a	, -

Commercial/Site Waste Drilled Solids Drilled Pit Liquids Produced Sand Used Containers Produced Water Used Containers Used Containers Used Containers Used Cutainers Used Lube Oils Scale Completion Solids Used Lube Oils Used Cutainers Used Lube Oils Used Files Used Lube Oils Used Cutainers Used Lube Oils Used Files Used Lube Oils Used Files Used Lube Oils Used Files Used Lube Oils Used Cutainers Used Cutainers Used Lube Oils Used Cutainers Used Cutainers Used Cutainers Used Lube Oils Used Cutainers Used Cutainer	WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARD	OS, TONS, CU.FT., LBS., UNITS, ETC.)
Drilled Solids Drilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers Filter Elements General Refuse H2S Scavengers/Sweetening Scale Completion Solids B8&W/Crude (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. Learlify the foregoing-le-sque and correct to the best of my knowledge. Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name Rowland Truck INA Address P10 B0X 99 City/State Euric N.M. \$2.2.3 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Terrange Signature of Transporter's Agent RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Location Part II. CERTIFICATION: I certify that the waste in quantity above was received by me via the transporter described in Part II. CERTIFICATION: I certify that the waste addiction of Part II was received by me via the transporter described in Part II. CERTIFICATION: I certify that the waste addiction of Part II was received by me via the transporter described in Part II.	Commercial/Site Wast	e	Oily Waste	Spill Clean-up & Debris
Filter Elements General Refuse Hassate Rinsate Rowpletion Liquids Ringulate Rinsate Rowpletion Ringulate Rinsate Rowpletion Ringulate Rinsate Rowpletion Ringulate Rowpletion Ringul	Drilled Solids			
Certification: Reclamation Rinsate Completion Solids Completion Solids Completion Solids Completion Solids Completion Solids Socie Completion Solids Completion Solids Socie Completion Solids Complet	•			
H2S Scavengers/Sweetening BS&W/Crude (Tank Bottoms) The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. H2FICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. H2FICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. H2FICATION: TRANSPORTER: (To be completed in full by Transporter) Name Address FIDIBOX 99 Telephone No. 57 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. TO 5-95 - 08/0 Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products: Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste pacific parts Part I was received by me via the transporter described in Part II.				
BS&W/Crude (Tank Bottoms) Sludge (Water) Sludge (Petroleum) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregology is-true and correct to the best of my knowledge. TRANSPORTER: (To be completed in full by Transporter) Name Roward Truck into Soft-394-2581 Address Loi Box 99 Telephone No. City/State Eurice Non. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. To Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste inspective and part I was received by me via the transporter described in Part II.				
CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 10-5-95-08/0				•
CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 10-5-95-08/0 Date and Time of Shipment		14 13BC3.		
Delow. I certify the foregoing is true and correct to the best of my knowledge. 10-5-95-08/0 Signature of Generator's Authorized Agent' Date and Time of Shipment	(Tank Bottoms)		Sludge (Petroleum)	Other
PART III: TRANSPORTER: (To be completed in full by Transporter) Name Address P.O. Box 99 Telephone No. City/State CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tony notes Signature of Transporter's Agent PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.	CERTIFICATION:			of my knowledge.
PART II: TRANSPORTER: (To be completed in full by Transporter) Name Rowland TRuck into 505-394-2581 Address P.O. Box 99 Telephone No. City/State Eunic L. N.7M. 88231 CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tony of the Signature of Transporter's Agent 10-5-95-08/0 Signature of Transporter's Agent 10-5-95-08/0 Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.		Signature of	Generator's Authorized Agent	
Address City/State Euwice No. 88231 57 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tongy netes 10-5-95-08/0 Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.	PART II:			
City/State Eurice, N.M. 8823 57 Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tonny personal 10-5-95-08/0 Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products: Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.		· · · · · · · ·	Nowina / Rueje /	303-379-2381
Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tony nets 1 Description of Transporter's Agent 10-5-95-08/0 Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products: Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.			FIVE BOX 49	Telephone No.
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Tong perces		Olty/Olale	- Carre C, Nimi	
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.	CERTIFICATION:	I certify that the wa	ste in quantity above was received by me	
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part II.		Ton		10-5-95-0810
Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		Signature	of Transporter's Agent	
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	PART III:	RECLAMATI	ON SITE:	
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		Name	Controlled Recovery, Inc./I	Inland Products
City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.		· ·		THE PARTY OF THE P
CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				
- (Mal) - 10595 1230-		,		•
- (1801) 10595 1230-	CERTIFICATION:	I certify that the wa	ste described in Part I was received by mo	ne via the transporter described in Part II.
Signature of Facility of ent Date and Time Received			///// ·	10595 1230-
	·	Signatur	e of Facility agent	Date and Time Received

o .	NON-HATARDOUS WASTE MANIFEST	PUN TICKET
PART I:	Generator Meridin Oil Address 1112 W. HWY 329 HCR 65 B City/State CRANE, Text, 19731	(915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:	
Operations Center	midland, Tex.	RRC No. 00934
Property Name	G. H. ROGETS "B" (Well, Tank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION AND AMOUNT (BARRELS, YARDS, TONS	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)	Plant Waste Water Produced Sand Produced Water Rinsate	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFR Part 2 below. I certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent	
PART II:	TRANSPORTER: (To be completed in full by T	ransporter)
CERTIFICATION:	Name Rowland Trucking Address A.O. Box 99 City/State Euwice Nim. 88231 I certify that the waste in quantity above was received by me for shipme	505-394-2581 Telephone No. 57 Truck No.
	Signature of Transporter's Agent	10-5-95 - 08/0 Date and Time Received
PART III:	RECLAMATION SITE: Name Controlled Recovery, Inc./Inland P Address P.O. Box 369	Products
	City/State Hobbs, NM 88241	

CERTIFICATION: I certify that the waste described in Part II.

ignature of Facility Agent

ARDOUS WASTE MANIFES TUN TICKET

PART I:	Generator Address City/State	Meridian Ool Crave Tex	() Telephone No.
ORIGINATION OF	WASTE:			
Operations Center	Crane	· ·	RRC	No. <u>009//</u>
Property Name	Ricker (Well, Tai	nk Battery, Plant, Facility)		•
WASTE IDE	NTIFICATION AN	ID AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., U	NITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Storm Water Ru Used Containers Used Containers Used Lube Oils Completion Solic Completion Liquid Other	n-offssdsds
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 40CFR Par foregoing is true and correct to the best of my kno Count Generator's Authorized Agent	owledge	to the transporter named 5-F5 nd Time of Shipment
PART II:	j.	TER: (To be completed in full by	Transporter)	
CERTIFICATION:	I certify that the was	Columnity above was received by me for ships		Telephone No. Truck No. low.
PART III:	RECLAMATI		- Julio V	and time flooring
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	<u>Products</u>	
CERTIFICATION:	I certify that the was	the described in Part I was received by me via the	transporter described in F	Part II.

	NON-HAZA	RDOUS WASTE MANIFES	HRUN TICKET
PART	Generator Address City/State	MEridiAN 0;/ 1112 W. HWY. 329 HCR 6. CRANE, TEX. 79731	5 Box 5 8 (915) 563-0274 Telephone No.
ORIGINATION OF	WASTE:		
Operations Center			RRC No. 00933
Property Name	ROGUTS (Well, Ta	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Pa of foregoing is true and correct to the best of my kr Walker Generator's Authorized Agent	art 261 and was consigned to the transporter named nowledge. 10-6-95-0730 Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by	/ Transporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 EUNICE N.M. 88231	505-394-2581 Telephone No. 57
CERTIFICATION:	Loorlife that the we		Truck No.
OLITITIOATION.	-	aste in quantity above was received by me for ship	Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box;369 Hobbs, NM 88241	d Products
CERTIFICATION:	Da	ste described in Part I was received by me via th May re of Facility Agent	te transporter described in Part II. D-6-9 5.45 9m. Date and Time Received

NON-HARDOUS WASTE MANIFESTRUN TICKET PART I: Generator Meridian Oil Address 1112 w. Hwy, 329 Hcros Box 58 City/State CRANE, TOX. 79731 Telephone No. ORIGINATION OF WASTE: Operations Center Midland, Text, RRC No. 00993 Property Name SANGER A 13TTY. (Well, Tank Battery, Plant, Facility) Wastle IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)— Commercial/Site Waste Oily Waste Spill Clean-up & Debris

WASDEJDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU:FT., LBS., UNITS, ETC.)/
Commercial/Site Waste	e	Oily Waste	Spill Clean-up & Debris
Drilled Solids	<u></u>	Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete	ning	Scale	Completion Solids
BS&W/Crude	100 BBLS	Sludge (Water)	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
CERTIFICATION:		ed above is not hazardous pursuant to 40CFR Part	
	below. I certify the	foregoing is true and correct to the best of my know	vledge.
	STEVED D	. Walker	10-6-95- Date and Time of Shipment
	Signature of	Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full by	Transporter)
	Name	Rowland Trucking P.O. Box 99	505-394-2581
	Address	P.O. Box 99	Telephone No.
	City/State	Eunice, N.M. 88231	73/
			Truck No.
CERTIFICATION:	I certify that the wa	ste in quantity aboye was received by me for shipm	ent to the destination below.
•	1.11	RHA	
	Signature	of Transporter's Agent	10-6-95- Date and Time Received
		· · · · · · · · · · · · · · · · · · ·	Date and Time Necessed
PART III:	RECLAMAT	ION SITE:	·
·	Name	Controlled Recovery, Inc./Inland	Products
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
		2	,
CERTIFICATION:	Certify that the wa	ste described in Part I was received by me via the t	ransporter described in Part II.
	Ha	her-	10-6-75-10.45a
	Signatur	re of Facility Agent	Date and Time Received

	NON-HA	RDOUS WASTE MANIFES OUN	TICKET
PART	Generator Address City/State	MEridiAN Oil 1112 W. Hwy 329 HCR 65 BOX 58 CRANC, TEX. 79731	(9/5) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:		
Operations Cente	r Midland	d, TEX.	RRC No. 00946
Property Name		ank Battery, Plant, Facility)	
WASTE IDI	ENTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS, CU.F	r., LBs., UNITS, ETC.)
Commercial/Site Was	te	•	Clean-up & Debris

WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS, YA	ARDS, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. Licertify the	ed above is not hazardous pursuant to foregoing is true and correct to the be	to 40CFR Part 261 and was consigned to the transporter named best of my knowledge. 10-6-95- Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed i	in full by Transporter)
	Name Address City/State	Rowland True P.O. Box 99 Eunice, N.M.	505-394-2581 Telephone No.
CERTIFICATION:	I certify that the wa	,	Truck No. y me for shipment to the destination below. 10-6-95 Date and Time Received
PART III:	RECLAMATI	ON SITE:	
	Name Address City/State	Controlled Recovery, Inc P.O. Box 369 Hobbs, NM 88241	c./Inland Products
CERTIFICATION:	Leartify that the wa	ste described in Part I was received b	by me via the transporter described in Part II.
	Signatur	e of Facility Agent	Date and Time Received

NON-HARDOUS WASTE MANIFES TUN TICKET

PART I:		1112 W. HWY. 329		ox 58	(915) 563-0274	
t: :	City/State	CRANE, TCK.	79731		Telephone No.	
ORIGINATION OF WASTE:						
Operations Center Property Name	Midland	Tex.		RF	RC No. <u>00933</u>	
Property Name		BTTY. nk Battery, Plant, Facility)			·	
WASTE IDEN	NTIFICATION AN	ID AMOUNT (BARRE	LS, YARDS, TON	IS, CU.FT., LBS.	, UNITS, ETC.)	
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements		Oily Waste Plant Waste Water Produced Sand Produced Water		Spill Clean-u Storm Water Used Contair Used Contair	Run-off	
General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	ing	Rinsate Scale Sludge (Water) Sludge (Petroleum)		Used Lube C Completion S Completion Lic Other	Solids	
	:					
CERTIFICATION:	below. I certify the	d above is not hazardous pur foregoing is true and correct Lalke Generator's Authorized Agent	to the best of my kno	wledge	ned to the transporter named 6-95- 30 pm e and Time of Shipment	
PART II:	TRANSPOR	TER: (To be compl	eted in full by	Transporter)		
	Name Address City/State	ROWLAND True	cking		505- 394-2581 Telephone No.	
	Olty/Olate	INDIE N.M			Truck No.	
CERTIFICATION:	I certify that the was	ste in quantity above was rec	eived by me for shipn	nent to the destination	· ·	
	B120 d	Slo			95-	
	Signature o	of Transporter's Agent		D	ate and Time Received	
PART III:	RECLAMATI	ON SITE:				
	Name Address City/State	Controlled Recove P.O. Box 369 Hobbs, NM 88241	ry, Inc./Inland	Products		
CERTIFICATION:	- (ht	ste described in Part I was re	ceived by me via the	10	I in Part II. 69 // 30 Alter and Time Received	

NON-HARDOUS WASTE MANIFES TUN TICKET Generator Address City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center Crone RRC No. 00958 J.F. LANE **Property Name** (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Drilled Solids Plant Waste Water Storm Water Run-off Produced Sand **Drilled Pit Liquids Used Containers Used Containers** Produced Water Filter Elements Used Lube Oils General Refuse Rinsate Scale -H2S Scavengers/Sweetening Completion Solids (Sludge (Water) Completion Liquids BS&W/Crude (Tank Bottoms) Sludge (Petroleum) Other **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address Telephone No. City/State **CERTIFICATION:** I certify that quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products

CERTIFICATION: \(\subseteq\text{cartify}\) that the waste described in Part I was received by me via the transporter described in Part II.

Address

City/State

Signature of Facility Agent

P.O. Box 369

Hobbs, NM 88241

ARDOUS WASTE MANIFES WUN TICKET Generator[§] Address City/State Telephone No. **ORIGINATION OF WASTE:** RRC No. OOFO Operations Center Craw Ricker Property Name (Well, Tank Battery, Plant, Facility) WASTE DENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Spill Clean-up & Debris Commercial/Site Waste Oily Waste **Drilled Solids** Plant Waste Water Storm Water Run-off **Used Containers Drilled Pit Liquids** Produced Sand **Used Containers** Filter Elements **Produced Water** Rinsate Used Lube Oils General Refuse H2S Scavengers/Sweetening Scale Completion Solids Sludge (Water) Completion Liquids BS&W/Crude (Tank Bottoms) Sludge (Petroleum) Other **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address Telephone No. **CERTIFICATION:** I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: **RECLAMATION SITE:** Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II. dison Signature of Facility Agent

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

NON-HEARDOUS WASTE MANIFES TUN TICKET

PART I:	Generator Address	Meridian Oil 1112 M. 7724 329 HCR 65 BO CRANE, TEX. 79731	× 58 (915) 563-0274
ODICINIATION OF	City/State	CRAVE, TEX. 7978)	Telephone No.
ORIGINATION OF	WASIE:	•	
Operations Center	Midland	d, Tex.	RRC No. 00933
	0.0	"4" BTTY,	• • • • • • • • • • • • • • • • • • •
Property Name			$\sigma_{ij} = \sigma_{ij} = \sigma_{ij}$, where $\sigma_{ij} = \sigma_{ij} = \sigma_{ij}$
	≰ (Well, Ta	ank Battery, Plant,≮acility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
0		Oil. Wests	Call Olara un 9 Dahria
Commercial/Site Wast Drilled Solids	e	Oily Waste Plant Waste Water	Spill Clean-up & Debris Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete		Scale	Completion Solids
BS&W/Crude	125 BBCS.	· · · · · · · · · · · · · · · · · · ·	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
	Strife) D	e foregoing is true and correct to the best of my know Tolker Generator's Authorized Agent	10-6-95-2:100 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
	Name	Rowland Trucking	505-394-2581
	Address	P.O. Box 99	Telephone No.
	City/State	P.O. Box 99 Eunice N.M. 88231	57
CERTIFICATION:	I certify that the wa	iste in quantity above was received by me for shipme	Truck No.
			10-6-95 2:00
	Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	i i
	Name	Controlled Recovery, Inc./Inland F	Products
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
OFDTICIOATION:			
CERTIFICATION:	I certify that the wa	aste described in Part I was received by me via the tr	ansporter described in Part II.
		ella"	10695 638
	Şignatur	e of Secility Agent	Date and Time Received
	WHITE ORIGINAL - CRI	YELLOW COPY - CRI PINK COPY - Generator GOLDE	NROD COPY - Transporter

9-95-100 -4pt-bk25

NON-HARDQUS WASTE MANIFES TUN TICKET Generator PART I: Address City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center ______ RRC No. 00 9// Ricker C Property Name (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Spill Clean-up & Debris Oily Waste Storm Water Run-off Drilled Solids Plant Waste Water Drilled Pit Liquids Produced Sand **Used Containers Used Containers** Filter Elements **Produced Water** Used Lube Oils General Refuse Rinsate H2S Scavengers/Sweetening **Completion Solids** Scale BS&W/Crude Sludge (Water) Completion Liquids Sludge (Petroleum) (Tank Bottoms) Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 10-6-FJ

Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Name 3664080 Address Telephone No. City/State CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. 10-6-75 Signature of Transporter's Agent Date and Time Received PART III: **RECLAMATION SITE:** Controlled Recovery, Inc./Inland Products Name Address P.O. Box 369 City/State Hobbs, NM 8824'1 CERTIFICATION: scribed in Part I was received by me via the transporter described in Part II.

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Signature of Facility Agent

PART I:

Generator Address
City/State

ORIGINATION OF WASTE:

Operations Center

Property Name

RRC No. 6063

(Well, Tank Battery, Plant, Facility)

			_	
Property Name	Ricken	B	_	
	(Well, T	ank Battery, Plant, Facility)		
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, Y	ARDS, TONS, CU.FT., I	BS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Storm W Used Co Used Co Used Lu Complet	an-up & Debris Vater Run-off Intainers Intainers Intainers Interpretation Solids Intainers Intai
CERTIFICATION:	below. I certify th	ped above is not hazardous pursuant e foregoing is true and correct to the Documble Generator's Authorized Agent		onsigned to the transporter named 10-6-95 Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed	in full by Transporte	er)
	Name Address City/State	Maleo Odossa TF		Telephone No.
CERTIFICATION:	d certify that the w	aste in quantity above was received b	y me for shipment to the desti	Truck No.
	Signature	e of Transporter's Agent		Date and Time Received
PART III:	RECLAMAT	TON SITE:		
	Name Address City/State	Controlled Recovery, In P.O. Box 369 Hobbs, MM 8824	nc./Inland Products	
CERTIFICATION:	- AE	aste described in Part I was received	by me via the transporter desc	cribed in Part II. Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

Generator Men PART I: **Address** City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center ____ RRC No. OOS (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris **Drilled Solids** Plant Waste Water Storm Water Run-off **Drilled Pit Liquids** Produced Sand Used Containers Filter Elements **Produced Water Used Containers** General Refuse Rinsate Used Lube Oils H2S Scavengers/Sweetening Scale Completion Solids BS&W/Crude 00 Sludge (Water) Completion Liquids (Tank Bottoms) Sludge (Petroleum) Other **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. ignature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address Telephone No. City/State CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: **RECLAMATION SITE:** Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste to softbed in Part I was received by me via the transporter described in Part II. acility Agent Date and Time Received

BOOUS WASTE MANIFES WUN TICKET

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

Date and Time Received

NON-HARDOUS WASTE MANIFES THUN TICKET Generator METIDIAN Oil PART I: Address 1112 W. Hwy. 329 HCR 65 BOX 58 (915) 563-027 CRANE. TEX. 79731 City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center Midland, TEL. RRC No. 0092/ **Property Name** (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)		Spill Clean-up & Debr Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other	is
CERTIFICATION:	below. I certify the	d above is not hazardous purs foregoing is true and correct to Lakku Generator's Authorized Ágent		61 and was consigned to the tedge. 10 - 7 - 95 Date and Time	·
PART II:	TRANSPOR	TER: (To be comple	eted in full by Ti	ransporter)	
	Name Address City/State	Rowland To P.O. Box 99 Eunice, N. W	Rucking 1. 88231		3 <i>94 - 2581</i> ephone No. 7
CERTIFICATION:	Loorlify that the way	ste in quantity above was recei	1		Truck No.
OLITAK IO/(IIO)(noTCS of Transporter's Agent		10 - 7 - 95 Date and Tin	7:30 ne Received
PART III:	RECLAMATI	ON SITE:	e and the complete	iga∰asaaz (° Hagingan)	
••• • • • • • • • • • • • • • • • • •	Name Address City/State	Controlled Recover P.O. Box 369 Hobbs, NM 88241	y, Inc./Inland P	roducts	

CERTIFICATION:

PART I:

Generator Mendio Old Address City/State

ORIGINATION OF WASTE:

Operations Center RRC No. 009/3

Property Name

REC No. 009/3

Waste IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CUFT., LBS., UNITS, ETC.)

Operations Center	Cro	w Tx		RRC No. 009/3
Property Name	Rick	er E		
· roporty realis		ank Battery, Plant, Facility)		
	(**************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* 3 ~	
	NETICO A PLONE	ND AMOUNT (DADDELC VA	DDC TANC OUT	LDC UNITC ETG.)
WASIEIDE	NITEICATION	ND AMOUNT (BARRELS, YA	ADS, TONS, CO.FT.	, LDS., UNITS, ETC.)
Commercial/Site Waste	э `	Oily Waste	Spill C	lean-up & Debris
Drilled Solids		Plant Waste Water		Water Run-off
Drilled Pit Liquids	-	Produced Sand *		Containers
Filter Elements		Produced Water		Containers
General Refuse		Rinsate		
H2S Scavengers/Sweete	ning	Scale		etion Solids
BS&W/Crude	100	Sludge (Water)	· · · · · · · · · · · · · · · · · ·	etion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other	
		ė.	. :	
CERTIFICATION:		ped above is not hazardous pursuant to e foregoing is true and correct to the be		
	Signature of	Generator's Authorized Agent	-	Date and Time of Shipment
	Signature or	Generator's Authorized Agent		Date and Time of Shipment
PART II:	TRANSPOF Name	RTER: (To be completed i	n full by Transpor	ter)
		many		
	Address			Telephone No.
	City/State			<u> </u>
CERTIFICATION:	Um. (aste in quantity above was received by	the for shipment to the de	
	Signature	of Transporter's Agent		Date and Time Received
PART III:	RECLAMAT	TION SITE:		
	Name	Controlled Recovery, Inc	: /Inland Products	
	Address	P.O. Box 369	Carmana F 100000	<u>.</u>
	City/State	Hobbs, NM 88241		
	Olly/Glale	LIUUUS MINI OOZ4 I		
CERTIFICATION:	I certify that the w	aste describer in Part I was received b	y me via the transporter d	escribed in Part II.
	/_//	Whi		10 795 12001
	Şignatu	re of Pacility Agent	-	Date and Time Received
				

WHITE ORIGINAL - CRI YEI

YELLOW COPY - CRI

PINK COPY - Generator

· •	NON-HA	ARDOUS WASTE MANIFEST	RUN TICKET
PART I:	Generator	marilia Oil	
PARTI.	Address	mentation (in	
	City/State	Charles Craul	Telephone No.
	- Oity/Glate	7	relephone (40.
ORIGINATION OF			
	14,6	Trucil It (a K	
Operations Center	_ Cron	e 72	RRC No. <u>03665</u>
1.6	1 0 Fr. 2	et Kedd at El	
Property Name	Phillip- A	lightower	:
107	(Well, 1	Fank Battery, Plant, Facility)	
			/
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	•	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids	- 64	Produced Sand	- Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweeter	ning	Scale	Completion Solids
BS&W/Crude	100	Sludge (Water) Sludge (Petroleum)	Completion Liquids Other
(Tank Bottoms)		Siddye (Felioledili)	
等 4	Signature o	f Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by	Transporter)
•	Name	Malio	
	Address	friesco :	Totanhara Na
	City/State	(D) 75/	Telephone No.
	Olly/State	- Charles , T	
CERTIFICATION:	certify that the	aste iniquantity above was received by me for ship	Truck No.
	Xin K	folls	
	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMA	TION SITE	
FAMILE HIL	, LEOLAIVIA	HOR SITE.	
	Name	Controlled Recovery, Inc./Inland	Products
	Address	P.O. Box 369	1 Toducto
	City/State		
	Oity/Glale	Hobbs, NM 88241	
CERTIFICATION:	Loorlie that	* is n •	Annual design of the second
	Ceruly that the	rasterdescribed in Part I was received by me via the	1 70 / /200
	1/1		16 19 3 /200
	Signati	ure of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

Date and Time Heceived

NON-HARROUS WASTE MANIFEST UN TICKET

PART I:	Generator Address City/State	Merician Oil Crone T	()
ORIGINATION OF	WASTE:		
Operations Center	Crow	e xx man	RRC No. 00913
Property Name	(Well, Ta	nk Battery, Plant, Facility)	₹1.7
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON:	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know because Generator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
	Name Address City/State	Melco	Telephone No.
CERTIFICATION:	- 1 WC	ste in quantity above was received by me for shipme	Truck No. Int to the destination below. Date and Time Received
PART III:	RECLAMATI	ON SITE:	· · · · · · · · · · · · · · · · · · ·
	Name Address City/State	Controlled Recovery, Inc./Inland F P.O. Box 369 Hobbs, NM 88241	Products
CERTIFICATION:	- Al	ste described in Part I was received by me via the tree of Facility Agent	ansporter described in Part II. Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

& NON-HAZARDOUS WASTE MANIFEST

Manifest 12

2666

PART I:	
□ Onsite Generator: Meridian Oct	
Offsite Address	()
LOCATION	Telephone No.
Lease	FOR OFFICE USE ONLY
ORIGINATION OF WASTE	FLAC
☐ Drilling ☐ Workover/ Operations Center Craul Texas	
Property Name A.S. Burlesow	Field 5172
(Well, Tank Battery, Plant, Facility)	Tield
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU	.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids () Plant Waste Water-Trans Produced Sand Drilled Pit Liquids () Produced Water-Trans () United Pit Liquids Filter Elements () Rinsate () Scale	Spill Cleàn-up & Debris () Storm Water Runoff Used Containers () Used Lube Oils () Workover/Compl. Solids Workover/Compl. Liquids Other
CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consign	ned to the transporter named below. I certify that the
foregoing is true and correct to the best of my knowledge.	10 7 0 1
Signature of Generator's Authorized Agent	Date and Time of Shipment
Signature of Generator's Authorized Agent	Date and Time of Shipment
PART II: TRANSPORTER: (To be completed in full by Transporter)	<i>:</i>
Name MALCO TRUCKING INC.	(915) 366-4080
Address2800 W. 42nd.	Telephone No.
City/State Odessa, TX 79764	Truck License No.
ONLY, Clots	Trailer License No.
Estimated Transportation Cost	
CERTIFICATION: I certify that the waste in quantity above was regeived by me fo∦ shipment to the destination	a below
Ocum I. Aunder	
Signature of Transporter's Agent	Date and Time Received
PART III: DISPOSAL SITE:	
Name CAI	
CONTROLLED DECOVERY INC	······································
P.O. BOX 369	
City/State HOBBS, N.M. 88241	
Method of Disposal	
Estimated Disposal Fee	
•	
CERTIFICATION: I certify that the waste described in Paris yas received by me via the transporter described	in Part II. (0.795 4/0 +
/ de la residencia del residencia de la residencia de la residencia de la residencia de la	10/1/ 110 1

Signature of Facility Agent

NON-HAZARDOUS, WASTE MANIFESTAUN TICKET

Generator Meridian Oil

PART I:	Generator Address City/State	MERIDIAN OIL 1112 W. HWY, 329 HCR 65 CRANE, Tex. 79731	Box 58 (915) 563 - 0274 Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	MidlAN	id, Tex.	RRC No. <u>00933</u>
Property Name	ROGERS	4" BTTY.	
	(Well, T	ank Battery, Plant, Facility)	The state of the s
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	,	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Particle foregoing is true and correct to the best of my known and correct to the best of my known and correct to the best of my known and the correct to the	art 261 and was consigned to the transporter named nowledge. 10-7-95-2:30 Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by	/ Transporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice, N.M. 8823	
CERTIFICATION:	I certify that the wa	aste in quantity above was received by me for ship	Truck No. prinent to the destination below.
	Tonn y r Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	· .
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	d Products
CERTIFICATION:	- Par	aste described in Part I was received by me via the	e transporter described in Part II. 10795 800 Date and Time Received

NON-HARDOUS, WASTE MANIFEST OUN TICKET

PART I:	Generator Address City/State	METIDIAN OIL 1112 W. HWY. 329 HCR65-1 Crane, Tex. 79731	Box 58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:	· ·	
Operations Center	MialANO	L, Tex.	RRC No. 00993
Property Name		nk Battery, Plant, Facility)	i de la companya de l
WASTE IDEI	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 40CFR Part 26 foregoing is true and correct to the best of my knewled and correct to the best of my knewled and senerator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by Tr	ansporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice, N.M. 88231	505-394-2581 Telephone No.
CERTIFICATION:	I certify that the was	ste in quantity above was received by me for shipmen	Truck No. It to the destination below.
·	Tonmy no Signature	7e5 of Transporter's Agent	Date and Time Received
PART III:	RECLAMATI	ON SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland Pr P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION:		ste described in Part I was received by me via the trained of Facility Agent	nsporter described in Part II. Date and Time Received

NON-HARARDOUS WASTE MANIFES THUN TICKET

PART I:	Generator	MeridiAN Oil		
	Address City/State	1112 W. Hwy. 329 HCR 65 CRANE, TEX. 79731	Box 58 (915) 563-0279 Telephone No.	<u>Z</u>
ORIGINATION OF	WASTE:	7		
Operations Center	Mid /AN	id, Tex.	RRC No. <u>00946</u>	
Property Name	Richard			
ed Salveria de la companya de la co	(Well, Ta	ank Battery, Plant, Facility)	y Lean Village Control (1997)	ig were
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)	
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other	
CERTIFICATION	below. I certify the	roregoing is true and correct to the best of my knowledge of the best of the best of my knowledge of the best of the b	Date and Time of Shipment	<u></u>
PART II:	TRANSPOR	TER: (To be completed in full by	Transporter)	
	Name Address City/State	Rowland Trucking PO, Box 99 EUNICE, N.M. P823		<u>/_</u>
CERTIFICATION:	•	aste in quantity above was received by me for ship	Truck No.	
	Tonny	,	10-7-95 2:30	
	Signature	of Transporter's Agent	Date and Time Received	-
PART III:	RECLAMAT	ION SITE:		
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	<u>Products</u>	
CERTIFICATION:		aste described in Part I was received by me via the	transporter described in Part II.	4
	/// Signatur	re of Facility Agent	Date and Time Received	,-

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

GOLDENROD COPY - Transporter

1.2

NON HAZARDOUS WASTE MANIFEST

	Manifest 12 2667
PART I: DISPOSAL	
☐ Onsite ☐ Generator: Mandam Ciek;	
LOCATION Address	<u> </u>
Facility City/State rone Thex	Telephone No.
Lease Well	FLAC
Drilling ORIGINATION OF WASTE	
Workover/ Operations Center Completion	
Property Name 79.5. Burlesow (Well, Tank Battery, Plant, Fac	
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS,	TONS, CU.FT., LBS., UNITS, ETC.)
Asbestos Commercial/Site Waste Drilled Solids Drilled Pit Liquids (1) Filter Elements (2) Scale (3) Sludge (water) H ₂ S Scavengers/Sweetening (1) Commercial/Site Waste Plant Waste Water-Trans Plant Waste Water-Trans Plant Waste Water-Trans Scale Produced Water-Trans Sindage (water) Sludge (petroleum) Sludge (chemical)	Spill Clean-up & Debris () Storm Water Runoff Used Containers () Used Lube Oils () Workover/Compl. Solids Workover/Compl. Liquids Other
PART II: TRANSPORTER: (To be completed in full by Transporter) Name MALCO TRUCKING INC.	Date and Time of Shipment (915) 366-4080
0000 144 40-4	Telephone No.
7,001030	Fright License No7 1
City/State Odessa, TX 79764	Trailer License No.
Estimated Transportation Cost	
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the control of the	he destination below. Date and Time Received
PART III: <u>DISPOSAL SITE:</u>	
NameCPI	
Address CONTROLLED RECOVERY, INC.	•
City/State P.O. BOX 369 HOBBS, N.M. 88241	
Method of Disposal	
Estimated Disposal Fee	
CERTIFICATION: I certify that the waste described in Part I was received by the via the transport	ter described in Part II. $/A895-926$

WHITE ORIGINAL - FIELD - SENDS TO MAIN OFFICE

YELLOW COPY - FIELD

Signature of Facility Agent

PINK COPY - TRANSPORTER

GOLDEN ROD COPY - DISPOSAL SITE

NON-HAZARDOUS WASTE MANIFEST

	A. A	Manifest No. 2665
	24 × 2-2	2005
PART I: DISPOSAL	$\cdot \cdot \cdot \cdot \cdot \cdot = \cdot \cdot$	
☐ Onsite	Generator: Mendina Oc	
Offsite	Address	()
LOCATION Facility	City/State Crove 7 9x	Telephone No.
Lease	City/ State	FOR OFFICE USE ONLY
Well	ORIGINATION OF WASTE	FLAC
Drilling Workover/	Operations Center Croul Tox	
Completion	Property Name A.S. Burleson 4	Field
	(Well, Tank Battery, Plant, Facility)	
	WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS	., UNITS, ETC.)
Asbestos Commercial Drilled Solids Drilled Pit Lic Filter Elemer General Refo	Produced Sand	ater Runoff
CERTIFICATIO	ON: The waste described above is not hazardous pursuant to 40 CFR Part 261 and was consigned to the to	ransporter named below. I certify that the
0	foregoing is true and correct to the best of my knowledge.	anapartai hamaa aalam. Faattiiy tiidi tiid
	E. P. Nound	10-2-85
	Signature of Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPORTER: (To be completed in full by Transporter)	1
	Name MALCO TRUCKING INC.	(915) 366-4080
	Address 2800 W. 42nd.	Telephone No.
	O.L	Truck License No.
	City/State Odessa, IX 79764	Trailer License No.
		Parameter ()
·	Estimated Transportation Cost	
, 		, , , , , , , , , , , , , , , , , , ,
CERTIFICATIO	N: I certify that the waste in quantity above was received by me for shipment to the destination below.	
	Signature of Transporter's Agent	Date and Time Received
PART III:	DISPOSAL SITE:	
	Name CRI	
	Address CONTROLLED RECOVERY, INC. P.O. BOX 369	
	City/State HOBBS, N.M. 88241	
	Method of Disposal	
	Estimated Disposal Fee	
CERTIFICATIO	N: I certify that the waste described in Part I was received by me via the transporter described in Part II.	1 m = 100 =
	Atlfr.	<u> </u>
	Signature of Facility Agent	Date and Time Received

		NON-HAZARDOUS	WASTE MANIF	EST	Æ
PART I:	MI	74	0.0	> ∰ Mar √ × W	nifest 👭 2669
Onsite Offsite	/ Generator:	Mersdia	Ce		
LOCATION	Address				Telephone No.
☐ Facility	City/State	Crone Tex	· 		FOR OFFICE USE ONLY
☐ Lease ☐ Well	Ą.		entre la versión		FLAC
Drilling	ORIGINATION	OF WASTE			
Workover Completio		Center Crow	ev		-
	Property Na	ame Burloson	Battery, Plant, Facility)	· · · · · · · · · · · · · · · · · · ·	Field <u>0088/</u>
rocal deservation (Sept. 19	VALA OTE IDENTIF	(Well, Tank		CITETIBELL	INITE LTO
, ,	VVASTE IDENTIF		TELS, TARDS, TUNS,		
Asbestos		Oily Waste	() <u> </u>	. op o	
Commercia Drilled Solid	II/Site Waste	Plant Waste Water-1 Produced Sand	rans	Storm WateUsed Contain	
Drilled Soll	, ,	Produced Sand Produced Water-Train	ns ()	. Used Contai	, , ,
Filter Eleme	-	Rinsate	()	. Workover/C	, ,
		Scale	()		Compl. Liquids
	(3)	Sludge (water)	()	Other	
General Re	fuse <u> </u>	Sludge (petroleum) /	BS () <u>100</u>		
H ₂ S Scaveno	gers/Sweetening()	Sludge (chemical)	()		
		Signature of Generator's Aut			Date and Time of Shipment
PART II:	TRANSPORTER: (T	o be completed in full by Transp			
145 <u>.</u> £	Name	MALCO TRUCKING	INC.		(915) 366-4080
	Address	2800 W. 42nd.	77.00.00		Telephone No.
		Odessa, TX 79764			Truck License No.
	2.0,7	N.			Trailer License No.
1	A State of the	· · · · · · · · · · · · · · · · · · ·	Bungan &	er to a discount of	新文·中国、李·李·李·文·《······························
	Estimated Transpor	tation CostX			
CERTIFICATI	ON: I certify that the wast	e in quantity above was received by me	for shipment to the destin	nation below.	10/-
÷.	Wille	m (selin	1		10/8/95_
10		Signature of Transporte	r's Agent		Date and Time Received
PART III:	DISPOSAL SITE:				
	Name	CDI			J
		CONTROLLED RECO	VEDV INA		_
		PO BOX 360	VENT, INU.		
	City/State	P.O. BOX 369 HOBBS, N.M. 88241			
	Method of Disposal	•:			
	Estimated Disposal	•			
	Latiniated Diaposal				
CERTIFICATI	ON: I certify that the wast	e described in Part I was received by m	e via the transporter desc	ribed in Part II.	1 010
	<u> </u>	Wille			10895 4431
		Signature of Facility	Agent		Date and Time Received

WHITE ORIGINĂL : FIELD : SENDS TO MAIN OFFICE

YELLOW COPY - FIELD

PINK COPY - TRANSPORTER

GOLDEN ROD COPY - DISPOSAL SITE

NON-HAZARDOUS WASTE MANIFEST

Manifest Nº

2668

PART I:	
DISPOSAL Generator: Meridian Oel	
Unsite	()
LOCATION Address	Telephone No.
Facility City/State	FOR OFFICE USE ONLY
Lease / / Well	FLAC
ORIGINATION OF WASTE	
Workover/ Operations Center Croul Tex	_
Property Name Burlesow	Field <u>0088/</u>
(Well, Tank Battery, Plant, Facility)	
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., I	UNITS, ETC.)
Asbestos Oily Waste \(\text{(`)} Spill Clean-	up & Debris ()
Commercial/Site Waste Plant Waste Water-Trans Storm Water	
Drilled Solids () Used Conta	1. A
Drilled Pit Liquids () Produced Water Transi () Used Lube (
	Compl. Solids
(3) Sludge (water) () Other	Sompi. Liquids
General Refuse Sludge (petroleum) BS () 100	
H ₂ S Scavengers/Sweetening () Sludge (chemical) ()	
CERTIFICATION: The waste described above is not hazardous pursuant to 0 CFR Part 261 and was consigned to the transforegoing is true and correct to the best of my knowledge. E. D. Doeuler Signature of Generator's Authorized Agent	sporter named below. I certify that the 10-5-5 Date and Time of Shipment
PART II: TRANSPORTER: (To be completed in full by Transporter)	
	1015 256 4090
Name MALCO TRUCKING INC.	(915) 366-4080 Telephone No.
Address <u>2800 W. 42nd.</u>	Truck License No.
City/State Odessa, TX 79764	
Estimated Transportation Cost	Trailer License No.
CERTIFICATION AND AND AND AND AND AND AND AND AND AN	
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below.	10.0-0
Signature of Transporter's Agent	Date and Time Received
	Date and Time Neceived
PART III: DISPOSAL SITE: CRI Name CONTROLLED RECOVERY, INC. Address P.O. BOX 369 City/State HOBBS, N.M. 88241	-
Method of Disposal	
Estimated Disposal Fee	
CERTIFICATION: I certify that the waste described in Part II.	10895 MG F
Signature of Facility Agent	Date and Time Received
//	Obto Cita Time Neoditor

1	ION-HAZARDOUS WASTE MANIFEST	
	Bar will	Manifest 12 2664
PART I:		
DISPOSAL		
☐ Onsite ☐ Generato	r. Meridian Out	
LOCATION Address		Telephone No.
Facility City/State	e row Tox	FOR OFFICE USE ONLY
Lease Well	``	FLAC
Drilling ORIGINATION		
☐ Workover/ Operation		
Property I	Name A.S. Bunleson n' (Well, Tank Battery, Plant, Facility)	Field <u>03/72</u>
WASTE IDENT	TIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT	T., LBS., UNITS, ETC.)
Asbestos		Il Clean-up & Debris ()
Commercial/Site Waste		rm Water Runoff
		ed Containers ()
Drilled Pit Liquids () _	· · ·	ed Lube Oils ()
	· ·	rkover/Compl. Solids rkover/Compl. Liquids
	Studge (water) () Oth	· ·
General Refuse	Sludge (petroleum) BS () 100	
H_2S Scavengers/Sweetening () _	Sludge (chemical) ()	
<u> </u>	A correct to the best of my knowledge. A country Signature of Generator's Authorized Agent To be completed in full by Transporters	10-7-74 Date and Time of Shipment
PARTII. TRANSPURTER.	(To be completed in full by Transporter)	(045) 000 4000
Name	MALCO TRUCKING INC.	(915) 366-4080 Telephone No.
Address	2800 W. 42nd.	Truck License No.
City/State	odessa, TX 79764	Trailer License No.
		Haller License No.
Estimated Transpo	ortation Cost	
CERTIFICATION: I certify that the wa	aste in quantity above was received by me for shipment to the destination be	elow.
- Am	Signature of Transporter's Agent	Date and Time Received
PART III: DISPOSAL SITE:		
	CRI	
Name	CONTROLLED RECOVERY, INC.	
Address .	P.O. BOX 369	
City/State	HOBBS, N.M. 88241	
Method of Dispos	al	
Estimated Disposa		
·	1 000	
CERTIFICATION: I certify that the wa	aste described in Part was received by me via the transporter described in I	Part II.
	Signature of English Agent	(0 8 1) (0 1

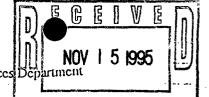
<u>DISTRUCTI</u> P.O.Box 1980, Hobbs, NM 88241-1980

DISTRICT II

P.O. Drawer DD, Anesia, NM 88211-0719

DISTRICT III
1000 Rio Brazos Rd, Aziec, NM 87410

State of New Mexico NON
Energy, Minerals and Natural Resources Department



Form C-118
Revised 4-1-91
Sheet 1

OIL CONSERVATION DIVISION DIVISION

P.O. Box 2088

Santa Fc, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

eport of Controlled Reco	overy Inc.	Mont	h & year_SEPTEMBER 1995
idress P.O. Box 369	Hobbs, NM	88241-0369	1111
TOTAL STOCE	CS PIPELINE OIL B	EGINNING OF MONTII (Attach addition	nal sheets if necessary)
PLANT NAME	TO TAT BOX 15 GLD 5	LOCATION	BARRELS
" I DATI ITANE		<u> </u>	D.IIGUES
Controlled Recovery J	Inc.	Halfway Disposal	9,617.85
		TOTAL ALL	PLANTS 9,617.85
TOTA	L PIPELINE OIL R	ECOVERED (Attach additional sheets if r	
PLANT NAME		LOCATION	BARRELS
Controlled Recovery I	nc.	Halfway Disposal	2112.80
•			
	}		
		TOTAL ALL	PLANTS 2112.80
D	ELIVERIES PIPELI	NE OIL (Attach additional sheets if necess	sary)
FROM		ТО	BARRELS
		·_	5.1.01.56
Controlled Recovery I TRANSFERED FROM OIL TO PLANT TO DISPOSAL ARE	REATING PLANT	WATER SOLIDS	2500.00 345.60
		ΤΟΤΛΙ ΛΙΙ	PLANTS 2845.60
TOTAL STO	CKS PIPLELINE OF	L END OF MONTH (Attach additional s	
PLANT NAME		LOCATION	BARRELS
Controlled Recovery I	nc.	Halfway Disposal	8885.05
		TOTAL ALL	PLANTS 8885.05

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE OUALITY OIL RECOVERED BY TREATING PLANTS

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-18194	TRANSPORTER: AA OILFIELD TOTAL	A.A. OILFIELD SERVIO STATE AB SWD #1	150.00 150.00	0.00
TEXAS	TRANSPORTER: ANDREWS BUTANE TOTAL	BERGSTEIN ANDREWS YARD	200.00 200.00	0.00
A-8827 H-18362	TRANSPORTER: DEVON ENERGY DEVON ENERGY TOTAL	I & W INC. KEEL B 76 67 & 84 KEEL A & B	100.00 80.00 180.00	0.00
WATER	TRANSPORTER: OXY USA TOTAL	LUCKY WELL SERVICE TRACT B	<u>90.00</u> 90.00	0.00
TEXAS	TRANSPORTER: MERIDIAN OIL CO. TOTAL	MALCO TRUCKING VARIOUS LEASES	3082.00 3082.00	687.25
TEXAS A-8833 TEXAS	TRANSPORTER: MERIDIAN OIL CO. ROWLAND TRUCKING SCURLOCK PERMIAN TOTAL	ROWLAND TRUCKING CO. VARIOUS LEASES CRW SWD PHIBRO	3352.26 130.00 30.00 3512.26	1424.93
	TOTAL GROSS BARREL	5	7214.26	
	TOTAL NET BARRELS			2112.18

PART I:	Generator	ANDREWS-BUTANE POUTC	Disposal
	Address	P.O. BOX \$ 98189	(915) <u>524 -4405</u>
	City/State	AND STA 997W	
	Olly/Olate	LuBBull 79499-818	Telephone No.
ORIGINATION OF	WASTE:	LUBOUIL /17// 010	
		/	
Operations Center	HNOREWS,		RRC No. <u>08-361</u>
Property Name	On draws	Butane Disposal	
Property Name		•	
	(Well, Tar	ık Battery, Plant, Facility)	
WASTE IDE	ITIFICATION AN	D AMOUNT (BARRELS, YARDS, TONS	CUFF, LBS, UNITS, ETC)
Commercial/Site Waste		Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids	<u> </u>	Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweeten	ing	Scale	Completion Solids
BS&W/Crude	x/00	Sludge (Water)	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
			A STAN A STAN TO THE STAN AS A
		•	
CERTIFICATION:		d above is not hazardous pursuant to 40CFR Part 26	
	below. I certify the f	oregoing is true and correct to the best of my knowle	-
χ		<u></u>	V Sept 18, 95 400
<i>Y</i>	Signature of G	enerator's Authorized Agent	X SIPT 18, 95 4-CI Date and Time of Shipment
PART II:	TRANSPORT	TER: (To be completed in full by Tr	onenorter)
1 731 (1)	manoj Om	Tert. (10 be completed in idia by 11	ansporter)
	Name	Bergstein Environmental,	Inc 806-790-3503
	Address	P.O. BOX 10701	Telephone No.
	City/State	Lubbock, TX 79408	
	Olty/Olate	LUDBOCK, I K / 1408	Truste Ala
CERTIFICATION:	Loorlify that the wee	te in quantity above was received by me for shipmen	Truck No.
OLITINIOATION.	Condity draft draft was	te in quartity above was received by me for shipmen	to the destination below.
χ	d alphi	Valuras	V9-18-45-4.00
· ·	Signature o	f Transporter's Agent	Date and Time Received
DADT III-	DECLAMATI	ON CITE.	
PART III:	RECLAMATION	JIN SITE.	
	Name	Controlled Recovery, Inc./Inland Pr	oducts
		P.O. Box 369	
		Hobbs, NM 88241	
	,	·	***************************************

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

Address City/State

Hobbs, NM 88241

i	NON-HAZA	RDOUS WASTE MANIFEST/RU	N TICKET
PART I: ORIGINATION OF	Generator Address City/State	ANDREWS Butane Route D P. D. BOX 2005 98189 LUBBOUK 79499 - 8189	(415) <u>584 - 4405</u>
ORIGINATION OF	WASIE.	•	
Operations Center	Anorews	TX	RRC No. <u>08-361</u>
Property Name		Butane DisposeL ank Battery, Plant, Facility)	
WASTE IDE	VITIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS, C	JFT, LBS, UNITS, ETC.)
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Plant Waste Water Signature Signature Signature Signature Signature Scale Signature Signature Scale Signature Signat	pill Clean-up & Debris torm Water Run-off sed Containers sed Containers sed Lube Oils ompletion Solids ompletion Liquids ther
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 261 and foregoing is true and correct to the best of my knowledge. Generator's Authorized Agent	d was consigned to the transporter named X Solt 27 530 A5 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full by Trans	sporter)
CERTIFICATION:	Name Address City/State Certify that the wa	Bergstein Environmental, Inc. P.O. Boxi 10701 Lubbock, TX 79408 ste in quantity above was received by me for shipment to the shipment of transporter's Agent	806-790-3503 Telephone No. X 11-26 9 Truck No.
PART III:	RECLAMATI	ON SITE:	
	Name Address	Controlled Recovery, Inc./Inland Prod P.O. Box 369	ucts

PART I: ORIGINATION OF Operations Center Property Name	Anorews,	ANDREWS-Butane ROUTC- P. O. BOX STO 98189 DIBBUIL 79499-818 TX Butane Disposal	Telephone No.
•	-	nk Battery, Plant, Facility)	
WASTE IDEI	NTIFICATION A	nd amount (barrels, yards, ton)	CUFT, LBS, UNTS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know Senerator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
	Name Address City/State	Bergstein Environmental, P.O. BOX 10701 Lubbock, TX 79408	Inc. 806-790-3503 Telephone No. Truck No.
CERTIFICATION:	dalph (ste in quantity above was received by me for shipme Carrier and the shipme of transporter's Agent	nt to the destination below. \[\frac{9-18-95-4'Q5}{\text{Date and Time Received}} \]
PART III:	RECLAMATI	ON SITE:	· · ·
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	roducts

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

PART I:	Generator Address City/State	MERIDIAN 1112 W. Hgy 329 HCR 65 CLANE, TX 79731	Box 58 (9/5) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:	•	
Operations Center	MIDLAND	, 7%	RRC No
Property Name	JF LAN (Well, Ta	Enk Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	 ning36	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. certify the	ed above is not hazardous pursuant to 40CFR Part 26 foregoing is true and correct to the best of my knowled was a few seconds of the best of my knowled and	
PART II:	TRANSPOR	TER: (To be completed in full by Tr	ansporter)
	Name Address City/State	Malco Trucking P.O. Box 14787 ODESSA, TX 79768-4787	915 - 366~4080 Telephone No.
CERTIFICATION:	Curtis >	ste in quantity above was received by me for shipmen of Transporter's Agent	Truck No. It to the destination below. G-13-95 5: 30 pm Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland P P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION:	John	este described in Part I was received by me via the tra	nsporter described in Part II. 9-12-95 1' 40 AM Date and Time Received

PART I:	Address City/State	MERIDIAN MIL W. Hgy. 329 CLANE, TX 797.	HCR 65 BOX 58	(9/5) <u>563 - 0.274</u> Telephone No.
ORIGINATION OF	WASTE:	•	•	
Operations Center	MIDLAND), TX	F	RRC No. <u>925</u>
Property Name	JF LAN	IE		
	(Well, Ta	ank Battery, Plant, Facility)		
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS,)	ARDS, TONS, CU.FT., LB	S., UNITS, ETC.)
Commercial/Site Waste	9	Oily Waste		-up & Debris
Drilled Solids		Plant Waste Water	Storm Wat	
Drilled Pit Liquids	·	Produced Sand	Used Cont	
Filter Elements		Produced Water	86 Used Cont	
General Refuse	·	Rinsate	Used Lube	
H2S Scavengers/Sweete	ning		Completion	
BS&W/Crude	_36_		Completion Other	Liquids
(Tank Bottoms)	ž. 4		Other	
TOTAL of	122 BBIS	•		
		•		
CERTIFICATION:		ed above is not hazardous pursuan		igned to the transporter named
	below. I certify the	e foregoing is true and correct to the	best of my knowledge.	
	11/2 7	udole	G. Carlotte and Car	11-95 500CM
	Signature of	Generator's Authorized Agent		Oate and Time of Shipment
	·	<u> </u>		
PART II:	TRANSPOR	RTER: (To be completed	d in full by Transporter)	
	Name [†]	Malco Trucking P.O. Box 14787		915-366-4080
•	Address	P.O. BOX 14787		Telephone No.
•	City/State	ODESSA, TX 7976	S-4797	,
	*			Truck No.
CERTIFICATION:	Loortify that the w	aste in quantity above was received	by me for shipment to the destina	
OLITINIO/MIOM.	Tooluly triat trie w	7 / T		
	(1.6)	1260		Date and Time Received
	Signature	of Transporter's Agent		Date and Time Received
PART III:	RECLAMAT	TION SITE:		
	Name	Controlled Recovery, I	nc./Inland Products	
	Address	P.O. Box 369		
	City/State	Hobbs, NM 88241		
CERTIFICATION:	I certify that the w	aste described in Part I was receive		•
			<u> </u>	Date and Time Received
	Signatu	re of Facility Agent	·	Date and Time Received

WHITE ORIGINAL - CRI YELLOW COPY - CRI

PART I:	Generator Address City/State	Meridian 1112 W. Hgy. 32 CRANE, TX 797		58 (9 <i>1</i> 5) <u>563-0274</u> Telephone No.			
ORIGINATION OF WASTE:							
Operations Center			lan	RRC No. <u>869</u>			
Property Name	,	NC (Odem) unk Battery, Plant, Facility)	<u></u>				
WASTE IDEI	NTIFICATION A	ND AMOUNT (BARRELS, '	ARDS, TONS, CU.FT.	LBS., UNITS, ETC.)			
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	ning	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Storm Used (Used (Used I Compl	lean-up & Debris Water Run-off Containers Containers Lube Oils etion Solids tion Liquids			
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuan foregoing is true and correct to the Tusduck Generator's Authorized Agent		consigned to the transporter named 9-13-95 8:30 Am Date and Time of Shipment			
PART II:	TRANSPOR	TER: (To be complete	d in full by Transpor	ter)			
	Name Address City/State	P.O. BOX 99 EUNICE, NM 82	ing 123 1	505-394-2581 Telephone No.			
CERTIFICATION:	Bill for	ste in quantity above was received of Transporter's Agent	by me for shipment to the de	Truck No. stination below. 9-13-95 11:55 Am Date and Time Received			
PART III:	RECLAMAT	ION SITE:					
	Name Address City/State	Controlled Recovery, P.O. Box 369 Hobbs, NM 88241	nc./Inland Products				
CERTIFICATION:	Thesis ?	ste described in Part I was received	d by me via the transporter d	escribed in Part II. 9-13-95-13:15 FM Date and Time Received			

PINK COPY - Generator

GOLDENROD COPY - Transporter

7-95-150-4pt-bk25

WHITE ORIGINAL - CRI

PART I:	Generator Address City/State	Meridian 1112 W. Hay. 329 CRANE, TX 79731	HCR 6 SBA :	58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTE:			
Operations Center	Midlano,	TX	<u> </u>	RRC No
Property Name	J. F. LA.	nk Battery, Plant, Facility)	;	
WASTE IDEN	NTIFICATION AN	ID AMOUNT (BARRELS,	YARDS, TONS, C	:U.FT., LBS., UNITS, ETC.)
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)		Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	d above is not hazardous pursua foregoing is true and correct to the Acceptance of the contract of the contrac		and was consigned to the transporter named le. 9.13-95 7:30Am Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be complete	ed in full by Trai	nsporter)
	Name Address City/State	Rowland TRuck P.O. Box 99 Eunice, NM	King CO. 88231	50 5- 394-258/ Telephone No
CERTIFICATION:	Bill 7	ste in quantity above was receive	d by me for shipment t	the destination below. 9.13.95 11:05 Am Date and Time Received
PART III:	RECLAMATI	ON SITE:		
	Name Address City/State	Controlled Recovery, P.O. Box 369 Hobbs, NM 88241	Inc./Inland Pro	<u>ducts</u>
CERTIFICATION:	In	ste-described in Part I was received of Facility Agent	ed by me via the trans	porter described in Part II. 9 15 95 11:15 AM Date and Time Received

WHITE ORIGINAL - CRI

PART I:	Generator Address City/State	Micridian 1112 W. Hgy 329 CLANE, TX 799	HCR 65 Buf 58	(91 <u>9</u> <u>563-607/</u> Telephone No.
ORIGINATION OF	WASTE:	r		
Operations Center	Midlan	,	<u> </u>	RRC No. <u>972</u>
Property Name		hir K C A/C # ank Battery, Plant, Facility)	<u>/</u>	
	(**************************************	and Satisfy, Fland, Fashing,		
WASTE IDEI	NTIFICATION A	ND AMOUNT (BARRELS, Y	ARDS, TONS, CU.FT.,	BS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements		Oily Waste Plant Waste Water Produced Sand Produced Water	Storm W Used Co Used Co	ontainers
General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	ning	Rinsate _ Scale _ Sludge (Water) _ Sludge (Petroleum) _		ion Solids on Liquids
CERTIFICATION:	below. I certify the	ned above is not hazardous pursuant e foregoing is true and correct to the July W Generator's Authorized Agent	best of my knowledge.	onsigned to the transporter named 9.13-95 8:15 Date and Time of Shipment
PART II:	TRANSPOF	RTER: (To be completed		er)
	Name Address City/State	Rowland TRuck P.O. Box 99 Eunice, NM 8	1'ng 60.	505-394-358/ Telephone No. 57
CERTIFICATION:	I certify that the w	aste in quantity above was received l	by me for shipment to the dest	Truck No. ination below.
	Tommy / Signature	Motes e of Transporter's Agent		9-13-95 11 10 AM Date and Time Received
PART III:	RECLAMAT	TON SITE:		
	Name Address City/State	Controlled Recovery, In P.O. Box 369 Hobbs, NM 88241	nc./Inland Products	
CERTIFICATION:	Josep &	aste described in Part I was received	by me via the transporter des	9.13.95 11'35 Am
	Signate WHITE ORIGINAL - CRI	re of Facility Agent YELLOW COPY - CRI PINK COPY - C	ienerator GOLDENROD COPY - Tr	Date and Time Received

ا مر	NON-HAZÁ	RDOUS WASTE MANIFEST	RUN TICKET
المحتسبة المحتمد PART I:	Generator	Rowland Trucking	7
,	Address	. '	(3011) 2541
	City/State	EUNIC & N 171	Telephone No.
ORIGINATION OF	WASTE:	•	
	· · · · ·	<i>,</i>	·
Operations Center			RRC No. <u>00960</u>
Property Name		ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	9	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids	<u>`</u>	Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers Used Lube Oils
General Refuse H2S Scavengers/Sweete	ning	Scale	Completion Solids
BS&W/Crude	1/	Sludge (Water)	Completion Liquids
(Tank Bottoms)	7	Sludge (Petroleum)	Other
CERTIFICATION:	below. I certify th	ped above is not hazardous pursuant to 40CFR Part e foregoing is true and correct to the best of my know Leww Generator's Authorized Agent	
PART II:	TRANSPOR	RTER: (To be completed in full by	
	Name		525 - 574. 2581
	Address		Telephone No.
	City/State	FUNICE N.M 88231	Telephone No.
	Only/ Clare		Truck No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipm	
	Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TION SITE:	
	Name	Controlled Recovery, Inc./Inland	<u>Products</u>
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via the	transporter described in Part II.
	BILLI	Tun	9-14-95-12:00
	Signati	ure of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Date and Time Received

	NON-HAZA	RDOUS WAST	E MANIFËST	/RUN TICKET
PART I:	Generator Address City/State	Rowlnud Envice N		(394) <u>25</u> 8/ Telephone No.
ORIGINATION OF	WASTE:		•	
Operations Center			<u>.</u>	RRC No. 00960
Property Name		ank Battery, Plant, Facility)	<u></u>	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARE	RELS, YARDS, TON	IS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Wate Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum		Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ped above is not hazardous of foregoing is true and corr Lewist Generator's Authorized Ag	ect to the best of my kno	261 and was consigned to the transporter named wledge. Output Date and Time of Shipment
PART II:	TRANSPOF	RTER: (To be com	npleted in full by	Transporter)
	Name Address			505-394-259/ Telephone No.
	City/State	EUNICE N.	7 84231	
CERTIFICATION:	Tonny	•	received by me for shipn	Truck No. nent to the destination below. Date and Time Received
PART III:	RECLAMAT Name Address City/State			
CERTIFICATION:	l certify that the wa	· ·		transporter described in Part II. 9-14-95 13-3- Date and Time Received

	NON-HAZA	RDOUS WASTE MANIFE	ST/RUN TICKET
PART I:	Generator Address City/State	Mersidno Oil Crave Tex	()
ORIGINATION OF	WASTÉ:		
Operations Center	<u> </u>	ve TixAS	RRC No. 0097/
Property Name		ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS,	TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFF of foregoing is true and correct to the best of many descriptions of the best of many descriptions of the foregoing is not been also as a second of the best of the be	R Part 261 and was consigned to the transporter named by knowledge. 9-14-95 NM Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full	by Transporter)
	Name Address City/State	MAICO Trucking	915 366408 Telephone No. Truck No.
CERTIFICATION:	. E. P. P.	aste in quantity above was received by me for gumul. of Transporter's Agent	
PART III:	RECLAMAT	ION SITE:	
•	Name Address City/State	Controlled Recovery, Inc./Inla P.O. Box 369 Hobbs, NM 88241	and Products
CERTIFICATION:	I certify that the wa	aste described in Part I was received by me vi	a the transporter described in Part II.

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

Signature of Facility Agent

9-14-95 3'38 Date and Time Received

PART I:	Generator Address City/State	MERRIDIAN Crave TX	0:1	() Telephone No.
ORIGINATION OF	WASTE:		•	·
Operations Center		ie Tex	<u> </u>	RRC No. 0097/
Property Name	Well, Ta	ink Battery, Plant, Facility)		
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS	, YARDS, TONS, CU.	FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)	ning	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Sto Use Use Cor	Il Clean-up & Debris rm Water Run-off ed Containers ed Containers ed Lube Oils mpletion Solids npletion Liquids eer
CERTIFICATION:	below, I certify the	ed above is not hazardous pursu foregoing is true and correct to the Downson Generator's Authorized Agent		was consigned to the transporter named 9-14-75-10 But Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be complet	ed in full by Trans	porter)
CERTIFICATION:	Name Address City/State	Malco Tr	De la companya della companya della companya de la companya della	Telephone No. Truck No.
· ·	Curtis J. E	of Transporter's Agent	— .	9-14-95 2:30 Date and Time Received
PART III:	RECLAMAT	ION SITE:		
	Name Address City/State	Controlled Recovery P.O. Box 369 Hobbs, NM 88241	, Inc./Inland Produ	<u>cts</u> —
CERTIFICATION:	Jose Sell	ste described in Part I was recei	ved by me via the transport	er described in Part II. 역- 14·65 / 3 호 Date and Time Received

YELLOW COPY - CRI PINK COPY - Generator

GOLDENROD COPY - Transporter

WHITE ORIGINAL - CRI

ORIGINATION OF WASTE: Operations Center Crave TX RRC No. OO Property Name ARRESS BTY (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS, UNITS, ETC.) Commercial/Site Waste Oily Waste Drilled Solids Plant Waste Water Storm Water Run-off Produced Sand Tused Contrainers Filter Elements Produced Water Used Containers General Refuse Rinsate Used Lube Oils BS&W/Crude (Tank Bottoms) CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporte below. Ligerity the foregoing is true and correct to the best of my knowledge. CERTIFICATION: TRANSPORTER: (To be completed in full by Transporter) Name Address City/State CERTIFICATION: I centify that the waste in quantity above was received by me for shipment to the destination below. C. N. Parmell	PART I:	Generator Address City/State	METTERNOIL CIANC TX	() Telephone No.
Operations Center	ORIGINATION OF		4	
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., L6S., UNITS, ETC.) Commercial/Site Waste		•	e 7x	RRC No. 00968
Commercial/Site Waste Drilled Solids Plant Waste Water Drilled Solids Plant Waste Water Storm Water Run-off Drilled Solids Produced Sand Drilled Pit Liquids Fitter Elements General Refuse Produced Water Used Containers	Property Name		• • •	
Drilled Solids Drilled Solids Drilled Solids Drilled Interpretation Drilled Solids Drilled Produced Sand Drilled Solids Drilled Recovery, Inc./Inland Products Drilled Controlled Recovery, Inc./Inland Products	WASTE IDEN	ITIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU:FT., LBS., UNITS, ETC.)
CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transported below. I certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent Date and Time of Shipment II: TRANSPORTER: (To be completed in full by Transporter) Name Address City/State Telephone CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received Part III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products	Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeten		Plant Waste Water Produced Sand Produced Water Rinsate Scale	Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids
below. I certify the foregoing is true and correct to the best of my knowledge. E. Douwle 9-15-95 Signature of Generator's Authorized Agent Date and Time of Shipp PART II: TRANSPORTER: (To be completed in full by Transporter) Name 7MAICO 7FUCKING. 915-360 Address City/State Dates Address City/State Dates A 15 Truck No CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. E. D. Date and Time Received Dates Agent Dates	1	10083		
Name Males Trucking 915 366 Address City/State Colless A Telephone CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. C. A. Annulu Signature of Transporter's Agent Date and Time Received Description of Transporter's Agent Description of Transpo	CERTIFICATION:	below. I certify the	of foregoing is true and correct to the best of my kn	
Address City/State City/State City/State City/State City/State City/State City/State City/State Coty/State City/State Coty/State City/State City/State City/State Coty/State City/State City/State City/State City/State Coty/State City/State City/State City/State City/State City/State Coty/State City/State Coty/State City/State City/State Coty/State Coty/State City/State Coty/State Coty/State City/State Coty/State Coty/State	PART II:	TRANSPOR	TER: (To be completed in full by	Transporter)
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Controlled Recovery, Inc./Inland Products		Address		915 3664080 Telephone No.
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products	CERTIFICATION:		\ \ \ \ \	Truck No.
Name <u>Controlled Recovery, Inc./Inland Products</u>		Signature	of Transporter's Agent	Date and Time Received
	PART III:	RECLAMAT	ION SITE:	· •
City/State Hobbs, NM 88241		Address	P.O. Box 369	l Products
CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II. Signature of Facility Agents Date and Time Received.	CERTIFICATION:		All	e transporter described in Part II. Date and Time Received



THE REPRODUCTION OF

THE

FOLLOWING

DOCUMENT (S)

CANNOT BE IMPROVED

DUE TO

THE CONDITION OF

THE ORIGINAL

PART I:	Generator Address City/State	Meridina Crave	Oi'l	()Telephone No.
ORIGINATION OF	WASTE:		g.	
Operations Genter	Meridia	v 011		RRC No. 0096/
Property Name		we C 1374	<u> </u>	
	(Well, Ta	nk Battery, Plant, Facility)		
WASTE IDEN	ITIFICATION AN	ND AMOUNT (BARREL	S. YARDS, TONS, C	CU.FT., LBS., UNITS, ETC.)
Commercia/Site-Vasis Differsollos Differsollos Fileralentente General Refuse Fileralententes Fileralententes Fileralententes Fileralententes Fileralententes		Olly.Wasto F Rahi Waste Water Produced Sand Produced Water Rinsate Scale Studge (Water) Sludge (Patroleum)		Spill Clean-up & Debris Sor pr Water Fun-off Used Containers Used Containers Used Luber Oils Completion Solids Completion Liquids Other
e)==en[H(e):\nn(e)\nk	FIEW REDUNNE	elobovost smošinazardou prija Propolaty in in Durick Sanciak Propolaty in in Durick Sanciak Taruna se se in Olifica se sulai	odiodeskawy nowiest	enskversonelgned solhe/tensporternemed (* 1900) Di Polonial Time of Salement
	entitutationin Marchine Marchine	FDE Francis Gastales	are for the last the	FEIDOFEIX) POUDITARE RE
				Dabara Francisco de la contraction de la contrac
PANTE IN	CHIMPSIERS Mercie Mercie Mercie	(c)) 3 = Cie) (co)	av. Inc./Inlandi Pro	
e)Estillate).virte)M	Jan J	: (a.c.)Ded In Parkhyas re	celved by me via the trans	porter described in Part II. 9-14-95-8: Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generato

GOLDENROD COPY - Transporter

PART I:	Generator Address City/State	MERIDIAN Cranwa Tax	<u> </u>	()
ORIGINATION OF	WASTĘ:	A	The state of the s	
Operations Center	Crone	-	- <u> </u>	RRC No. 00971
Property Name	J.H. Shi	vK R		
1 Topolty Hamo		nk Battery, Plant, Facility)	-	
			* \	
WASTE IDE	NTIFICATION AN	ND AMOUNT (BARRELS, YA	ARDS, TONS, CU.FT.,	LBS., UNITS, ETC.)
Commercial/Site Waste	e	Oily Waste	Spill Cle	ean-up & Debris
Drilled Solids		Plant Waste Water	Storm V	Water Run-off
Drilled Pit Liquids		Produced Sand		ontainers
Filter Elements		Produced Water		ontainers
General Refuse H2S Scavengers/Sweete	ning	Rinsate * Scale		etion Solids
BS&W/Crude	9	Sludge (Water)		ion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other	
i	•	2 2		
· · · · · · · · · · · · · · · · · · ·				
		5.75 10 0		\
CERTIFICATION:				consigned to the transporter named
	below. I certify the	foregoing is true and correct to the b	est ormy knowleage.	
**************************************	£ 17.	Pacener	- 1	9-16-95
;	Signature of G	Generator's Authorized Agent	· ·	Date and Time of Shipment
			1000 17	
PART II:	TRANSPORT	TER: (To be completed	in full by Transport	er) 🖫
1		7.19		
	Name C	Mallo		915-366408
	Address		· .	Telephone No.
7×	City/State	Cleria		
The second of th		and the state of t	nie service de la companya de la com	Truck No.
CERTIFICATION:		ste injquantity above was received b		
	5 /	Pouriela	and the second s	9-16-95
	Signature of	of Transporter's Agent	_	Date and Time Received
				
PART III:	RECLAMATION	ON SITE		
FARTIII.	LICOLANIATIO	ON SITE.		`
*	Name **	Controlled Pagevany In	o Inland Braduata	
	\	Controlled Recovery, In	<u>c./mana Products</u>	
		P.O. Box 369		
	City/State	Hobbs, NM 88241		
CERTIFICATION:	Loopify that the	A do Arihani i Port I	h	anihad in Dad II
JEHHI IOAHON.	i Ceruiy trial trie Was	of described in Part I was received	by the via the transporter de	SCHOOL IN PARTIL.
	1 ptu	US .	1 9	167) 350/
	Signature	e of Facility Agent		Date and Time Received
	WHITE ORIGINAL - CRI	YELLOW COPY - CRI PINK COPY - Ge	eneralor GOLDENROD COPY - 1	Fransporter

7-95-150-4pt-bk25

	NON-HAZA	ARDOUS WASTE MANIFEST/	RUN TICKET
PART I:	Generator Address City/State	Rowlaxed Trucking EUNICE NIX	(394) <u>26 7/</u> Telephone No.
ORIGINATION OF	WASTE:		
Operations Center		· Idinx	RRC No. <u>00924</u>
Property Name		Fank Battery, Plant, Facility)	
WASTEIDE	NTIFICATION	AND AMOUNT (BARRELS, YARDS, TONS	GU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:		bed above is not hazardous pursuant to 40CFR Part 2 se foregoing is true and correct to the best of my knowl	
* *	Signature o	f Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPOR Name Address City/State	RTER: (To be completed in full by T	ransporter)
CERTIFICATION:	23	raste in quantity above was received by me for shipme of Transporter's Agent	Truck No. nt to the destination below. 7 - 12 - 5 Date and Time Received
PART III:	RECLAMAT Name Address City/State	FION SITE: <u>Controlled Recovery, Inc./Inland P</u> <u>P.O. Box 369</u> <u>Hobbs, NM 88241</u>	roducts
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via the tre	unsporter described in Part II.

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Signature of Facility Agent

Date and Time Received

PART I:	Generator . Address City/State	Meridian Ol	()
ORIGINATION OF		, a wall of	
Operations Center	_ Cran	e, texor	RRC No. 00968
Property Name		eese BT-J ink Battery, Plant, Facility)	
WASTENDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	od above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know Generator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
CERTIFICATION:	E.P.	ste in quantity above was received by me for shipmed of Transporter's Agent	Telephone No.
PART III:	RECLAMATI	ON SITE:	
CERTIFICATION:	Name Address City/State	Controlled Recovery, Inc./Inland F P.O. Box 369 Hobbs, NM 88241 ste describéd in Part I was received by me via the tr	eneroter described in Part II
	Signature	e of Facility Agent	Date and Time Received

PART I:	Generator	ROWLAND Trucki	no
ran j. i.	Address	100	- (394) 258/
(*	City/State	EUNICE N.M.	Telephone No.
ORIGINATION OF	WASTE:	•	
Operations Center	Meri	dian	RRC No. <u>00924</u>
Property Name	LANE (Well, T	A Pech Fank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, YARDS	, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	·	Oily Waste	Spill Clean-up & Debris
Orilled Solids		Plant Waste Water Produced Sand	Storm Water Run-off Used Containers
Drilled Pit Liquids Filter Elements	:	Produced Sand	Used Containers Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweeter	ning	Scale	Completion Solids
700Wi/dmd-			
and the second s	V	Sludge (Water)	Completion Liquids
(Tank Bottoms)	The waste describ	Sludge (Water) Sludge (Petroleum)	Other
(Tank Bottoms)	below. I certify th	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF to foregoing is true and correct to the best of recommendation.	Other Other R Part 261 and was consigned to the transporter name by knowledge.
(Tank Bottoms)	below. I certify th	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF	Completion Liquids Other R Part 261 and was consigned to the transporter name
(Tank Bottoms) CERTIFICATION:	Signature of	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF to foregoing is true and correct to the best of recommendation.	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment
(Tank Bottoms) CERTIFICATION:	Signature of	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF be foregoing is true and correct to the best of r	Completion Liquids Other FR Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment Il by Transporter)
(Tank Bottoms) CERTIFICATION:	Signature of Name	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF be foregoing is true and correct to the best of r	Completion Liquids Other TR Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter)
(Tank Bottoms) CERTIFICATION:	Signature of TRANSPOR Name Address	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF be foregoing is true and correct to the best of r	Completion Liquids Other FR Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment Il by Transporter)
(Tank Bottoms) CERTIFICATION:	Signature of Name	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF be foregoing is true and correct to the best of r	Completion Liquids Other TR Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter)
(Tank Bottoms) CERTIFICATION: PART II:	Signature of TRANSPOR Name Address City/State	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF be foregoing is true and correct to the best of r	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter) 5 7 Telephone No. Truck No.
(Tank Bottoms) CERTIFICATION: PART II:	Signature of TRANSPOF Name Address City/State	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF the foregoing is true and correct to the best of r f Generator's Authorized Agent RTER: (To be completed in full Tenny nets raste in quantity above was received by me for	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter) Telephone No. Truck No. r shipment to the destination below.
(Tank Bottoms) CERTIFICATION: PART II:	Signature of TRANSPOF Name Address City/State	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF the foregoing is true and correct to the best of reference of Generator's Authorized Agent RTER: (To be completed in full the property of the period of the peri	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter)
CERTIFICATION: PART II: CERTIFICATION:	Signature of TRANSPOF Name Address City/State	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF the foregoing is true and correct to the best of reference of Generator's Authorized Agent RTER: (To be completed in full to the period of the per	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter) Telephone No. Truck No. r shipment to the destination below.
CERTIFICATION: PART II: CERTIFICATION:	Signature of TRANSPOF Name Address City/State I certify that the w	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF the foregoing is true and correct to the best of reference for a full to the foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the following foregoing is true and correct to the best of reference for a full to the f	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter) Telephone No. Truck No. r shipment to the destination below. Date and Time Received
BS&W/Crude (Tank Bottoms) CERTIFICATION: PART II: PART III:	Signature of TRANSPOR Name Address City/State I certify that the way Signature	Sludge (Water) Sludge (Petroleum) bed above is not hazardous pursuant to 40CF the foregoing is true and correct to the best of reference of Generator's Authorized Agent RTER: (To be completed in full to the period of the per	Completion Liquids Other R Part 261 and was consigned to the transporter name my knowledge. Date and Time of Shipment If by Transporter) Telephone No. Truck No. r shipment to the destination below. Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Signature of Facility Agent

Date and Time Received

· · · · · · · · · · · · · · · · · · ·	NON-HAZA	RDOUS WASTE MANIFES	T/RUN TICKET
PART I:	Generator	MeridiAN Oil Crane you	
·	Address	CLANE THE	
	City/State		Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	Crow	e tax	RRC No
Operations Center			1110 No
Property Name	J.H. Shi	~K "B"	
	(Well, Ta	nk Battery, Plant, Facility)	
WASTE IDE	ENTIFICATION A	ND AMOUNT (BARRELS, YARDS, TO	NS, CU:FT., LBS., UNITS, ETC.)
Commercial/Site Wast	te	Oily Waste	Spill Clean-up & Debris
Drilled Solids	Y	Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids Filter Elements		Produced Sand Produced Water	Used Containers Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete		Scale	Completion Solids
BS&W/Crude (Tank Bottoms)		<pre> // Sludge (Water)</pre>	Completion Liquids Other
(Tame Bottomo)	*	Cladge (Fellolodin)	
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Pa foregoing is true and correct to the best of my kn Doundle Generator's Authorized Agent	rt 261 and was consigned to the transporter named owledge. 9-/8-8:30 Date and Time of Shipment
			Sub-unit time of origination
PART II:	TRANSPOR	TER: (To be completed in full by	Transporter)
	Name	Malco Truck	U 915-3664080
	Address	Malco Truckry	Telephone No.
	City/State	O desta fac	
er <u>er parter de la de</u>	n on the second again		Truck No.
CERTIFICATION:	I certify that the wa	ste in quantity above was received by me for ship	
	E. F. P	aundr.	9-18-95
	Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMATI	ON SITE:	
	Name	Controlled Recovery, Inc./Inland	Products
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
CERTIFICATION:	I certify that the way	ste described in Part was received by me via the	transporter described in Part II.
		HUU	91895 17mf
	Signatur	of Facility Agent	Date and Time Received

GOLDENROD COPY - Transnorter

PART I:	Generator Address City/State	MeridiAKI 1112 WHW829 HCR. 65 BOXS CPANCTX	8 (A) <u>563-0274</u>
		S. 71 N O 1 / N.	Telephone No.
ORIGINATION (•		
Operations Cent	er <u>M. dla 1</u>	vd tx.	RRC No. <u>00974</u>
Property Name	JF She (Wall,	Tank Battery, Plant, Facility)	
WASTEI	DENTIFICATION	AND AMOUNT (BARRELS, YARDS, TONS	CHEC LBS UNITS FTC)
		AND ARCON (DANNED), "ANDO," ONC	,00.11,1000,1011113,110.)
Commercial/Site Wa Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Swe BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION	below. I certify the	ibed above is not hazardous pursuant to 40CFR Part 26 he foregoing is true and correct to the best of my knowle of Generator's Authorized Agent	
PART II:	TRANSPO	RTER: (To be completed in full by Tr	ansporter)
,	Name	Tonny noTes	
•	Address City/State		Telephone No.
CERTIFICATION	I: I certify that the w	vaste in quantity above was received by me for shipmen	Truck No. It to the destination below. Date and Time Received
			- Carlo Gardon Carlo Car
PART III:	RECLAMA	TION SITE:	
. *	Name Address City/State	Controlled Recovery, Inc./Inland Pr P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION	•		
	I certify that the w	vaste described in Part I was received by me via the tran	nsporter described in Part II.
	Love Joseph	vaste described in Part I was received by me via the tran	nsporter described in Part II.

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

GOLDENROD COPY - Transporter

NON-HAZA	BDOUS V	VASTE MA	NIFEST	/RUN TI	CKET
Concretor	Mario	1.			

PART I:	Generator Address City/State	Merion ANT 1112 Haya 29 HCR L Crave Tx. 79 281	<u> </u>
ORIGINATION OF	WASTE:		
Operations Center	midla	vd Texas	RRC No. <u>605670</u>
Property Name	JWROD (Well, To	bi NS 19 12 ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS	, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Sité Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude, (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40Ci oforegoing is true and correct to the best of definition of the correct to the best of the best of the correct to the correc	FR Part 261 and was consigned to the transporter named my knowledge. Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in fu	II by Transporter)
	Name Address City/State		Telephone No
CERTIFICATION:	BCC	of Transporter's Agent	Truck No. or shipment to the destination below. \(\frac{\frac{1}{2} \frac{5}{2}}{2} \) Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./In P.O. Box 369 Hobbs, NM 88241	land Products
CERTIFICATION:	I certify that the wa	uste described in Part I was received by me	via the transporter described in Part II.
	Signatu	re of Facility Agent	Date and Time Received

	NON-HAZA	RDOUS WASTE	: MANIFEST/	RUN TICKET	· //
PART I:	Generator Address City/State	Crave 7	Oil resp	() Telephone No.
ORIGINATION OF	WASTE:			- Andrew	
Operations Center	_ C.TAU	e Tep		RRC	No. 00844
Property Name	*	ank Battery, Plant, Facility)	- Two		,
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRE	LS, YARDS, TON	S, CU.FT., LBS., U	NITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)	ening	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale 3/LSludge (Water) Sludge (Petroleum)		Spill Clean-up & Storm Water Ru Used Container Used Container Used Lube Oils Completion Soli Completion Liquid Other	in-offssds
CERTIFICATION:	below. I certify the	ped above is not hazardous predeforegoing is true and correct formations. Sometimes are supported to the correct formation of the correct formatio	t to the best of my know	261 and was consigned q	to the transporter named G-G-G- nd Time of Shipment
PART II:	TRANSPOR	RTER: (To be comp	leted in full by T	ransporter)	
	Name Address City/State	Malio			9/5 3444000 Telephone No.
CERTIFICATION:	I certify that the w	aste in quantity above was re-	ceived by me for shipmo	ent to the destination be	Truck No. low.
	Signature	e of Transporter's Agent		Date	and Time Received
PART III:	RECLAMAT	TION SITE:			
Y	Name Address City/State	Controlled Recover P.O. Box 369 Hobbs, NM 88241		Products	

WHITE ORIGINAL - CRI

Signature of Facility Agent

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

Date and Time Received

•	NON-HA	ARDOUS WASTE MANIFES 17	HON HICKET
PART I:	Generator	Meridian Oil	<u>'</u>
· · · · · · · · · · · · · · · · · · ·	Address	Crane TCHAS	· ()
	City/State		Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	CRAN	e Texas !! IV	RRC No. <u>00967</u>
Property Name	AA Ree	56	
•	(Well, T	ank Battery, Plant, Facility)	
		· 👧	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	<u> </u>	Oily Waste	Spill Clean-up & Debris
Orilled Solids		Plant Waste Water	Storm Water Run-off
Orilled Pit Liquids		Produced Sand	Used Containers
Filter Elements General Refuse		Produced Water Rinsate	Used Containers Used Lube Oils
H2S Scavengers/Sweete	nina	Scale	Completion Solids
BS&W/Crude	100		Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
	i		
CERTIFICATION:		ped above is not hazardous pursuant to 40CFR Part	
**	Lettiny th	e foregoing is true and correct to the best of my know	9-19-95'
The same of the sa	Signature of	Generator's Authorized Agent	Date and Time of Shipment
	Signature of	Generator & Adjusticad Agent	Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by	Transporte _r)
	Name *	Make Touching	915 3 \$64080
~	Address	The state of the s	Telephone No.
•	City/State	Odersa	
14. 14. 14. 14. 14. 14. 14. 14. 14. 14.	only, Caro		Truck No.
CERTIFICATION:	A	aste in quantity above was received by me for shipm	
	P. D	Dough	0-16-65
	Signature	of Transporter's Agent	9 - 19 - 15 Date and Time Received
PART III:	RECLAMAT	ION SITE:	!
Service Services Services	TEOLAWA	ION OTTE.	
	Name	Controlled Recovery: Inc./Inland I	<u>Products</u>
•	Address	P.O. Box 369	
	City/Ŝtate	Hobbs, NM 88241	
CERTIFICATION:	I certify that the w	aste described in Part, was received by me via the t	rensporter described in Part II
	10	1///	G1065 931
,	Sinna	re of Facility Agent	117() 120
	Signatu	un ou u acum Acadam	Date and Time Received

PART I:	Generator Address City/State	MeridiAN 1112 WHX. 829 HCR 65 BOXE CHANE TX	9 (915) <u>563 6274</u> Telephone No.
ORIGINATION OF	WASTĘ:		
Operations Center	midla	vd Tx.	RRC No. 00865
Property Name	Robbins (Well, 1	A Cank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, YARDS, TONS	, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	bed above is not hazardous pursuant to 40CFR Part 26 e foregoing is true and correct to the best of my knowled Lewis Generator's Authorized Agent	
PART II:	TRANSPOR Name Address City/State	RTER: (To be completed in full by Ti Rowland Trucking Pp. Rox 99 Euxice NM	ransporter) 505-394-258/ Telephone No. 57 Truck No.
CERTIFICATION:	Tonny	raste in quantity above was received by me for shipments of the shipments are shipments as a shipment of the sh	
PART III:	RECLAMAT	TION SITE:	
•	Name Address City/State	Controlled Recovery, Inc./Inland P P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION:	de	aste described in Part I was received by me via the tra ure of Facility Agent	nsporter described in Part II. 91995 Date and Time Received

7-95-150-4pt-bk25

. - CRI YELLOW COP

OPÝ - CRI PINK COPY - Ger

GOLDENROD COPY - Transporter

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET Generator MERIDIAN OIL Address CIANE TEX City/State Telephone No. **ORIGINATION OF WASTE:** Operations Center Crave Tex RRC No. 00864 **Property Name** WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Cléan-up & Debris Plant Waste Water Storm Water Run-off **Drilled Solids Drilled Pit Liquids** Produced Sand **Used Containers Produced Water** Filter Elements **Used Containers** General Refuse Rinsate Used Lube Oils H2S Scavengers/Sweetening Scale Completion Solids BS&W/Crude Sludge (Water) **Completion Liquids** (Tank Bottoms) Sludge (Petroleum) Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 9-20-95 Date and Time of Shipment Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) 915 3664080 Name **Address** Telephone No. City/State CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Date and Time Received PART III: **RECLAMATION SITE:** Controlled Recovery, Inc./Inland Products Name Address P.O. Box 369 City/State Hobbs, NM 88241

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Signature of Facility Agent

PINK COPY - Generator

I certify that the waste described in Part I was received by me via the transporter described in Part II.

Date and Time Received

CERTIFICATION:

id a	NON-HAZA	ARDOUS WASTE MANIFEST/I	RUN TICKET
PART I:	Generator Address City/State	MeridiAN 1112 W Hay329 HCR. ECSONO Crave TX	<u> 5g </u>
ORIGINATION OF	WASTE:	σ	
Operations Center	MIDLAN	J TX	RRC No. 00914
Property Name	TH 6he,	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below I certify the	ped above is not hazardous pursuant to 40CFR Part 20 e foregoing is true and correct to the best of my knowledge. Generator's Authorized Agent	
PART II:	TRANSPOR Name	RTER: (To be completed in full by To	ransporter)
•.	Address City/State	M.C. May 3	Telephone No.
CERTIFICATION:	ROC	aste in quantity above was received by me for shipmen	Truck No. Int to the destination below. Solve
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland P P.O. Box 369 Hobbs, NM 88241	roducts
CERTIFICATION:	I certify that the w	aste described in Part I was received by me via the tra	insporter described in Part II.

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

Date and Time Received

Signature of Facility Agent

6 -	INDIN-I IME	ANDOUS WASTE MARKIT LOTT	tolt i joith i
	0	200 2 1 1 1 1 1 1	
PARTI:	Generator	Meridian	
	Address	11/2 W Hux. 329 HCR 6 88855	2 (9x-) <u>563-027</u> 2
	City/State	Crave TX	Telephone No.
DRIGINATION OF		•	
Operations Center	Midle	IND TX	RRC No. <u>00865</u>
Property Name	Robbins	- Д	
ropony manie	(Well, 1	Fank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION /	AND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	e	Oily Waste	Spill Clean-up & Debris
Prilled Solids		Plant Waste Water	Storm Water Run-off
rilled Pit Liquids	· •	Produced Sand	Used Containers
ilter Elements		Produced Water	Used Containers
iner Elements ieneral Refuse		Rinsate	Used Lube Oils
	nina	Scale	
I2S Scavengers/Sweete	125		Completion Solids
S&W/Crude		Sludge (Water)	Completion Liquids
(Tank Bottoms)	, i	Sludge (Petroleum)	Other /
CERTIFICATION:		bed above is not hazardous pursuant to 40CFR Part 26	
	O · Oo O	e foregoing is true and correct to the best of my knowle	A A B C C C C C C C C C C
	1 ill &	leun	9-20-95
	Signature o	f Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by Tr	ansporter)
			505-314-2581
	Name		
	Address		Telephone No.
	City/State	EURICS N. M	<u> </u>
	*		Truck No.
ERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipmen	t to the destination below.
•	TORMY	MOTES	9-20-75
•	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMA	ΓΙΟΝ SITE:	
,	Name	Controlled Recovery, Inc./Inland Pr	oducte
			- Caucio
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
CERTIFICATION:	I certify that the w	este described in Part I was received by me via the tran	nsporter described in Part II.
		dod /	9-71-9-
	-	ure of Facility Agent ,	
	Signati	are or racinty Agent	Date and Time Received

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET PART I: Generator Address City/State Telephone No. **ORIGINATION OF WASTE:** RRC No. 00 967 **Operations Center Property Name** (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Plant Waste Water Storm Water Run-off **Drilled Solids Drilled Pit Liquids** Produced Sand Used Containers **Used Containers Produced Water** Filter Elements General Refuse Rinsate Used Lube Oils H2S Scavengers/Sweetening Completion Solids Scale Sludge (Water) Completion Liquids BS&W/Crude (Tank Bottoms) Sludge (Petroleum) Other **CERTIFICATION:** The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. 9-21-95 Date and Time of Shipment Signature of Generator's Authorized Agent PART II: TRANSPORTER: (To be completed in full by Transporter) Name 915 3664088 Address Telephone No. City/State Truck No. CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: **RECLAMATION SITE:** Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 **CERTIFICATION:** I certify that the waste described in Part I was received by me via the transporter described in Part II.

MITE ORIGINAL CRI YELLOW COPY CRI PINK COPY Generator COLORESCO

Date and Time Received

Signature of Facility Agent

	:		
10	NON-HAZA	ARDOUS WASTE MANIFEST	RUN TICKET
PART I	Generator	Meridian Oil	
3	Address		()
;	City/State	Cranl	Telephone No.
ORIGINATION OF	MASTE:		
ONIGINATION OF	WASIE.		4
Operations Center	Cro	ul	RRC No. 0089
Property Name	TH	Shirk	
r roporty rtains	(Well,	Fank Battery, Plant, Facility)	
			∤ .
WASTE IDE	NTIFICATION	AND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	3	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements		Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweeter	ning	Scale	Completion Solids
BS&W/Crude	110	Sludge (Water)	Completion Liquids
(Tank Bottoms)	:	Sludge (Petroleum)	Other
•	•		
···		12 1/2	
,	E.P.	e foregoing is true and correct to the best of my know Double Generator's Authorized Agent	yledge. 9-21-95 Date and Time of Shipment
	:		
PART II:	TRANSPOR	RTER: (To be completed in full by 1	Transporter)
•	ŧ		20198
	Name	maco bruchen	7 7/3 3
	Addreşs		Telephone No.
	City/State	Meses	4
	-15 -15 F	1、大大的一种的一个人,这个人们的一个	Truck No.
CERTIFICATION:	Logrification the	aste in quantity above was received by me for shipm	
	Coruny trial trie W	asio in qualitry above was received by me for shipm	ent to the destination delow.
	_ C . t	sende	
:	Signature	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TON SITE:	
	Name	Controlled Recovery, Inc./Inland I	<u>Products</u>
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
	, =	The same of the sa	
CERTIFICATION:	I cartify that the	Osto decembed in Rest Luna seasons to the seasons in the	
JEITH WATTON	T COLUIN UNAT THE MA	aste described in Part I was received by me via the tr	
	& Tal	su	9-21-95 9:00
	Signatu	re of Facility Agent	Date and Time Received

77 (1987)

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET PART I: Generator **Address** City/State Telephone No. **ORIGINATION OF WASTE:** RRC No. 00864 **Operations Center Property Name** WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Spill Clean-up & Debris Oily Waste **Drilled Solids** Plant Waste Water Storm Water Run-off **Drilled Pit Liquids** Produced Sand **Used Containers** Filter Elements **Produced Water Used Containers** General Refuse Rinsate Used Lube Oils H2S Scavengers/Sweetening Scale Completion Solids BS&W/Crude Sludge (Water) Completion Liquids (Tank Bottoms) Sludge (Petroleum) Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. Signature of Generator's Authorized Agent Date and Time of Shipment PART II: TRANSPORTER: (To be completed in full by Transporter) Malco Trucking 915 3664016 Name Address Telephone No. City/State Truck No. **CERTIFICATION:** I certify that the waste in guantify above was received by me for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: **RECLAMATION SITE:** Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369

Signature of Facility Agent Date and Time Received

I was received by me via the transporter described in Part II.

City/State

I certify that the waste described in

CERTIFICATION:

Hobbs, NM 88241

	NON-HAZA	RDOUS WASTE MANIF	EST/RUN TICKET
PARTI:	Generator Address City/State	Meridian Oil. Crone +co	()
ORIGINATION OF		2#	
Operations Center	_ Cron	C MYT	RRC No. 00844
Property Name	J.W.R	ObbiN C	1
Tropolty Hame		ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARD	S, TONS, CU;FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oilý Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION: PART II:	below. I certify the	of foregoing is true and correct to the best of Description Generator's Authorized Agent	9-21-95 Date and Time of Shipment
TARLII.	Name Address City/State	TER: (To be completed in fu	
CERTIFICATION:	E. P. 1	ste in quantity above was received by me to second of Transporter's Agent	Truck No. for shipment to the destination below. Date and Time Received
PART III:	RECLAMAT		
	Name Address City/State	Controlled Recovery, Inc./Ir P.O. Box 369 Hobbs, NM 88241	ıland Products
CERTIFICATION:		ste described in Part I was received by me	via the transporter described in Part II. 9-21-93 6:10 PM
	Signatur Signatur	e of Facility Agent	Date and Time Received

Date and Time Received

1.	MOIN-LIME	ANDOUS WAS IE WANT ESTA	
		m distribution	
PART I:	Generator	MOFICINK	
	Address	1112 W HWY 329 HCA-15 60X 58	_ (PG) <u>SES AX</u>
•	City/State	Crane Texas	Telephone No.
ORIGINATION OF	WASTE:	•	
	1/		ranger (n. 1945). 1948 - Britan Berlin, de Britan (n. 1945).
Operations Center	MIN & IA	Xd / X	RRC No 25 670
Property Name	Jw. Ro	bling A+B	
	(Well,	Tank Battery, Plant, Facility)	
r 1995 to the water to the series of the ser	ा विकास स्थापन स्थापन । जन्म		·····································
WASTE IDE	NTIFICATION	AND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
	-		
Commercial/Site Wast	e	Oily Waste	Spill Clean-up & Debris
Drilled Solids	4 \$ <u> </u>	Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements	·	Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete	ning	Scale	Completion Solids
BS&W/Crude	177	Sludge (Water)	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
			•
	<u> </u>		
	Signature o	Blencard Generator's Authorized Agent	9-21-95 6345 A Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed in full by Tra	anenartar)
I AITT III	THAINOI OI	TIET. (To be completed in full by 118	ansporter)
	Name ¹	Ray Love Track	801/21-21
		Rowland Iruckey	077-2581
	Address	8049	Telephone No.
	City/State	EUNICO NAN.	
	8 ⁴		Truck No.
CERTIFICATION:	I certify that the w	raste in quantity above was received by me for shipment	t to the destination below.
	•		
	Signatur	e of Transporter's Agent	Data and Time Decelor
	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	FION SITE:	
	Name	Controlled Recovery Inc /Inland Br	oduote
		Controlled Recovery, Inc./Inland Pr	<u>oducis</u>
	Address	P.O. Box 369	
	City/State	Hobbs, NM 88241	
		1 0	
CERTIFICATION:	I certify that the y	aste described in Part I was received by me via the tran	sporter described in Part II.
	1/4	HCCL	92195 //15/
	Signat	ure of Facility Agent	Date and Time Received
	1/		Sale and tille tiecetage

•	NON-HAZA	ARDOUS WASTE MANIFEST/R	UN TICKET
PART.I:	Generator Address City/State	Merldind/ 1112 w Aw 329 Herls BOXER Crave TX	(9 <i> </i> ≤) <u>ろんぞ . のカ. 7.5</u> Telephone No.
ORIGINATION OF	WASTĘ:	,	
Operations Center	midto	X T X	RRC No.05670
Property Name	Jw Roll (Well,	Tank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION	AND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	bed above is not hazardous pursuant to 40CFR Part 261 ne foregoing is true and correct to the best of my knowled 2000 of Generator's Authorized Agent	
PART II:	TRANSPOR	RTER: (To be completed in full by Tra	ansporter)
CERTIFICATION:	BIL	Rowlax/d Trucking Sox 99 Euxice HM vaste in quantity above was received by me for shipment	$ \frac{g_{4}-3s_{1}}{\text{Telephone No.}} $ Truck No. to the destination below. $ \frac{g_{4}-3s_{1}}{y_{2}} $
	Signatur	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland Pro P.O. Box 369 Hobbs, NM 88241	oducts
CERTIFICATION:	I certify that the w	raste described in Part I was received by me via the trans ule of Facility Agent	sporter described in Part II. 92/95 /// Date and Time Received
	WHITE ORIGINAL - CRI	YELLOW COPY - CRI PINK COPY - Generator GOLDENR	OD COPY - Transporter

P.	NON-HAZA	ARDOUS WASTE MANIFEST/F	RUN TICKET
ART I:	Generator Address City/State	Meridian/ 1112 w.Hwy. 829 HCR-LJ Boxs	「タ」(タル) <u>の使む・の名物</u> Telephone No.
ORIGINATION OF	WASTĘ:	ø	
Operations Center	Midla	Nd TX	RRC No. <u>90970</u>
Property Name		ank Battery, Plant, Facility).	>
	i		
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, YARDS, TONS	, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Orilled Solids Orilled Pit Liquids Filter Elements General Refuse 12S Scavengers/Sweete 3S&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
DEDITIEIO ATIONI.			
CERTIFICATION:	below. I certify the	ped above is not hazardous pursuant to 40CFR Part 26 e foregoing is true and correct to the best of my knowled for my	
PART II:	TRANSPOR	RTER: (To be completed in full by Tr	ansporter)
	Name Address City/State	Rowland Trucking POROX 99 EUNICE NM-88231	3942591 Telephone No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipmer	Truck No.
	lamay Signatur	a of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TION SITE:	1
	Name	Controlled Recovery, Inc./Inland Pr	roducts
	Address City/State	P.O. Box 369 Hobbs, NM 88241	
DERTIFICATION:	I certify that the w	aste described in Part I was received by me via the tra	nsporter described in Part II.

Date and Time Received

Signature of Facility Agent

WHITE ORIGINAL - CRI

	NON-HAZARDOUS WASTE	MANIFEST/RUN TICKET
PART I:	Generator Meridio	
rani ii	Address	
	City/State Crave	Telephone No.
ODIOINATION O		
ORIGINATION O	F WASTE:	
Operations Cente	r Crone	RRC No. <u>0089</u> /
Property Name	J-H SLINK	
	(Well, Tank Battery, Plant, Facility)	
at / wasteld	ENTIFICATION AND AMOUNT (BARREL	S, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wa	ste	Spill Clean-up & Debris
Drilled Solids	Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids	Produced Sand	Used Containers
Filter Elements	Produced Water	Used Containers
General Refuse	Rinsate	Used Lube Oils
H2S Scavengers/Swee BS&W/Crude	tening Scale Sludge (Water)	Completion Solids Completion Liquids
(Tank Bottoms)	Sludge (Water) Sludge (Petroleum)	Other
(Talik pottoriis)	Cidage (i ettologiny	Outer
	Signature of Generator's Authorized Agent	9-21-95 Date and Time of Shipment
PART II:	TRANSPORTER: (To be comple	eted in full by Transporter)
rani ii.	Transi ortigit. (To be comple	sted in full by Transporter)
	Name Melco	915 36640
•	Address	Telephone No.
	City/State Odissa	14
1.	The state of the s	Truck No.
CERTIFICATION	I certify that the waste in quantity above was rece	lived by me for shipment to the destination below.
	$\mathcal{E} \wedge \mathcal{E}$	The state of the s
	C. P. Pollude	<u> </u>
	Signature of Transporter's Agent	Date and Time Received
PART III:	DECLAMATION SITE.	•
CADI III.	RECLAMATION SITE:	•
	Name <u>Controlled Recover</u>	y, Inc./Inland Products
	Address P.O. Box 369	
	City/State Hobbs, NM 88241	
CERTIFICATION	Londification the uncertainty and in Body	
	I certify that the waste described in Part I was rec	eived by me via the transporter described in Part II
	Signature of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET PART I: Generator Address City/State Telephone No. **ORIGINATION OF WASTE:** RRC No. 00987 **Operations Center Property Name** (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Spill Clean-up & Debris Commercial/Site Waste Oily Waste, Storm Water Run-off **Drilled Solids** Plant Waste Water **Drilled Pit Liquids** Produced Sand **Used Containers Used Containers** Filter Elements Produced Water Used Lube Oils General Refuse Rinsate

H2S Scavengers/Sweete	ning	. Scale	Completion Soil	as	
BS&W/Crude	1.00	Sludge (Water)	Completion Liquid	ls	
(Tank Bottoms)	•	Sludge (Petroleum)	Other		
	•				
	·				
•					
CERTIFICATION:		bed above is not hazardous pursuant to 40		to the transporter named	
	below. I certify the	e foregoing is true and correct to the best			
	E.P.	Hound	9-2	23-95— nd Time of Shipment	
	Signature o	f Generator's Authorized Agent	Date ar	nd Time of Shipment	
	<u> </u>			·	
PART II:	TDANCDO	OTED: (To be completed in	full his Transporter	,	
CADI II.	INANSPOR	RTER: (To be completed in	ruii by Transporter)		
		710.		₹***	
	Name	MalioTime	my -		
	Address			Telephone No.	
:	City/State			150	
	4. 3	The second of the second	The second second	Truck No.	
CERTIFICATION:	I certify that the w	aste in quantity above was received by m	e for shipment to the destination be	low.	
		Da de			
	Signatur	e of Transporter's Agent	Date	and Time Received	
				and fillio freceived	
	į				
PART III:	RECLAMATION SITE:				
	3				
	Name	Controlled Recovery, Inc./	Inland Products		
	Address	P.O. Box 369			
	City/State	Hobbs, NM 88241	· · · · · · · · · · · · · · · · · · ·		

I certify that the waste described in Part I was received by me via the transporter described in Part II.

WHITE ORIGINAL CRE YELLOW CORY CRE PINK CORY CO.

Signature of Facility Agent

rak

CERTIFICATION:

Date and Time Received

4-24 95

PART I:	Generator Address City/State	Mersidlum C	20	()
ORIGINATION OF	WASTE:	ø		
Operations Center	Cron	e T		RRC No. 00891
Property Name	J.H.S.C (Well, Ta	ink Battery, Plant, Facility)		
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YAR	DS, TONS, CU.FT.,	LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Produced Sand Produced Water Rinsate Scale Sludge (Water)	Storm V Used C Used C Used L Used L Comple	ean-up & Debris Vater Run-off ontainers containers ube Oils etion Solids ion Liquids
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 4 foregoing is true and correct to the best of the best of the desired agent.		consigned to the transporter named 9-24-95 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in	full by Transport	er)
	Name Address City/State	Maleo Tree	elks.	715 3 Gla 4090 Telephone No.
CERTIFICATION:	E.D.	ste in quantity above was received by moccoulc	e for shipment to the des	
PART III:	RECLAMAT	ON SITE:		
	Name Address City/State	Controlled Recovery, Inc. P.O. Box 369 Hobbs, NM 88241	/Inland Products	
CERTIFICATION:	from the	ste described in Part I was received by a	•	Scribed in Part II. Con Mon GE 112 25 Date and Time Received

PART I:	Generator Address City/State	Meridian/ Illhu Hux 829 Boxs Crane TX	8 (915) <u>5 C8 - 02 74</u> Telephone No.
ORIGINATION OF	WASTĘ:		
Operations Center	m.d/	ord Tx	RRC No. 40926
Property Name	JF Shin	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)	*	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 26 of foregoing is true and correct to the best of my knowled when the best of the best o	
PART II:	TRANSPOR	RTER: (To be completed in full by Tra	ansporter)
	Name Address City/State	Bowland Trucking Box 99 EUNICE NN 8828	7941258/ Telephone No.
CERTIFICATION:		aste in quantity above was received by me for shipment of e 5 of Transporter's Agent	Truck No. I to the destination below. 9-27-95 Date and Time Received
PART III:	RECLÄMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland Pr P.O. Box 369 Hobbs, NM 88241	oducts
CERTIFICATION:	I certify that the wa	aste described in Part I was received by me via the tran	sporter described in Part II.
	Signatu	re of Facility Agent	9-33-45- 11:33- Date and Time Received

	NON-HAZA	ARDOUS WASTE MANIFEST	RUN TICKET
PART :	Generator Address City/State	Metilian 1112 when 329 HCR- 65 BO	X <u>58</u> (9/5) <u>663 × 027 A</u> Telephone No.
ORIGINATION OF	WASTE:		
Operations Center	mid	LAND TX	RRC No. <u>00 848</u>
Property Name	5 M72	Tank Battery, Plant, Facility)	
and the same of th	and the second second second		ragina di Grandia di Sentra di Paranta di Sentra d Sentra di Sentra di S
WASTE IDE	NTIFICATION /	AND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
PART II:	Signature of	ie foregoing is true and correct to the best of my know Generator's Authorized Agent RTER: (To be completed in full by 1	9-12-95-7-60 Date and Time of Shipment
	Name	Rowland Trucking	
	Address City/State	EUNICE N/M	Telephone No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipme	Truck No. ent to the destination below.
MACCO AND ADDRESS OF THE PARTY	Jon my Signature	e of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	TION SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland F P.O. Box 369 Hobbs, NM 88241	Products
CERTIFICATION:	1 Xa	aste described in Part I was received by me via the tr	ansporter described in Part II. 9-22-95 Date and Time Received

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Trans

PART I:	Generator Address City/State	M3)eridia N 1112 W- Hwy 329-HCR-65 BOXO	(9/5) <u>\$530274</u> Telephone No.
ORIGINATION OF	WASTE:	•	
Operations Center		•	RRC No. <u>00976</u>
Property Name	JF Shir (Well, Te	ank Battery, Plant, Facility)	
WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	CUET LBS UNITS ETC \
WASIL IDE	MINICALIOITA	no amount (banners, sance, sone	, , , , , , , , , , , , , , , , , , ,
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements		Oily Waste Plant Waste Water Produced Sand Produced Water	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers
General Refuse H2S Scavengers/Sweeter BS&W/Crude	ning	Rinsate	Used Lube Oils Completion Solids Completion Liquids
(Tank Bottoms)	- No. 1005)	Sludge (Petroleum)	Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 26 foregoing is true and correct to the best of my knowled with t	•
PART II:	TRANSPOR	TER: (To be completed in full by Tr	ransporter)
	Name Address City/State	ROWLAND Trucking FOX 99 EVNICE NM	394 258 / Telephone No.
CERTIFICATION:	Sotte	ste in quantity above was received by me for shipmer	Truck No. Truck No. 1 to the destination below. 9-22-95 Date and Time Received
PART III:	RECLAMAT Name Address City/State	ION SITE: <u>Controlled Recovery, Inc./Inland PiP.O. Box 369</u> Hobbs, NM 88241	roducts
CERTIFICATION:	I certify that the wa	iste described in Part I was received by me via the tra	nsporter described in Part II. Date and Time Received

	NON-HAZA	RDOUS WASTE MA	NIFEST/RUN	IICKET
PART I:	Generator Address City/State	MeridiAN 1112 WHWY 329 HCR- CraveTX	65 80X 59	(タ(が) <u>3 仏み ク2 フザ</u> Telephone No.
ORIGINATION OF	WASTE:		· · · · · · · · · · · · · · · · · · ·	
Operations Center		and TX	<u>.</u>	RRC No. <u>00 F98</u>
Property Name	ゴF 人A (Well, T	ank Battery, Plant, Facility)	<u>-</u>	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, Y	ARDS, TONS, CU.FT	, LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Storm Used Used Used Comp	Clean-up & Debris Nater Run-off Containers Containers Lube Oils Detion Solids Letion Liquids
•				
CERTIFICATION:	below. I certify the	ped above is not hazardous pursuant e foregoing is true and correct to the function Generator's Authorized Agent		as consigned to the transporter named 4.27.95 7:00 827 Date and Time of Shipment
PART II:	TRANSPOR	RTER: (To be completed	in full by Transpo	orter)
	Name Address City/State	ROWLAND TH BOX 99 EUNICE N M	cucking	394.2581 Telephone No. 42 Truck No.
CERTIFICATION:	I certify that the w	aste in quantity above was received I	by me for shipment to the d	. *
	R Signature	e of Transporter's Agent		Date and Time Received
PART III:	RECLAMAT	TION SITE:		
	Name Address City/State	Controlled Recovery, In P.O. Box 369 Hobbs, NM 88241	nc./Inland Product	<u>s</u> - -
CERTIFICATION:		aste described in Part I was received	by me via the transporter	described in Part II. 9-22-91-11:159
		ure of Facility Agent		Date and Time Received

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transport

Generator

PART I:

	Address City/State	Crone TY	<u> </u>	_ () _	Telephone No.
ORIGINATION OF	WASTE:	·	***	•	
Operations Center	Cron	e to	17.1	RRC No.	00 789
Property Name	T.F. LAN	e D nk Battery, Plant, Facility)			
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS	, YARDS, TONS,	CU.FT., LBS., UNITS	S, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)		Spill Clean-up & Del Storm Water Run-of Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other	f
CERTIFICATION:	below. I certify the	ed above is not hazardous pursu foregoing is true and correct to the Complete Senerator's Authorized Agent		ige.	transporter named - 95 ne of Shipment
PART II:	TRANSPOR	TER: (To be complet	ed in full by T	ansporter)	
j	Name Address City/State	Malio 7. Odoseu	recking		elephone No.
CERTIFICATION:	C. P.	ste in quantity above was received to the state of Transporter's Agent	ed by me for shipment	9-25	Truck No.
PART III:	RECLAMATI	ON SITE:			
	Name Address City/State	Controlled Recovery P.O. Box 369 Hobbs, NM 88241	Inc./Inland Pro	oducts	
CERTIFICATION:	Just Litt	ste described in Part I was recei વ્યુવ્ e of Facility Agent	ved by me via the tran	9-21-55	I. ノン;って Fime Received

PART I:	Generator Address City/State	Minden Oil Crave TX	()
ORIGINATION OF		Truck It	
Operations Center	Cran	e_TX	RRC No. <u>0 0923</u>
Property Name	J. H. Shi (Well, Tr	enk Battery, Plant, Facility)	
WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, T	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Plant Waste Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR of foregoing is true and correct to the best of my Generator's Authorized Agent	Part 261 and was consigned to the transporter named knowledge. 9-25-95 Date and Time of Shipment
PART II:	•	RTER: (To be completed in full to	y Transporter)
CERTIFICATION:	E. F	aste in quantity above was received by me for si	Telephone No. Truck No. Truck No. Date and Time Received
PART III:	RECLAMAT Name Address	ION SITE: <u>Controlled Recovery, Inc./Inlar</u> P.O. Box 369	nd Products
CERTIFICATION:	City/State	Hobbs, NM 88241 aste described in Part I was received by me via	.
	— Vecas Signatu	re of Facility Agent	Date and Time Received

PART I:	Generator Address	mendion Oil	
	City/State	Crove	Telephone No.
ORIGINATION OF	WASTE:	•	
Operations Center	Crone	<u> </u>	RRC No. 0089/
Property Name	J.H. Sh.	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS	, TONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
PART II:	below. I certify the	ed above is not hazardous pursuant to 40GF of oregoing is true and correct to the best of	Date and Time of Shipment
CERTIFICATION:	Name Address City/State	TER: (To be completed in further than the state of the completed in further than the completed in further than the complete of	9/5 3/66 4/088 Telephone No. 14
	Signature	of Transporter's Agent	Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name Address City/State	Controlled Recovery, Inc./In P.O. Box 369 Hobbs, NM 88241	land Products
CERTIFICATION:	The surf	nste described in Part I was received by me http://www.received.com/r	via the transporter described in Part II. 9-21-55 Date and Time Received

PART I:	Generator Address // City/State	METICIAN DIL 112 W. Huy. 329 HCR 65 CRANE, TX 79781	Box 58 (915) 563-0274 Telephone No.
ORIGINATION OF	WASTĘ:	ø •	
Operations Center Property Name	MidlANd	, Tex.	RRC No. 00888
Property Name	J.F. LANE	(L; ++/c)	
r version in the second	A TANK	in Sunoty, Finance, Formatty,	(4
WASTE IDE	NTIFICATION AN	ND AMOUNT (BARRELS, YARDS, T	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	d above is not hazardous pursuant to 40CFR P foregoing is true and correct to the best of my k Lalkur Generator's Authorized Agent	Part 261 and was consigned to the transporter named knowledge. 19-25-95- Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full b	y Transporter)
	Name Address City/State	Rowland Trucking P.O. Box 99 Eunice N.M. 88231	505 - 394 - 2581 Telephone No.
CERTIFICATION:		ste in quantity above was received by me for sh	Truck No. ipment to the destination below. $9-25-95$
	Signature of	riaTES of Transporter's Agent	Date and Time Received
PÅRT III:	RECLAMATI	ON SITE:	· .
	Name Address City/State	Controlled Recovery, Inc./Inlan P.O. Box 369 Hobbs, NM 88241	d Products
CERTIFICATION:	I certify that the was	ste described in Part I was received by me via t	he transporter described in Part II.
	hapigizaar	Facility Agent	9-25-45 Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

GOLDENROD COPY - Transporter

Address City/State Crant TX ORIGINATION OF WASTE: Operations Center Crant TX RRC No. OC 879 Property Name T.F. LAND D (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETG.) Commercial/Site Waste Oily Waste Oily Waste Spill Clean-up & Debris Drilled Pil Liquids Produced Water Storm Waster Run-off Pilter Elements Produced Water Used Containers Filter Elements Produced Water Used Containers General Refuse Rinsate Used Lube Oils General Refuse Risate Used Lube Oils General Refuse Risate Used Lube Oils General Refuse Risate Used Lube Oils General Refuse Studge (Petroleum) Other CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and, was consigned to the transporter named below. Lorerity to brogoging is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and, was consigned to the transporter named below. Lorerity to brogoging is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and, was consigned to the transporter named below. Lorerity to brogoging is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and, was consigned to the transporter named below. Lorerity to brogoging is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and was consigned to the transporter named below. Lorerity to brogoging is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 400FR Pat 251 and was consigned to the transporter named below. Lorerity the described above is not hazardous pursuant to 400FR Pat 251 and was consigned to the transporter of the transporter named below. Lorerity the described above. Lorerity above was focelwed by me, for shipment to th	PART I:	Generator	maridian	Ol	
ORIGINATION OF WASTE: Operations Center Crow TX RRC No. 00879 Property Name I.F. Land D (West, Tank Bettery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT, LBS, UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Storm Waste Run-off Plant Waste Waste Storm Waste Run-off Plant Waste Waste Produced Sand Used Containers Filter Elements Produced Water Used Containers General Refuse Rinsate Completion Solids Completion Solids Sociale Scale Scale Scale Scale Sudge (Water) Filter Elements Siludge (Petroleum) Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Patt 261 and was consigned to the transporter named below. Learly the foregoing is true and correct to the best of my knowledge. CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Patt 261 and was consigned to the transporter named below. Learly the foregoing is true and correct to the best of my knowledge. CERTIFICATION: TRANSPORTER: (To be completed in full by Transporter) Name Address City/State Telephone No. City/State CERTIFICATION: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 83241 CERTIFICATION: Learly that the waste described in Part I was received by me via the transporter described in Part II.			Crone	7X	Telephone No
Property Name T. F. LANC D (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste	ORIGINATION OF			o	
Waste IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.) Commercial/Site Waste Oily Waste Spill Clean-up & Debris Plant Waste Water Storm Water Run-off Plant Waste Water Storm Water Run-off Orilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers Used Lube Oils Generial Refuse Finisate Used Lube Oils Res Savengers/Sweetening Scale Completion Solids Completion Solids (Mater) Completion Solids	Operations Center	Crone	_ TX	 :	RRC No. 00889
Commercial/Site Waste Drilled Solids Plant Waste Water Drilled Pit Liquids Producep Sand Used Containers Filter Elements Generial Refuse Rinsate Pass Scavengers/Sweetening Scale Pass Scavengers/Sweetening Scale Refuse Rinsate Rinsate Rinsate Reserved Rese	Property Name			· ·	
Drilled Solids Plant Waste Water Drilled Pit Liquids Produced Sand Used Containers Filter Elements Produced Water Used Containers Used Containers Produced Water Used Lube Oils Used Lube Oils Used Lube Oils Used Containers Used Lube Oils Used Completion Solids Completion Solids Completion Solids Completion Solids Completion Liquids Other CERTIFICATION: The waste described above is not hazardous pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of my knowledge. PART II: TRANSPORTER: (To be completed in full by Transporter) Name Address Oity/State Olasse Truck No. GERTIFICATION: In certify that the weste in quantity above was received by me, for shipment to the destination below. CERTIFICATION: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	WASTE IDE	NTIFICATION AN	ID AMOUNT (BARRE	LS, YARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude		Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water)		Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids
Name Address City/State Oclass Telephone No. Truck No. GERTIFICATION: Incertify that the waste in quantity above was received by me, for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	CERTIFICATION:	below. I certify the t	foregoing is true and correct	to the best of my knowle	dge.
Name Address City/State Oclass Telephone No. Truck No. GERTIFICATION: Incertify that the waste in quantity above was received by me, for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	DADTIL	TDANCDOD	FED. (To be seen	lakadia fallika Tu	
Address City/State City/State	PARTII:	IHAMSPORT	IEH: (To be comp	leted in full by Tr	ansporter)
City/State City/State City/State City/State City/State City/State Certify that the wasfe in quantity above was received by me, for shipment to the destination below. Signature of Transporter's Agent Date and Time Received PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				Trucky	Talanhana Ma
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	(y		Oclasse		
PART III: RECLAMATION SITE: Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	CERTIFICATION	Yan and a second			
Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	GENTIFICATION:	E.P.F.	send	ceived by me _i for shipmer 	
Address P.O. Box 369 City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	PART III:	RECLAMATION	ON SITE:		Neps T
City/State Hobbs, NM 88241 CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.				ery, Inc./Inland P	roducts
CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.	•			<u> </u>	
Jose 11 2 7:49		Oity/Olale	1 10005, 14W 0024 I	· · · · · · · · · · · · · · · · · · ·	
Signature of Facility Agent Date and Time Received	CERTIFICATION:	certify that the was	ste described in Part I was re	eceived by me via the tra	nsporter described in Part II.
Date and Time Necessary		Signature	of Facility Agent		Date and Time Received

9-95-100 -4pt-bk25

WHITE ORIGINAL - CRI YELLOW COPY - CRI

PINK COPY - Generator GOLDENROD COPY - Transporter

PART I:	Generator	Meridian Dil	
	Address City/State	CRANE, TX. 79731	R 65 Box 58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF			
Operations Center	Midland	, <i>T</i> ×	RRC No. 06485
Property Name		4 - BATTCRY nk Battery, Plant, Facility)	•
WASTE IDE	NTIFICATION A	ND AMOUNT (BÄRRELS, YARDS, TO	NS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	Steve D.	od above is not hazardous pursuant to 40CFR Par foregoing is true and correct to the best of my kn Labba Generator's Authorized Agent	out 261 and was consigned to the transporter named nowledge. 9-25-95-0730 Date and Time of Shipment
PART II:	TRANSPOR	TER: (To be completed in full by	Transporter)
	Name Address City/State	Rowland Trucking (P.O. Box 99 1 EUNICE N.M. 8823	Telephone No.
CERTIFICATION:	ROD	ste in quantity above was received by me for ship of Transporter's Agent	oment to the destination below. 9-25-95 Date and Time Received
PART III:	RECLAMATI	ON SITE:	
	Name Address City/State	Controlled Recovery, Inc./Inland P.O. Box 369 Hobbs, NM 88241	I Products
CERTIFICATION:	the raul	ste described in Part I was received by me via the of Facility Agent	e transporter described in Part II. S-25-75-12.36 Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generator

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET MERIDIAN Oil PART I: Generator 1112 W. HWY 329 HCR 65 BOX 58 Address (915) 563-0274 City/State CRANE Telephone No. **ORIGINATION OF WASTE:** Operations Center Midland, TX RRC No. 06485 REES'E 16 - BATTETY **Property Name** (Well, Tank Battery, Plant, Facility) WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)		Spill Clean-up & D Storm Water Run- Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other	off
		 			
CERTIFICATION:		ed above is not hazardous pursu foregoing is true and correct to			the transporter named
	Signature of	Generator's Authorized Agent		9-25+95 Date and	5 - 0730 Time of Shipment
PARŢ II:	TRANSPOR	TER: (To be comple	ted in full by Tra	ansporter)	
· · · · · · · · · · · · · · · · · · ·	Name Address City/State	Rowland TRU P.O. Boy 99 EUNICE N.M			5-394-258/ Telephone No. 57 Truck No.
CERTIFICATION:	_	aste in quantity above was received	ved by me for shipmen	_	
	Signature	of Transporter's Agent	- .	9-25-95 Date and	d Time Received
PART III:	RECLAMAT	ION SITE:			
	Name Address City/State	Controlled Recovery P.O. Box 369 Hobbs, NM 88241	/, Inc./Inland Pr	oducts	and the second s
CERTIFICATION:	I certify that the wa	aste described in Part I was rece	ived by me via the tran	nsporter described in Par	rt II.
	Signatu	re of Facility Agent	_	9-15-9 Date and	5 / 2:30 d Time Received

PART I:	Generator	murdia Oil	
1	Address	A	
	-Gity/State	The state of the s	Telephone No.
ORIGINATION OF	WASTE:		, <u> </u>
	÷	10007	·
Operations Center	Crane		RRC No. <u>00889</u>
Property Name	# 4 1	LANG D	
Property Name		ank Battery, Plant, Facility)	
	(vven, r	ank battery, Flant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TON	S, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste	e i	Oily Waste	Spill Clean-up & Debris
Drilled Solids		Plant Waste Water	Storm Water Run-off
Drilled Pit Liquids		Produced Sand	Used Containers
Filter Elements	<u> </u>	Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete	ning	Scale	Completion Solids
BS&W/Crude	100	Sludge (Water)	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
		,	w ·
		·	
CERTIFICATION:	The waste describ	ed above is not hazardous pursuant to 40CFR Part	261 and was consigned to the transporter named
•	below, I certify the	foregoing is true and correct to the best of my know	vledge.
	5 D D	no chapter	9-25-95
	Signature of	Generator's Authorized Agent	Date and Time of Shipment
		gen.	
PART II:	TRANSPOR	RTER: (To be completed in full by ${\mathsf T}$	
	*		2664010
	Name	Malco Trucking	915-35-105
•	Address		Telephone No.
	City/State	Odian	14
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Truck No.
CERTIFICATION:	j Lagatify thật tha vự		
CERTIFICATION.	1 Ceruly triat trie wa	aste in quantity above was received by me for shipm	ent to the destination below.
	-ρ.	Pourdi	
	Signature	of Transporter's Agent	Date and Time Received
			
DADT III.	4		
PART III:	RECLAMAT	ION SITE:	
PART III:	RECLAMAT	TION SITE:	
PART III:	:		Producte
PART III:	: Name : -	Controlled Recovery, Inc./Inland I	Products
PART III:	Name Address	Controlled Recovery, inc./inland I P.O. Box 369	<u>Products</u>
PART III:	: Name : -	Controlled Recovery, Inc./Inland I	<u>Products</u>
e e e e	Name Address City/State	Controlled Recovery, Inc./Inland I P.O. Box 369 Hobbs, NM 88241	
CERTIFICATION:	Name Address City/State	Controlled Recovery, inc./inland I P.O. Box 369	
e e e e	Name Address City/State	Controlled Recovery, Inc./Inland I P.O. Box 369 Hobbs, NM 88241	

* .	NON-HAZA	RDOUS WASTE	/ANIFEST/R	UN TICKET	
PART I:	Generator	Meridian	, rel		
	Address			()	
	City/State	hove T	<i>L</i>	Telep	hone No.
ORIGINATION OF	WASTE:	de se			
Operations Center	Cron	e TX	<i>•</i>	RRC No. 💇	248
Property Name	C.L.Ro	ank Battery, Plant, Facility)			
·	*			Anne.	·
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS	, YARDS, TONS,	CU.FT., LBS., UNITS, ET	C.)
Commercial/Site Waste	•	Oily Waste		Spill Clean-up & Debris	·
Drilled Solids	<u> </u>	name in the contract of the co		Storm Water Run-off	
Drilled Pit Liquids		Produced Sand		Used Containers	
Filter Elements		Produced Water		Used Containers	· · · · · · · · · · · · · · · · · · ·
General Refuse		Rinsate		Used Lube Oils	 -
H2S Scavengers/Sweeter	100	Scale		Completion Solids	
BS&W/Crude (Tank Bottoms)	700	Sludge (Water) Sludge (Petroleum)		Completion Liquids Other	•
(Tank Bottoms)		Sludge (Felloledill)		Other	· · · · · · · · · · · · · · · · · · ·
	\mathcal{E}	e foregoing is true and correct to		Date and Time of S	Shipment
PART II:	TRANSPOR	RTER: (To be completed	ted in full by Tra	ansporter)	•
	Name	Maleo Ti	rucky		
	Address		0	Telephy	ne No.
	City/State	(Hesso	11		
<u> </u>	•	· · · · · · ·		Truc	k No.
CERTIFICATION:	. I certify that the w	aste in quantity above was received	red by me for shipment	to the destination below.	, <i>ii</i>
	Signature	e of Transporter's Agent	- ,	Date and Time R	eceived
PART III:	RECLAMAT	TION SITE:			
				·n.	•
	Name	Controlled Recovery	<u>, Inc./Inland Pr</u>	<u>oducts</u>	
	Address	P.O. Box 369			
	City/State	Hobbs, NM 88241	<u> </u>		
CERTIFICATION:	I certify that the w	raste described in Part I was rece	ived by me via the tran	sporter described in Part II.	¥
	1		1	97/.90	- 31/1
	- 20.	ure of Facility Agent	-	Date and Time F	2./0
	THOUGH	are to county Athenn		Liota and Tima S	aranan

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

PART I:	Generator Meridian Oil	
	Address 1112 W. Huy 329 HCR 65 Box 58 City/State CRAVE TEX 79731-	(915) <u>563-021</u> 4
ODIONATION OF		Telephone No.
ORIGINATION OF		en e
Operations Center	-Midland Tel	RRC, No. 06485
Property Name	REESE-16-BITY.	The state of the s
٠.	(Well, Tank Battery, Plant, Facility)	
WASTE IDE	ENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.	FT., LBS., UNITS, ETC.)
Commercial/Site Wast	te Oily Waste Spil	l Clean-up & Debris
Drilled Solids		rm Water Run-off
Drilled Pit Liquids		ed Containers
Filter Elements		ed Containers
General Refuse		d Lube Oils
H2S Scavengers/Sweete BS&W/Crude		npletion Solids
(Tank Bottoms)	<u>2.5 8B以</u> Sludge (Water) Com : Sludge (Petroleum) Oth	npletion Liquids
(Tank Bottoms)	- Oldage (Felloleality	
CERTIFICATION:	The waste described above is not hazardous pursuant to 40CFR Part 261 and below. I certify the foregoing is true and correct to the best of my knowledge.	was consigned to the transporter named
	Steven Wolker	-9-27-95 -
The seeds of the first seeds	Signature of Generator's Authorized Agent	Date and Time of Shipment
PART II:	TRANSPORTER: (To be completed in full by Transp	porter)
	Name Rowland Trucking	505-394-2581
	Address P.O. Box 99	Telephone No.
•	City/State Euwice, N.M. 88231	57
CERTIFICATION:	Contify that the waste in quantity shows use specified by the few waste to	Truck No.
OLITTI TOTATION.	I certify that the waste in quantity above was received by me for shipment to the	
	Ton My MOTES	9-27-95
حَلَّم مِنْ الْمُرْدِينِ الْمِرْدِينِ الْمُرِدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمِينِ الْمُرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمِرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمِرْدِينِ الْمُرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمُرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمُرْدِينِ الْمِرْدِينِ الْمِينِ الْمِرْدِينِ الْمِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ الْمِرْدِينِ	Tom MY MOTES Signature of Transporter's Agent	Date and Time Received
TOME TO STATE OF THE STATE OF T		
PART III:	RECLAMATION SITE:	
The state of the s	Name Controlled Recovery, Inc./Inland Produc	residente de la companya de la comp Notae de la companya
	Address P.O. Box 369	<u> </u>
en e	City/State Hobbs, NM 88241	
The section of the managers of the	CALL TIODDS THE OCCUPANT	-
CERTIFICATION:	I certify that the weste described in the Lawrence was	and a second to add to the second
	I certify that the waste described in Part I was received by me via the transporter	.
	West acres	9-17-90 8120
	Signature of Facility Agent	Date and Time Design

	NUN-HAZA	WDOOS WAS IE WI	4NIFES I/H	UN HUNEL
PART I:	Generator	Mardin O.	il	_
	Address City/State	Crone TY		Telephone No.
ORIGINATION OF	WASTE:			
Operations Center	Crone	TX	 ;	RRC No. 00 882
Property Name	GH BO	7GDN		
r roperty rvamo		ank Battery, Plant, Facility)	· ·	
The state of the s				
WASTEIDE	NTIFICATION A	ND AMOUNT (BARRELS,)	ARDS, TONS,	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste		Oily Waste		Spill Clean-up & Debris
Drilled Solids	· · · · · · · · · · · · · · · · · · ·	Plant Waste Water	<u> </u>	Storm Water Run-off
Drilled Pit Liquids		Produced Sand		Used Containers
Filter Elements		Produced Water		Used Containers
General Refuse	· · · · · · · · · · · · · · · · · · ·	Rinsate		Used Lube Oils
H2S Scavengers/Sweeter BS&W/Crude	11ng	Scale Sludge (Water)		Completion Solids Completion Liquids
(Tank Bottoms)	700	Sludge (Petroleum)		Other
(Tank Bottomo)		Cladge (i Choledin)		
<u> </u>	·	<u> </u>	7 , 	and the second s
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant foregoing is true and correct to the foregoing is true and correct to the Generator's Authorized Agent		and was consigned to the transporter named lge. 9-27-93 Date and Time of Shipment
🕶 🚾 🥰 🚾 garin andrews (a history of the Paris of the Assessment (a history)	<u></u>	Land to the second	<u> </u>	
PART II:	TRANSPOR	TER: (To be completed	d in full by Tra	ansporter)
	Name	Istalio		
	Address			_ Telephone No.
	City/State	- Calsa	· · · · · · · · · · · · · · · · · · ·	
CERTIFICATION:	I certify that the year	aste in guantity above was received	by me for shipment	to the destination below.
	1 1	four	_	9-27.95
	Signature	of Transporter's Agent	•	Date and Time Received
PART III:	RECLAMAT	ION SITE:		
enance of the same	Name	Controlled Recovery, I	nc./Inland Pro	oducts
	Address	P.O. Box 369		
	City/State	Hobbs, NM 88241		
	.,			
CERTIFICATION:	I certify that the wa	ste described in Part I was receive	d by me via the tran	sporter described in Part II.
	It was	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		5-37-95 5:20
	Signatu	re of Facility Agent		Date and Time Received
:	// 2.8.1910			Data alia Lillia Lacaldan

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

Date and Time Received

	NON-HAZA	RDOUS WASTE MANIFES	ST/RUN TICKET
PART I:	Generator- Address City/State	Maridian O'D	2 ()
		Con Sta	Telephone No.
ORIGINATION OF	WASTE:	1.7	
Operations Center	Cran	e TX	RRC No. 00 864
Property Name	AA R.	er o co	
r roporty mains		ank Battery, Plant, Facility)	
		And the second of the second o	
WASTE IDEI	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, T	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION;	The waste describe	ed above to not hazardous pursuant to 40CFR I foregoing is true and correct to the best of my	Part 261 and was consigned to the transporter named knowledge.
<i>:</i>	\mathcal{E}, p, p	suid	9-26-95
and the second	Signature of (Generator's Authorized Agent	Date and Time of Shipment
PART II:	Name Address	TER: (To be completed in full by	oy Transporter) Solution States of the Stat
一个一个	City/State	A THE STATE OF THE	Truck No.
CERTIFICATION:	· E.P.	ste in quantity above was received by me for sl	·
PART III:	-RECLAMATI	ON SITE:	
	Name	Contrailed Recovery, Inc./Inlar	nd Products
	Address	P.O. Box 369	<u></u>

City/State

I certify that the waste described in Part I was received by me via the transporter described in Part II.

Hobbs, NM 88241

Signature of Facility Agent Date and Time Received

PART I:	Generator Address / City/State	MERIDIAN DIL 1112W. HWY.329 HCR 65 BOX CRANE, TEX. 79731	58 (915) <u>563-0274</u> Telephone No.
ORIGINATION OF	WASTĘ:		
Operations Center			RRC No. 06485
Property Name	REESE (Well, Ta	ank Battery, Plant, Facility)	
<u>.</u>	N. Committee		
WASTE IDEN	ITIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS, C	CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Plant Waste Water Produced Sand Produced Water Rinsate Scale Scale Sludge (Water)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. Licertify the	ed above is not hazardous pursuant to 40CFR Part 261 of foregoing is true and correct to the best of my knowledge D. Walson Generator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by Tra	nsporter)
	Name Address City/State	Rowland Trucking P.O. BOX 99 EUNICE, N.M.	505-394-25-81 Telephone No. 42 Truck No.
CERTIFICATION:	Rill	of Transporter's Agent	o the destination below. 9-28-95-0715 Date and Time Received
PART III:	RECLAMAT	ION SITE:	
	Name	Controlled Recovery, Inc./Inland Pro	ducts
	Address City/State	P.O. Box 369 Hobbs, NM 88241	
CERTIFICATION	I certify that the wa	iste described in Part I was received by me via the trans	porter described in Part II.

WHITE ORIGINAL - CRI YELLOW COPY - CRI

Date and Time Received

PART I:	Generator Address	Meridian Oil 1112 W. HWY. 329 HCR 65 BOX: CRANE, TEX. 79731	58 (915) <u>563-0274</u>
	City/State	CRANE, TEX. 79731	Telephone No.
ORIGINATION OF	* *		
Operations Center			RRC No. 00939
Property Name	•	Bowen (west) Tank Battery, Plant, Facility)	
	4		
WASTE IDE	NTIFICATION A	AND AMOUNT (BARRELS, YARDS, TONS	, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	e	Oily Waste Plant Waste Water	Spill Clean-up & Debris Storm Water Run-off
Drilled Pit Liquids	-	Produced Sand	Used Containers
Filter Elements	 -	Produced Water	Used Containers
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers/Sweete	nina	Scale	Completion Solids
BS&W/Crude	120 BBIS	· · · · · · · · · · · · · · · · · ·	Completion Liquids
(Tank Bottoms)		Sludge (Petroleum)	Other
1		• , , , = =	· · · · · · · · · · · · · · · · · · ·
L			
CERTIFICATION:	Stell D.	bed above is not hazardous pursuant to 40CFR Part 26 be foregoing is true and correct to the best of my knowle Lollow Generator's Authorized Agent	
PART II:	TRANSPOR	RTER: (To be completed in full by Ti	ansporter)
	Name	Rowland Trucking	505-394-2581
	Address	P.O. Box 99	Telephone No.
	City/State	EUNICE, N.M. 8823	1 42
CERTIFICATION:	e	raste in quantity above was received by me for shipmer	Truck No.
	Tooluly that the W	aste in quality above was received by the for shipfile	it to the destination below.
	_RSD	La	<u> </u>
	Signatur	e of fffansporter's Agent	Date and Time Received
PART III:	RECLÂMAT	FION SITE:	
•	Name	Controlled Recovery, Inc./Inland P	roducts
	Address	P.O. Box 369	
			
	City/State	Hobbs, NM 88241	· ·
CERTIFICATION:	Loorlife that the	rests described in Port Luce	managed days of the Book !!
SEITH IOATION.	i coruly trial trie W	aste described in Part I was received by me via the tra	risporter described in Part II.
	1)/	2000	9-27-9-11-25
	Signati	ure of Facility Agent	Date and Time Received

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - Generat

GOLDENROD COPY - Transporter

Constant	NON-HAZARDO	US WASTE !	MANIFEST	RUN TICK	ET	
PART I:	Address 1112 L	DEFICIÁN C U. Huy. 329 F ZANE TX. T	1CB65 BO	× 58	(915) <u>563</u> Teleph	3-0274 one No.
ORIGINATION OF	WASTE:		*	* . * .		
Operations Center	MidlANd,	Tex.	· ·	R	RC No. <u>00</u>	876
Property Name		Lery, Plant, Facility)	A Mich			
WASTE IDEI	NTIFICATION AND AN	IOUNT (BARRELS	, YARDS, TONS	, CU.FT., LBS	., UNITS, ETC	.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	Plar Proc Proc Rins Scal	- -		Spill Clean-to Storm Water Used Conta Used Conta Used Luber Completion Completion Lother	r Run-off _ iners _ iners _ Oils _ Solids _	
CERTIFICATION:	The waste described above below. I certify the foregoin Signature of Génerate			edge. 9-2	gned to the transpo 7 - 95 - 0 Ite and Time of Sh	700
PART II:	TRANSPORTER:	(To be complet	ted in full by T	ransporter)		
	Name Ro Address P.C	1 1 -	icking	<u>*</u> .	505-39 Telephor	ne No.
CERTIFICATION:	I certify that the waste in qu	antity above was receiv	ed by me for shipme	nt to the destination	Truck on below.	No.
	Tonny mo Signature of Trans	Tes .		9-2	7-95 Date and Time Rec	ceived
PART III:	RECLAMATION S	SITE:				,
* ** · · · · · · · · · · · · · · · · ·	Address P.O.	trolled Recovery Box 369 bs. NM 88241	, Inc./Inland P	roducts		
CERTIFICATION:	I certify that the waste desc	cribed in Part I was rece	ived by me via the tra	ansporter describe	d in Part II.	

WHITE ORIGINAL - CRI YELLOW COPY - CRI PINK COPY - Generator GOLDENROD COPY - Transporter

Signature of Facility Agent

PART I:	Generator	MeridiAN Oil	
	Address	1112 W. Hury 329 HCR 65 BOX 58	9 (915) 563-0294
	City/State	CRANE, TEX. 79731	Telephone No.
ORIGINATION OF	WASTE:	, ,	
	ŧ		_
Operations Center	MidlANA	TEX.	RRC No. <u>06485</u>
Property Name	REESE 16	BATTERY	
	(Well, 1	Fank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION /	AND AMOUNT (BARRELS, YARDS, TONS, C	U.FT., LBS., UNITS, ETC.)
Commercial/Site Wast	e <u>;</u>	•	pill Clean-up & Debris
Drilled Solids	<u> </u>		torm Water Run-off
Drilled Pit Liquids		<u> </u>	sed Containers
Filter Elements			Jsed Containers
General Refuse	<u> </u>		Jsed Lube Oils
H2S Scavengers/Sweete			Completion Solids
BS&W/Crude	125 BBC		ompletion Liquids
(Tank Bottoms)	•	Sludge (Petroleum) C	Other
		<u> </u>	
CERTIFICATION:	below I certify the	bed above is not hazardous pursuant to 40CFR Part 261 are foregoing is true and correct to the best of my knowledge with the best of my knowledge is Generator's Authorized Agent	
	ś		
PART II:	TRANSPOR	RTER: (To be completed in full by Tran	sporter)
	Name ⁱ	Rowland Trucking	505-394-2581
•	Address	P.O. Box 99	
	City/State	EUNICE N.M. 88231	Telephone No. 42
	st.		Truck No.
CERTIFICATION:	I certify that the w	aste in quantity above was received by me for shipment to	the destination below.
	R-60	/30	9-29-95 -
		of Transporter's Agent	Date and Time Received
		· · · · · · · · · · · · · · · · · · ·	
PART III:	RECLAMAT	TON SITE:	
	Mana-	Operaturally of December 1 111 1 2 2 2	
	Name	Controlled Recovery, Inc./Inland Prod	<u>lucts</u>
	Address	P.O. Box 369	<u></u>
	City/State	Hobbs, NM 88241	

CERTIFICATION: Learnify that the waste described in Part I was received by me via the transporter described in Part II.

Signature of Facility Agent

Date and Time Received

PARTI:	Generator Address City/State	Mardin Oil	()
ORIGINATION OF	WASTE:		
Operations Center	me Cran	· · ·	RRC No. 00893
Property Name	HArrell (Well, Ta	ank Battery, Plant, Facility)	
WASTE IDE	NTIFICATION A	ND AMOUNT (BARRELS, YARDS, TONS	G, CU.FT., LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweete BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	below. I certify the	ed above is not hazardous pursuant to 40CFR Part 2 foregoing is true and correct to the best of my know Generator's Authorized Agent	
PART II:	TRANSPOR	TER: (To be completed in full by T	ransporter)
CERTIFICATION:	Name Address City/State	Ollessa Stee in quantity above was received by me for shipments	Telephone No. Truck No. ont to the destination below.
	Signature	of Transporter's Agent	Date and Time Received
PART III:	Signature		Date and Time Received
PART III:	 		· · · · · · · · · · · · · · · · · · ·

WHITE ORIGINAL - CRI

YELLOW COPY - CRI

PINK COPY - General

GOLDENROD COPY - Transporter

PART I:	Generator	meridian Q	il.	-	
	Address City/State	Crane TX		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	elephone No.
ORIGINATION OF	WASTE:		#		
Operations Center	Crone	TYIC		RRC No.	00968
Property Name	AA Ree	se			·
	(Well, T	ank Battery, Plant, Facility)		•	
WACTE IDE	NEELO ATION A	ND AMOUNT (BARREL	C VADOS TONS	CHET LIBS HINTS	ETC \
WASIEIDE	HINFICATION 2		S. TANDS, TOROS	CONT., LDC., OIII O.	
Commercial/Site Wast Drilled Solids	e	Oily Waste Plant Waste Water	an de <u>a legado propri escripto e escripto</u> prop	Spill Clean-up & Debri Storm Water Run-off	S. 6
Drilled Pit Liquids		Produced Sand		Used Containers	ائىدىنىدىدىدىدى دەنۇر
Filter Elements		Produced Water		Used Containers	
General Refuse		Rinsate		Used Lube Oils	
H2S Scavengers/Sweete	ening	Scale		Completion Solids	
BS&W/Crude	100	Sludge (Water)		Completion Liquids	
(Tank Bottoms)		Sludge (Petroleum)		Other	
				•	
	. :	·			
0505151045104			ا مین قور چو		
CERTIFICATION:		ed above is not hazardous purs a foregoing is true and correct to			
	Signature of	Generator's Authorized Agent	· ·	Date and Time	
	o.gnatare o.	acherators Notherized Agent	•	Date and Time	or omprion.
PART II:	TRANSPOR	RTER: (To be comple	ted in full by Tra	ansporter)	
•	Name Address	Malio Tu	ucky	Tolo	phone No.
• .	City/State	Oderse		rele	phone No.
CERTIFICATION:	Charles and An	aste in quantity above was recei	ved by me for shipment		ruck No.
; , , , , , , , , , , , , , , , , , , ,	Signature	of Transporter's Agent		Date and Tim	e Received
PART III:	RECLAMAT	ION SITE:	•		
	Name	Controlled Recover	/ Inc /Inland Pro	ndurte	
	Address	P.O. Box 369	ri inoninana i 10	<u> </u>	
	City/State	Hobbs, NM 88241	,		
	Oity/Olale	1 10000 11 11 00241			
CERTIFICATION:	Al annië shasses	note described a Property			r
QUITTI IOATION.	Ceruly that the Wa	ste described in Part I was rece	erved by the via the trans	sporter described in Part II.	
*	the want	Mr. 1	_	9-34.53	
	Signatu	re of Facility Agent		Date and Tim	e Received

ę i	<i>≨</i> •	NON-HEA	RDOUS WASTI	E MANIFES 77	RUN TICKET	
	PART	Generator Address City/State	Meridian O	oil .	<u> </u>	Telephone No.
	ORIGINATION OF	WASTE:	6 #	7		
	Operations Center	Crone	TEX ()	$\frac{\zeta}{\zeta}$	RRC No.	00936
`	Property Name 00		FRE IMBO	don't	is fee	MINE
	W Paul	(Well, Ta	nk Battery, Plant, Facility)		1 6 th 42	
	WASTEIDE	NTIFICATION A	ND AMOUNT (BARRE	LS, YARDS, TONS	, CULET., LBS., UNITS	S, ETC.)
	Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Studge (Petroleum)		Spill Clean-up & Del Storm Water Run-of Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other	
	CERTIFICATION:	below. I certify the	ed above is not hazardous proregoing is true and correct of the second o	to the best of my knowle	9-29-9	
€	PART II:	TRANSPOR	TER: (To be comp	pleted in full by T	ransporter)	
2 · 2	CERTIFICATION:	Name Address City/State	Malco 7 Crace Ste in quantity above was re	eceived by me for shipmen		Truck No.
*		E.	D. Dacced of Transporter's Agent			ime Received
	PART III:	RECLAMATI	ON SITE:			

Name
Controlled Recovery, Inc./Inland Products
Address
P.O. Box 369
Hobbs, NM 88241

CERTIFICATION: I certify that the waste described in Part I was received by me via the transporter described in Part II.

Signature of Facility Agent

Date and Time Received

<u>DISTIUCT I</u> P.O.Box 1980, Hobbs, NM 88241-1980 Form C-118 Revised 4-1-91

DISTRICT II

P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION PIN 8 52.

-- Sheet 1

DISTRICT III
1000 Rio Brazos Rd, Aziec, NM 87410

Santa Fc, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled Rec	covery Inc.		Month & year_	AUGUST 19	995
Address	P.O. Box 369	Hobbs, NM	88241-0369			
					•	

TOTAL STOCKS PIPELINE OIL	BEGINNING OF MONTH (Attach additional sheets	if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	10,783.32
	TOTAL ALL PLANTS	10,783.32
TOTAL PIPELINE OIL I	RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2,804.00
	TOTAL ALL PLANTS	2,804.00
DELIVERIES PIPEL	LINE OIL (Attach additional sheets if necessary)	
FROM	OT	BARRELS
Controlled Recovery Inc. CONTROLLED RECOVERY INC. TRANSFERED FROM OIL TREATING PLANT TO DISPOSAL AREA	PETROSOURCE PARTNERS Ltd. MIDLAND CRUDE PURCHASING CO WATER	1,250.00
	TOTAL ALL PLANTS	3,969.47
TOTAL STOCKS PIPLELINE C	OIL END OF MONTII (Attach additional sheets if no	ccssary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	9,617.85
		0 /17 05
·	TOTAL ALL I'LANTS	9,617.85

DONNA L. ROACH / OFFICE MANAGER

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE OUALITY OIL RECOVERED BY TREATING PLANTS

PERMIT		DIL RECOVERED BY TREATIN	GROSS VOLUME	NET BBLS. P.L.
NUMBER	LEASE OPERATOR	LEASE NAME	SEDIMENT OIL	OIL RECOVERED
	TRANSPORTER:	A.A. OILFIELD SERVICE		·
H-18067	AA OILFIELD	ALPHA PHI CRUDE	125.00	
H-18134	AMERADA HESS	STATE Q	60.00	
H-18082	AA OILFIELD	STATE AB SWD #1	<u>125.00</u>	• .
	TOTAL		310.00	185.00
	TRANSPORTER:	I & W TRANSPORTATION		
H-18196	DEVON ENERGY	KEEL B #28	130.00	•
H-18195	DEVON ENERGY	KEEL B 61	35.00	
H-18197	DEVON ENERGY	KEEL B 80	31.00	
H-18195	DEVON ENERGY	KEEL B #70	35.00	
	TOTAL		231.00	231.00
	TRANSPORTER:	MCCASLAND SERVICES		
H-18112	MCCASLAND	ATHA #1	125.00	
H-18112	MCCASLAND	ATHA #1	130.00	
H-18129	MCCASLAND	ATHA #1	131.10	
H-18129	MCCASLAND	ATHA #	135.00	
H-18129	MCCASLAND	ATHA #1	130.00	
H-18092	SCURLOCK PERMIAN	LYNCH	<u>55.00</u>	
11-10092	TOTAL	BINCH	706.10	581.10
ľ			, 55:25	
meva c	TRANSPORTER:	PATE TRUCKING	D	
TEXAS	APACHE OIL	SOUTH MALLOT C BATTE		
TEXAS	APACHE OIL	SOUTH MALLOT C BATTE		
TEXAS	APACHE OIL	SOUTH MALLOT C BATTE		10.00
l	TOTAL		260.00	10.00
	TRANSPORTER:	ROWLAND TRUCKING CO.		
A-8801	ROWLAND TRUCKING	SPRINGS SWD	130.00	
A-8761	ROWLAND TRUCKING	BKE SWD	142.00	
A-8791	ROWLAND TRUCKING	BKE SWD	295.00	
A-8802	ROWLAND TRUCKING	BKE SWD	275.00	
A-8792	ROWLAND TRUCKING	SPRINGS SWD	300.00	
A-8765	ROWLAND TRUCKING	SPRINGS SWD	263.00	
H-18058	ROWLAND TRUCKING	R.A. STATE #1	146.23	
A-8768	ROWLAND TRUCKING	SPRINGS SWD	245.67	
	TOTAL		1796.90	1796.90
	TOTAL GROSS BARREL	s	3304.00	
	TOTAL NET BARRELS		3304.00	2804.00

Halfway, NM

TRANSPORTER'S MAINIFEST

MAINIFEST 4

SHIPPING FACILITY NAME & ADDRES	S: (LOCATION OF MATERIAL:
Apache South mallet	+	C Battery
	• •	1 .
		·
TRANSPORTER NAME & ADDRESS:	· t	
Pate Trucking west	Hwy 300	hevelland Tx
· · · · · · · · · · · · · · · · · · ·	ويستعداد	The state of the s
DESCRIPTION OF WASTE:		
T		QUANTITY:
lank Bottom		_80'09 <u>5</u>
Facility Contact:	Date:	Signature of Contact:
		•
NAME OF TRANSPORTER: (Driver)		
A	Date:	Signature of Driver:
Coy Lowbey	8-5-95	(ou siener
DISPOSAL SITE:		
Controlled Recovery, Inc.	Date:	Signature of CRI
Mile Marker 66		Representative
Carlsbad Hwy	Q \ \ \ \ \ \	$\langle \lambda u \lambda \rangle \sim 2$

TRANSPORTER'S MAINIFEST

SHIPPING FACILITY NAME & ADDRESS:

Apache South mallet C Battery

LOCATION OF MATERIAL:

TRANSPORTER NAME & ADDRESS:

ate Irucking Denver City Tx

DESCRIPTION OF WASTE:

Tank Bottom

QUANTITY 10 bb15

Facility Contact:

Date:

Signature of Contact:

NAME OF TRANSPORTER: (Driver)

Davids Brown

Date:

Signature of Driver:

Signature of CRI

8-5-95

DISPOSAL SITE:

Controlled Recovery, Inc. Mile Marker 66 Carlsbad Hwy Halfway, NM

Date:

Representative

TRANSPORTER'S MAINIFEST

MAINIFEST#2002

SHIPPING FACILITY NAME & ADDRES	SS: (LOCATION OF MATERIAL:
grache southman	let - c	a Tr
,, ,,	••	
• \		•
·	• •	
TRANSPORTER NAME & ADDRESS:		
PATE Trucking	Denue	ait V Texas
111/2/14/19	Denver	
	La Co Secretal Tu	
DESCRIPTION OF WASTE:		
Tank BoTTOM		QUANTITY:
1402 9 - 11 - 11		90
Facility Contact:	5	
	Date:	Signature of Contact:
NAME OF TRANSPORTER: (Driver)		
DALE FREEMON	Date:	Signature of Driver:
	8-5-95	Vale Treem
	000	Date - Clerk
DISPOSAL SITE:		· · · · · · · · · · · · · · · · · · ·
DISPOSAL SITE.	Date:	Signature of CRI
Controlled Recovery, Inc.		Representative
Mile Marker 66 Carlsbad Hwy	8595	
Halfway NA	011	

DISTRUCTI P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

DISTRICT II P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION 105 811 - 13 THY 8 P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd, Azicc, NM 87410

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Sumall

Santa Fc, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of Controlled Recovery Inc.	Mon	Month & year JULY 1995		
Address_P.O. Box 369 Hobbs,	NM 88241-0369			
TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additio	nal sheets if necesshry)		
PLANT NAME	LOCATION	BARRELS		
	Location	DARGEES		
Controlled Recovery Inc.	Halfway Disposal	9899.23		
	TOTAL ALI			
	OIL RECOVERED (Attach additional sheets if	necessary)		
PLANT NAME	LOCATION	BARRELS		
Controlled Recovery Inc.	Halfway Disposal	3156.59		
-	:			
	TOTAL ALL	.plants 3156.59		
DELIVERIES P	IPELINE OIL (Attach additional sheets if neces	sary)		
FROM	10	BARRELS		
Controlled Recovery Inc. TRANSFER FROM OIL TREATING PLAN PLANT TO DISPOSAL AREA	PETRO SOURCE PARTNERS, Ltd	1556.50 600.00 116.00		
·	TOTAL ALL	PLANTS 2272.50		
TOTAL STOCKS PIPLELI	NE OIL END OF MONTH (Attach additional s			
PLANT NAME	LOCATION	BARRELS		
Controlled Recovery Inc.	Halfway Disposal			
	TOTAL ALL	PLANTS 10783.32		
·	101NE NEE	· • · · · · · · · · · · · · · · · · · ·		

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY	OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17955 H-18006 H-18036 H-17989 H-17990	TRANSPORTER: AA OILFIELD AA OILFIELD AA OILFIELD TEXACO E & P TEXACO TOTAL	A.A. OILFIELD SERVICE STATE AB SWD #2 STATE AB SWD #2 STATE AB SWD #2 NEW MEX QOBA BATTERY NORTH VACUUM ABO W ST	250.00 125.00 125.00 120.00 60.00	605.00
H-17957	TRANSPORTER: DEVON ENERGY TOTAL	GANDY CORPORATION LEST A #36	120.00 120.00	120.00
TEXAS TEXAS	TRANSPORTER: PENZOIL PENZOIL TOTAL	BERGSTEIN'S NORTH WELCH GAS PLANT NORTH WELCH GAS PLANT	100.00 100.00 200.00	200.00
H-18029	TRANSPORTER: RICE ENGINEERING TOTAL	SONNY'S TRANSPORTATIO	100.00 100.00	100.00
H-18040 A-8688 A-8709 A-8731	TRANSPORTER: ROWLAND ROWLAND ROWLAND ROWLAND TOTAL	ROWLAND TRUCKING CO. R.A. STATE SPRINGS SWD BKE SWD SPRINGS SWD	147.00 294.34 141.00 <u>266.25</u> 848.59	848.59
TEXAS TEXAS TEXAS H-17950	TRANSPORTER: SCURLOCK PERMIAN SCURLOCK PERMIAN SCURLOCK PERMIAN MCCASLAND TOTAL	McCasland Services in Greenwood Station Guy Station Hanley Station Atha #1	775.00 198.00 360.00 130.00 1463.00	1283.00
	TOTAL GROSS BARRELS TOTAL NET BARRELS		3411.59	3156.59

DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980 State of New Mexico

Energy, Minerals and Natural Resources Department THE CONSERVATION DIVISION. Form C-118 Revised 4-1-91

P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION RECEIVED

Sheet 1

DISTRICT III 1000 Rio Brazos Rd, Azicc, NM 87410 P.O. Box 2088

Santa Fe, New Mexico 87504-2088 JU 12 PM TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled Rec	covery Inc.		_ Month & year	June 1995
Address_	P.O. Box 369	Hobbs, N	88241-0369	<u></u>	
	TOTAL STOC	Ke bibei ine oii	BEGINNING OF MONTII (Attach	additional sheets if	neceschari
		NO THE CHIE OIL	LOCATION	1 additional sheets if	BARRELS
	" PLANT NAME		LOCATION		BARRELS
Co	ontrolled Recovery	Inc.	Halfway Disposal		10,859.19
•			то	TAL ALL PLANTS	10,859.19
	TOT	AL PIPELINE OIL	RECOVERED (Attach additional sl	heets if necessary)	
	PLANT NAME		LOCATION		BARRELS
Со	ntrolled Recovery	Inc.	Halfway Disposal		2,837.32
			TOT	TAL ALL PLANTS	2,937.32
		DELIVERIES PIPI	ELINE OIL (Attach additional sheets	if necessary)	
	FROM		TO	1 1100000000000000000000000000000000000	BARRELS
	I-ROM .				BAIGCES
Cor Tra	ntrolled Recovery I ntrolled Recovery I ansfer from Oil Tre ant to Disposal Are	nc. ating Plant	Midland Crude Oil Purcha Petro Source Partners, I Water Solids		172.84 2,334.44 1,100.00 290.00
			TOT	AL ALL PLANTS	3,897,28
	TOTAL STO	OCKS PIPLELINE	OIL END OF MONTH (Attach add		
	PLANT NAME	T	LOCATION		BARRELS
Coi	ntrolled Recovery	Inc.	Halfway Disposal		
			TOT	או און וין אארנג	9,899.23

I hereby certify that this report is true and complete to the best of my knowledge and belief.

7-7-95

505 .393-1079

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
	TRANSPORTER:	A.A. OILFIELD SERVI	CE	
WATER	Conoco TOTAL	Anderson Ranch	<u>150.00</u> 150.00	000.0
TEXAS TEXAS	TRANSPORTER: Meridian Oil Oxy, USA TOTAL	CHAPARRAL Rickter B #903 WSSAU	300.00 <u>250.00</u> 550.00	550.0
H-17809 H-17911 H-17939	TRANSPORTER: Devon Energy Devon Energy Devon Energy TOTAL	GANDY CORPORATION Keel B #82 Keel B #54 Keel B #62	110.00 110.00 <u>105.00</u> 325.00	325.(
A-8679 H-17906	TRANSPORTER: Devon Energy I & W TOTAL	I & W TRANSPORTATIO Keel B #91 LC State SWD	N 115.00 <u>160.00</u> 275.00	275.
TEXAS	TRANSPORTER: Meridian Oil TOTAL	MALCO TRUCKING Rickter B Lease	200.00 200.00	200.
H-17924 H-17928 H-17907	TRANSPORTER: McCasland McCasland McCasland TOTAL	McCASLAND TRUCKING Atha #1 Atha #1 Atha #1	620.00 360.00 <u>262.18</u> 1242.18	1047.
H-17892 A-8599 A-8643 A-8610	TRANSPORTER: Hallwood Petroleum Hallwood Petroleum Rowland Rowland TOTAL	ROWLAND TRUCKING State 30 #1 State 30 #3 Springs SWD BKE SWD	100.00 100.00 258.19 <u>147.00</u> 605.19	540.
	TOTAL GROSS BARRELS TOTAL NET BARRELS	3	3347.37	2937.

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PART I: General Address	Hobbs AM	(505) 392-4202 (080
City/Sta	te Hobbs Mm	Telephone No.
ORGINATION OF W	/ASTE:	
Operations Center	DXY WSSAU	RRC NO. 675953
Property Name	WSSAU	
	(Well, Tank Battery, Plant, Facility)	
WASTE IDENTIFICAT	ITON AND AMOUNT (BARRELS, YARDS, 1	ONS, CU.FT.,LBS., UNITS, ETC.)
Commercial/Site Waste	Oily Waste	Spill Clean—up
Drilled Solids	Plant Waste Water	& Debris
Drilled Pit Liquids	Produced Sand	Storm Water Runoff
Filter Elements	Produced Water ×	Used Containers
General Refuse	Rinsate	Used Lube Oils
H2S Scavengers/	Scale	Completion solids
Sweetening	Sludge (water)	Completion liquids
BS&W/CRUDE	Sludge (Petroleum)	Other
(TANK BOTTOMS)	X	
	named below. I certify the the foregoing is true and correct	80-1-95 B:001
	Signature of Generator's Authorized Agent	Date and time of Shipment
Name Address		ransporter) (505)394-2545 Telephone No.
City/Stat	te EUNICE, NEW MEXICO 88231	54
		Truck No.
CERTIFICATION:	I certify that the waste in quantity above was received by m	ne for shipment to the destination below.
	Signature of Transporter Agent	Date and time of Received
	MATION SITE:	
Name	Controlled Recovery, Inc./Inlar	nd Products
Address		· · · · · · · · · · · · · · · · · · ·
City/Stat	teHobbs, NM 88241	
CEDTICIO ATIONI		
CERTIFICATION:	I certify that the waste described in Part I was received by	me via the transporter described in Part 11.
	Davon	6-1-75
	Signature of Facility Agent	Date and time of Received

PART I: Generate	or OKL LUSSAU	
Address	Honns nm	(505) 393-4202 (0813)
City/Stat	e Seminale TX	Telephone No.
000000000000000000000000000000000000000	AOTE	
ORGINATION OF W	ASIE:	
Operations Center	CUSSAU	RRC NO. 675953
Property Name	OXV WSSAI)	
r roporty rearro	(Well, Tank Battery, Plant, Facility)	
	(,	
WASTE IDENTIFICAT	ION AND AMOUNT (BARRELS, YARDS, 1	ONS, CU.FT.,LBS., UNITS, ETC.)
Commercial/Site Waste	Oily Waste	Spill Clean—up
Drilled Solids	Plant Waste Water	& Debris
Drilled Pit Liquids	Produced Sand	Storm Water Runoff
Filter Elements	Produced Water X	Used Containers
General Refuse	Rinsate	Used Lube Oils
H2S Scavengers/	Scale	Completion solids
Sweetening	Sludge (water)	Completion liquids
BS&W/CRUDE	Sludge (Petroleum)	Other
(TANK BOTTOMS)		
CERTIFICATION:	The waste described above is not hazardous pursuant to 40 named below. I certify the the foregoing is true and correct the street of the stree	And the second s
	Signature of Generator's Anthorized Agent	Date and time of Shipment
PART II: TRANSP	ORTER: (To be completed in full by T	ransporter)
Name	CHAPARRAL SERVICE INC.	(505) 394–2545
Address	<u> </u>	Telephone No.
City/Stat	e EUNICE, NEW MEXICO 88231	45
		Truck No.
CERTIFICATION:	I certify that the waste in quantity above was received by m	ac for shipment to the destination below.
	Dame Bass	
	Signature of Transporter's Agent	Date and time of Received
	IATION SITE:	
Name	Controlled Recovery, Inc./Inlar	nd Products
Address		
City/State	e <u>Hobbs, NM</u> 88241	
CERTIFICATION:	Farm's at Lands and Decree 1	
CEITH IOMHON.	I certify that the waste described in Part I was received by	me via the transporter described in Parl II.
	STORY OF THE STORY	(0-(-/)
	Signature of Facility Agent	Date and time of Received

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NON-HAZARDOUS WASTE MANIFEST/RUN TICKET

	Addresa	C Pleridia	Hur. 329 HCR45 BOXE	2 2 (9	IS 1563-02-74. Telephous No.
'	City/otali	Crane, L	exas 79731]. ,	resolutions (40)
ORGINATIO	N OF WA	STE		*•	
	,, 601		,	•	
Operations (Center	McCan	ey Field	RRC N	O. <u>3055</u>
Property Na	me	Ricker	B BRC 00903		
			Tank Battery, Plant, Facility)	- ,	
Waste iden	VIIFICATI	ON AND AM	OUNT (BARRELS, YARDS	, TONS, CU.FT.,	BS., UNITS, ETC.)
•					
Commercial/Si	te Waste	and the second	Oily Waste	Spill Cle	
Drilled Solids	•		Plant Waste Water	_ & Do	
Drilled Pit Liq	uids	-	Produced Sand		Vater Runoff
Filter Element	s.		Produced Water		ontainers
General Refus	ę .		Rinsate	Usedla	iba Oils
H2S Scavenger	ns/		Scale	Comple	tion solids
Sweetening	•		Sludge (water)	Comple	tion liquids
RS&W/CRUDE			Sludge (Petroleum)	Other	
(TANK BOTTE	OMES)	XXXX			
,	.,			•	• • •
CERTIFICAT	70N:		oed above it not hazardous pursuant to		
CERTIFICAT	ION:	named below. I c	crity the the foregging is true and con		browledge. 6-23-9.5
CERTIFICAT	ION:	named below. I c	ertify the the foregging is true and co		mowiedge.
and the second s	,	named below. I s Signature of	certify the the foregoing is true and concernity the the foregoing is true and concernity the concernity the foregoing is true and concernity the foregoing is true and concernity the concerni	rea to the best of my	browledge. 6-23-9.5
-	,	named below. I s Signature of	crity the the foregging is true and con	rea to the best of my	browledge. 6-23-9.5
PART II:	TRANSP	named below. I s Signature of ORTER: (To	crity the the foregoing is true and con Concessor's Authorized Agent to be completed in full by	rea to the best of my	knowledge. 6-23-95 Date and time of Shipment
PART II:	TRANSP Name	named below. I s Signature of ORTER: (To	crity the the foregoing is true and concernity the the foregoing is true and concernity the true and c	rea to the best of my	Date and time of Salpment (505) 394-2545
PART II:	TRANSP Name Address	Signature of CHAPARRAL P.O. BOX	certify the the foregoing is true and concernity the the foregoing is true and concernity the the foregoing is true and concernity the foregoing is true and co	rea to the best of my	Date and time of Shipment (505) 394-2545 Telaphone No.
PART II:	TRANSP Name Address	Signature of CHAPARRAL P.O. BOX	crity the the foregoing is true and concernity the the foregoing is true and concernity the true and c	rea to the best of my	howledge. 6-23-95 Date and time of Shipment (505) 394-2545 Telaphone No. 45
PART II:	TRANSP Name Address City/State	Signature of CHAPARRAL P.O. BOX BEUNICE, N	certify the the foregoing is true and concernity the the foregoing is true and concernity of the completed in full by SERVICE INC. 1769 TEW MEXICO 88231	Transporter)	C-23-95 Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No.
PART II:	TRANSP Name Address City/State	Signature of CHAPARRAL P.O. BOX BEUNICE, N	certify the the foregoing is true and concernity the the foregoing is true and concernity the the foregoing is true and concernity the foregoing is true and co	Transporter)	C-23-95 Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No.
PART II:	TRANSP Name Address City/State	named below. It Signature of ORTER: (To CBAPARRAL P.O. BOX BEUNICE, N I cartify that the	crity the the foregoing is true and concernity the the foregoing is true and concernity above was received to a full by	Transporter)	Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No. the destination below. (9-23-95/100)
PART II:	TRANSP Name Address City/State	named below. It Signature of ORTER: (To CBAPARRAL P.O. BOX BEUNICE, N I cartify that the	certify the the foregoing is true and concernity the the foregoing is true and concernity of the completed in full by SERVICE INC. 1769 TEW MEXICO 88231	Transporter)	C-23-95 Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No.
PART II: CERTIFICAT	TRANSPI Name Address City/State	Signature of CHAPARRAL P.O. BOX BUNICE, N I corrify that the Signature	certify the the foregoing is true and concernity the the foregoing is true and concernity the completed Agent o be completed in full by SERVICE INC. 1769 IEW MEXICO 88231 Paste in quantity above was received to a full to firensporter's Agent	Transporter)	Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No. the destination below. (9-23-95/100)
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PART II: CERTIFICAT	TRANSPI Name Address City/State TION: RECLAN Name Address City/State	Signature of ORTER: (To CHAPARRAL P.O. BOX BEUNICE, N I carrify that the Signature IATION SITE Con	certify the the foregoing is true and concerning to the concerning of the completed in full by SERVICE INC. 1769 TEW MEXICO 88231 Waste in quantity above was received to the confirmation of transporter's Agent Ether of the covery, Inc./In. P.O. Box 369	Transporter) Transporter)	Date and time of Shipment (505) 394-2545 Telaphone No. 45 Truck No. the destination below. (9-73-95/00) Date and time of Received
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THE ORIGINAL-CEI

· AELTON CONT-CEL

MINK COPY-Generator

COLDEN TON

PART I:	Generate	Meridian Oil	•
•	Address		15.
		1112 W. Hury 329 HCR 45 Box 58 e Crane, Texas 79731	(9/59) 563-0274
		THAT ITAKS	
ORGINAT	TON OF WA	ISTE:	
Operation	s Center	McCamey Field	RRC NO. 3055
Summanut k	James		
Property N	Asuue .	Ricker B RRC 00903	
•	,	(Weil, Trak Battery, Plant, Pacilly)	
WASTE ID	ENTIFICATI	ON AND AMOUNT (BARRELS, YARDS, TO	ONS, CU.FT., LBS., UNITS, ETC.)
Commercial	VSite Waste	Oily Wasto	Spill Clean-up
Drilled Solid	ds .	Plant Waste Water	& Debris
Drilled Pit I	iquids	Produced Sand	Storm Water Runoff
Filter Eleme	ents	Produced Water	Used Containers
General Ref	fuse	Rinsate	Used Lube Oils
H2S Scaven	gers/	Scale	Completion solids
Sweetening	-	Sludge (water)	Completion liquids
BS&W/CRUD	E	Sludge (Petroleum)	Other
(TANK BOT	ראטאיניו		
(twin pol		XXXX	•
(INTRE BO)		XXX	
CERTIFIC/	ATION:	The waste described above is not hazardous pursuant to 40 C named below. I certify the the foggoing is true and correct	to the best of my knowledge.
	ATION:	The waste described above is not bezardous pursuant to 40 C	
CERTIFICA	ATION: TRANSPO	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the foregoing is true and correct to another than the foregoing is true and the foregoing is true another than the foregoing is true and the foregoing is true another than the foregoing is true and the foregoing is true and the foregoing is true and the foregoing is true another than the foregoing is true and the foregoing is true another than the foregoing is true another than the foregoing is true another than t	to the best of my knowledge. 6-23-95 Date and time of Shipm
CERTIFICA	ATION: TRANSPO	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the foregoing is true and correct to another of Generator's Authorized Agent DRTER: (To be completed in full by Tra	to the best of my knowledge. 6-23-95 Date and time of Shipm Ansporter)
	TRANSPO	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct to the foregoing is true and correct t	to the best of my knowledge. 6-23-95 Date and time of Shipm arisporter) (505) 394-2545
PART II:	ATION: TRANSPO Name Address City/State	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct to the foregoing is true and correct t	to the best of my knowledge. 6-23-95 Date and time of Shipm arisporter) (505) 394-2545 Telephone No. 54 Truck No.
CERTIFICA	ATION: TRANSPO Name Address City/State	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct support of Generator's Authorized Agent ORTER: (To be completed in full by Transcent Service Inc. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the	to the best of my knowledge. 6-23-95 Date and time of Shipm arisporter) (505) 394-2545 Telephone No. 54 Truck No.
PART II:	ATION: TRANSPO Name Address City/State	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct support of Generator's Authorized Agent DRTER: (To be completed in full by Transport of Transport of Generator's Authorized Agent CHAPARRAL SERVICE INC. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by one	Date and time of Shipm Ansporter) (505) 394-2545 Telephone No. 54 Truck No. For shipment to the destination below. 6-23-95
PART II:	ATION: TRANSPO Name Address City/State	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct support of Generator's Authorized Agent ORTER: (To be completed in full by Transcent Service Inc. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the	to the best of my knowledge. 6-23-95 Date and time of Shipm arisporter) (505) 394-2545 Telephone No. 54 Truck No.
PART II:	ATION: TRANSPO Name Address City/State	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the fogegoing is true and correct supportunities of Generator's Authorized Agent DRTER: (To be completed in full by Transporter INC. P.O. BOX 1769 BUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the Signature of Transporter angent	Date and time of Shipm Ansporter) (505) 394-2545 Telephone No. 54 Truck No. For shipment to the destination below. 6-23-95
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PART II:	TRANSPO Name Address City/State ATION:	The waste described above is not bezardous pursuant to 40 C named below. I certify the the foregoing is true and correct support of Generator's Authorized Agent DRTER: (To be completed in full by Track CHAPARRAL SERVICE INC. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the Signature of Transporter adgent ATION SITE: Controlled Recovery, Inc./inlance	Date and time of Shipm ansporter) (505) 394-2545 Telephone No. 54 Truck No. For chipment to the destination below. 6-23-95 Date and time of Receive
PART II:	TRANSPO Name Address City/State ATION: RECLAM Name Address	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the foregoing is true and correct signature of Generator's Authorized Agent DRTER: (To be completed in full by Transporter INC. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the Signature of Transporter angent ATION SITE: Controlled Recovery, Inc./inland. P.O. BOX 369	Date and time of Shipm ansporter) (505) 394-2545 Telephone No. 54 Truck No. For chipment to the destination below. 6-23-95 Date and time of Receive
PART II:	TRANSPO Name Address City/State ATION:	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the foregoing is true and correct signature of Generator's Authorized Agent DRTER: (To be completed in full by Transporter INC. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the Signature of Transporter angent ATION SITE: Controlled Recovery, Inc./inland. P.O. BOX 369	Date and time of Shipm ansporter) (505) 394-2545 Telephone No. 54 Truck No. For chipment to the destination below. 6-23-95 Date and time of Receive
PART II:	TRANSPO Name Address City/State ATION: RECLAM Name Address City/State	The waste described above is not bezardous pursuant to 40 0 named below. I certify the the foregoing is true and correct signature of Generator's Authorized Agent DRTER: (To be completed in full by Transporter INC. P.O. BOX 1769 EUNICE, NEW MEXICO 88231 I certify that the waste in quantity above was received by the Signature of Transporter angent ATION SITE: Controlled Recovery, Inc./inland. P.O. BOX 369	Date and time of Shipm Arisporter) (505) 394-2545 Telephone No. 54 Truck No. for shipment to the destination below. 6-23-95 Date and time of Received Products

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RUN TICKET (9/5) 563-0274 Telephone No. RC NO. 3055 ill Clean-up & Debris form Water Runoff sed Containers sed Lube Oils completion solids
Telephone No. RC NO. 3055 IFT_LBS_ UNITS, ETC.) ill Clean—up & Dobris form Water Runoff sed Containers sed Lube Oils
Telephone No. RC NO. 3055 IFT_LBS_ UNITS, ETC.) ill Clean—up & Dobris form Water Runoff sed Containers sed Lube Oils
Telephone No. RC NO. 3055 IFT_LBS_ UNITS, ETC.) ill Clean—up & Dobris form Water Runoff sed Containers sed Lube Oils
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61 and was consigned to the transporte of my knowledge.
6-22-95
Date and time of Shipme
ter)
(505) 394-2545
Telephone No.
54
Truck No.
eat to the destination below.
6-11-73
Date and time of Receive
K-1C
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ucts

CERTICICATION:

I carrify that the waste described in Part I was received by me via the transporter described in Part IL

Signature of Facility Agent

Date and time of Received

HETE CONCONAL -- CO

· YELLOW COPY-CRI.

THE COPY-GOVERN

COLDEN TON

NON-HAZARDOUS WASTE MANIFEST

Manifest Nº 2254

DA DE A	NA.	
PART I: DISPOSAL	S. W.	
Onsite Generator:	·	•
LOCATION Address		<u>(1/5)-(21)- 35/16</u>
Facility City/State		Telephone No.
Lease	, .	FOR OFFICE USE ONLY
ORIGINATION OF WASTE		FLAC
Drilling Workover/ Operations Center		- -
Property Name(Well, Tank Battery, Plant, F	Facility)	_ Field
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS		UNITS, ETC.)
		up & Debris ()
Commercial/Site Waste ————————————————————————————————————	Storm Wate	
Datlled Solids () Produced Sand	Used Conta	` '
Drilled Pit Liquids () Produced Water-Trans ()	Used Lube	
Filter Elements (1) Rinsate ()		Compl. Solids
, , , , , , , , , , , , , , , , , , , ,		Compl. Liquids
(3) Sludge (water) ()	Other	
General Refuse Sludge (petroleum) ()		
H ₂ S Scavengers/Sweetening () Sludge (chemical) ()	· · · · · · · · · · · · · · · · · · ·	
CERTIFICATION: The waste described above is not hazardous pursuant to 40 CFR Part 261 at foregoing is true and correct to the best of my knowledge.	nd was consigned to the trar	sporter named below. I certify that the
Signature of Generator's Authorized Agent		Date and Time of Shipment
DANT III		
PART II: TRANSPORTER: (To be completed in full by Transporter)		
Name MALCO TRUCKING INC.		(915) 366-4080 Telephone No.
Address 2800 W. 42nd.		Truck License No.
City/State Odessa, TX 79764		Trailer License No.
		Hallet Doorse No.
	•	
Estimated Transportation Cost		
APPERIOATION AND ADMINISTRATION		"
CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to	the destination below.	
		_ 6 - 6
Signature of Transporter's Agent		Date and Time Received
PART III: DISPOSAL SITE:		
Name		
Address		
City/State		
Method of Disposal		
·		
Estimated Disposal Fee		.*
CERTIFICATION: I certify that the waste described in Part I was received by me via the transpo	orter described in Part II	
The same and the desired and the same and the desired by the via the desired	onto accompose in Fait II.	6.76.55
Signature of Facility Agent		Date and Time Received
· · · · · · · · · · · · · · · · · · ·		

NON-HAZARDOUS WASTE MANIFEST

	Manifest No. 2253
PART I:	
Onsite Generator: Mindian Orl Ive	4
Offsite Address	(915)-550-38/4
LOCATION Gity/State	Telephone No.
Lease Lease	FOR OFFICE USE ONLY
ORIGINATION OF WASTE	FLAC
Workover/ Operations Center Craws Tex	
Property Name (Well, Tank Battery, Plant, Facility)	Field
WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS,	CU.FT. LBS. UNITS ETC.)
Asbestos ———————————————————————————————————	
Commercial/Site Waste Plant Waste Water-Trans	Storm Water Runoff
Drilled Solids () Produced Sand Drilled Pit Liquids () Produced Water-Trans ()	Used Containers () Used Lube Oils ()
Drilled Pit Liquids () Produced Water-Trans () Filter Elements () Rinsate ()	Workover/Compl. Solids
(2) Scale ()	Workover/Compl. Liquids
Sludge (water) ()	
General Refuse Sludge (petroleum) () H ₂ S Scavengers/Sweetening () Sludge (chemical) ()	
PART II: IRANSPORTER: (To be completed in full by Transporter) Name MALCO TRUCKING INC. Address 2800 W. 42nd. City/State Odessa, TX 79764 Estimated Transportation Cost CERTIFICATION: I certify that the wasterin quantity above was received by me for shipment to the destin	Date and Time of Shipment (915) 366-4080 Telephone No. Truck License No. Trailer License No. Date and Time Received
PART III: DISPOSAL SITE:	
Name CRI	·
Address	
City/State	
	AND COMPANY
Method of Disposal	4 (4, 179
Estimated Disposal Fee	
CERTIFICATION: I certify that the waste described in Part I was receized by me via the transporter described.	ibed in Part II.
Signature of Facility Agent	Date and Time Received
Signature of Facility Agent	

YELLOW COPY - FIELD

WHITE ORIGINAL - FIELD - SENDS TO MAIN OFFICE

PINK COPY - TRANSPORTER

GOLDEN ROD COPY - DISPOSAL SITE

DISTRUCTI NM 88241-1980 P.O.Box 1980, Hobb DISTRICT II JUN 1 4 1995 12. NM 88211-0719 P.O. Drawer DD **DISTRICT III**

State of New Mexico gy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

1000 Rio Brazo CALACONSTRUATION DIVISION Santa Fe, New Mexico 67,304-2000 FREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 4-1-91 Sheet 1

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Cont	rolled	Recovery Inc.	·		 Month & year	May	1995	
Address	P.O. Bo	x 369	Hobbs,	NM	88241-0369				

TOTAL STOCKS PIPELINI	E OIL BEGINNING OF MONTII (Attach additional sheets	
. PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	8281.59
TOTAL DIRECTION	TOTAL ALL PLANTS OIL RECOVERED (Allach additional sheets if necessary	
PLANT NAME	LOCATION LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	5719.05
·	TOTAL ALL PLANTS	5719.05
DELIVERIES	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	TO	BARRELS
Controlled Recovery Inc. Transfer from Oil Treating Plant to Disposal Area	Midland Crude Oil Purchasing water Solids	851.45 2000.00 290.00
	TOTAL ALL PLANTS	3141.45
TOTAL STOCKS PIPLE	LINE OIL END OF MONTH (Attach additional sheets if n	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	
•	TOTAL ALL PLANTS	10,859.19

I hereby certify that this report is true and complete to the best of my knowledge and belief.

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6-12-95 505 303-1070

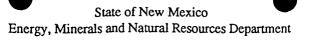
Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
	TRANSPORTER:	A.A. OILFIELD SERVICE		OILTILOOVERED
H-17813 H-17862	A.A. Oilfield A.A. Oilfield	Alpha Phi Crude Alpha Phi Crude	250.00 125.00	
H-17812	Lynx Petroleum TOTAL	Reed Sanderson Bty.	$\frac{25.00}{400.00}$	400.00
A-8561	TRANSPORTER: Dakota Resources	B & E TRANSPORTATION Big Eddy SWD	840.00	
A-8608	Dakota Resources	Otis SWD	120.00	
A-8569	Yates Petroleum	David Ross SWD	70.00	840.00
	TOTAL		1030.00	840. 00
	TRANSPORTER:	BRUTON SERVICES		
TEXAS	Amerada Hess	Plains Unit Battery	125.00	
TEXAS		ACV lease	57.50	
TEXAS	Klabzuba Oper. Co. TOTAL	FO Masten St Lse	<u>181.60</u> 364.10	309.10
	TOTAL			
	TRANSPORTER:	FLUID TRANSPORTS	10.00	
TEXAS	Shell Pipeline TOTAL	DC -1	10.00 10.00	10.0
	TOTAL			
	TRANSPORTER:	I & W TRANSPORTATION	000 00	
A-8562	Dakota Resources	Otis SWD	900.00 900.00	900.00
	TOTAL		300.00	300100
	TRANSPORTER:	LUCKY'S		
H-17822	Oxy, USA	Gou't U #1	100.00 100.00	100.0
	TOTAL		100.00	100.0
	TRANSPORTER:	McCasland Trucking		
H-17859	Biostar	Drinkard Station	377.70	
H-17864	Biostar	Drinkard Station	555.00	
H-17820	McCasland	Atha #1	260.00 130.00	
H-17838 H-17858	McCasland McCasland	Atha #1 Atha #1	120.00	
n-1/656	TOTAL	Aciia Fi	1442.70	1442.7
	mp. Manopulen	PATE TRUCKING		
TEXAS	TRANSPORTER: Barber	Pronghorn #634	95.00	
TEVWO	TOTAL	- 10119110111 # 004	95.00	85.0
meys o	TRANSPORTER:	POOL Station #7	140.00	
TEXAS	Shell Western E & P TOTAL	Station #1	140.00	0.0
II 17070	TRANSPORTER:	ROWLAND TRUCKING Drinkard Station	100.00	
H-17879 A-8599	Biostar Rowland	Springs SWD	238.75	
בבנס–מ	MOWIGING	phining our	233.73	



Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY (OIL RECOVERED BY TREAT	TING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
A-8516	TRANSPORTER: Rowland TOTAL	ROWLAND TRUCKING (CO Springs SWD	ONTINUED) 293.50 632.25	632.2
A-8563	TRANSPORTER: Dakota Resources TOTAL	SONNY'S Otis SWD	1000.00 1000.00	1000.0
	TOTAL GROSS BARRELS TOTAL NET BARRELS	; ;	6114.05	5719.0
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	<u>.</u>	;					Carrier No.		
Page	, 1		FLUID	TRANS	PORTS J	INC.		5/8	195
				(Name of	carrier)	(SCAC)			
		_	consignee's name or as otherwise pro		FROM: Shipper SHE	CL PIPE	E CINO	2' (ORP
			, <i>f</i>	2100:	Street HWY	1214			
		c	FR 66		City DENVI				
City FILJY	od!	State 1	Zip Cod	e v	24 hr. Emergency Cor	ntact Tel. No. 806			
Route		1	4	21			10 BBL Vehicle Number		
No.of Units & Container Type	НМ	Identification	BASIC: DES Proper Shipping Na Number (VN pr NA), Abckii	CRIPTION ime, Hazard Class, ng Group, per 172.10	1, 172.202, 172.203	TOTAL QUANTITY (Weight, Volume, Gallons, etc.)	WEIGHT (Subject to Correction)	RATE	CHARGES (For Carrier Use Only)
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Note — Where the rate required to state specific value of the property.	is dependent ally in writing	on value, shippers are the agreed or declared	I hereby declare that the content fully and accurately described name and are classified, packed	bove by proper shipping	COD	_Amt: \$	C.O.D. F PREPAI COLLEC	o 🖸	_
	ed value of t e shipper to b	the property is hereby be not exceeding	are in all respects in proper condition Highway & Water (DELETE NOT TRANSPORT) according to applic	orfortransport by E Rail E		ditions, if this shipment is to be de the consignor, the consignor s	Hivered to the TOTAL		
s	_ per		tional governmental regulations.	Signafure	freight and all-other tawful char	delivery of this shipment withou ges. gnature of Consignor)	t payment of FREIGHT I except whe night is che	n box at	ARGES sch box if charges are to be coffect
this Brit condition which s compora delivery	of Lading, the in of contents aid Carrier (the tion in posse at said desti	property described above in of packages unknown), ma e word carrier being undersition ession of the property under ination, if on its route, other	awfully filed fariffs in effect on the d n apparent good order, except as no arked, consigned, and destined as od throughout this contract as mear if the contract) agrees to carry to mise to deliver to another carrier on to all to any 0, said property over a	ited (contents and formicated above and gary person or its usual place of the route to said	said route to destination a service to be performed governing classification o Shipper hereby certific	nd as to each party at any time in hereunder shall be subject to all in the date of shipment es that he is familiar with all the and the said terms and condition	erested in all or any said pro the bill of lading terms and i a bill of lading terms and o	perly, that every conditions in the onditions in the	
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					DATE 5	8 95			

STYLE ESSIAN

Permanent post-office address of shipper

NON-HAZARDOUS WASTE MANIFEST AND WASTE OIL ACCOUNTING

POOL COMPANY	Manifest No. 0241
Part I TO BE COMPLETED BY GENERATOR	
Generator $5 \omega \epsilon P L$	
Generator 5 WEPL Address Plants / WAI City/State Denuar City	(2.6) 592 2183
City/State A PRIVATE C. 74	<u>(タック) ガタス タノタン</u> Telephone No.
	_
ORIGINATION OF WASTE	
Lease Name	
WASTE IDENTIFICATION	AMOUNT (BBLS, YARDS, TONS, ETC.)
·	
CERTIFICATION: The waste described above was consigned to the and correct to the best of my knowledge.	carrier named below. I certify that the foregoing is true
and correct to the best of my knowledge. Signature of Generator's Authorized Age	carrier named below. I certify that the foregoing is true ent Date and Time of Shipment
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER	ent Date and Time of Shipment
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER	ent Date and Time of Shipment
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER	ent Date and Time of Shipment
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address Transporter	Phone #
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State	Phone #
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State	Phone #
and correct to the best of my knowledge. Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State	Phone #
Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State CERTIFICATION: I certify that the waste in quantity above was re Signature	Phone #
Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State CERTIFICATION: I certify that the waste in quantity above was re Signature Part III TO BE SIGNED BY COMMERCIAL FACILITY	Phone #
Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State CERTIFICATION: I certify that the waste in quantity above was re Signature Part III TO BE SIGNED BY COMMERCIAL FACILITY Commercial Facility Name	Phone #
Signature of Generator's Authorized Age Part II TO BE COMPLETED BY TRANSPORTER Transporter Address City/State CERTIFICATION: I certify that the waste in quantity above was re Signature Part III TO BE SIGNED BY COMMERCIAL FACILITY Commercial Facility Name	Phone #

Signature of Facility Agent

5-23-95

Date



NON-HAZARDOUS WASTE MANIFEST AND WASTE OIL ACCOUNTING

POOL COMPANY	Manifest No
Part I TO BE COMPLETED BY GENERATOR	
Generator SWCPI	
Address PLAINS HIWAY. City/State Denver Dety Tx.	(800 592 21 93 Telephone No.
J.,	
ORIGINATION OF WASTE	
Lease Name U.U. Stn	
WASTE IDENTIFICATION	AMOUNT (BBLS, YARDS, TONS, ETC.)
Fluids & Solids.	75 13/s.
CERTIFICATION: The waste described above was consigned to the ca	rrier named below. I certify that the foregoing is true
and correct to the best of my knowledge.	
flow Blend	5-23.95
Signature of Generator's Authorized Agent	Date and Time of Shipment
Part II TO BE COMPLETED BY TRANSPORTER	
Transporter Post Co. (VT 111)	Phone # 592 - 358 (/
Address East wagon trail Rd.	Truck Lic. # 2 D F 8 5 7
City/State Denuer (1) ty tx, 79325	
City/State Denuer (179 18 1 7/3 23	Trailer Lic. # <u>\\\/ 4/ 638</u>
CERTIFICATION: I certify that the waste in quantity above was recei	wed by me for chinment to the above dectination
OLITHI IOATION. I certify that the waste in quantity above was received	(-) (-)
Signature	Date
	Date
Part III TO BE SIGNED BY COMMERCIAL FACILITY	
Commercial Facility Name	
Site Address	
City/State	
OFFITIEIOATION I A ANTALIA	e a grande de la companya de la comp
CERTIFICATION: I certify that the waste described in Part I was rece	
Yearle tally	<u> </u>
Signature of Facility Agent	Date

, , ,					
PART I:	Generator Address City/State	Allerada Herr Plains Box	79355	(\$0 \$\frac{456-55}{100000000000000000000000000000000000	27
ORIGINATION OF	WASTE:			1	•
Operations Center		·	R	RC No. 68487	
Property Name	Dlains (Woll, Ti	List Battery, Piera, Facility)			
		(DZA) GOTTE BASTELESSTA	is series substitutes	fauly new Europe and the second	
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeten BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (Water) Sludge (Petroleum)	Splil Clean- Storm Water Used Conta Used Conta Used Luber Completion Completion I Other	uiners ulners Olls Solids	
CERTIFICATION:	below. I certify the	ped above is not hazardous pursuant to a foregoing if true and correct to the be	et of my knowledge.	Igned to the transporter named 12-55-12:00 A	763
PART II:	TRANSPOR	RTER: (To be completed in	n full by Transporter)	·	
CERTIFICATION:	L	DAMES City	TX, 19323 me for ehipment to the destinat	806-592-298 Telephone No. # 14. Truck No. Son below. -12-95-10, 30,	
	S) gradus	and Transports & Agent		THE STIP THE PACENCE	
PART III;	RECLAMA	TION SITE:			
	Name Address City/State	Controlled Recovery, Inc P.O. Box 369 Hobbs, NM 88241	:/Inland Products		
CERTIFICATION:	I certify that the v	visite described in Part I was received b	ly me via the transporter descrit	bed in Part II.	
	Sintel	ture of Facility Append		Data and Time Received	

QOLDENROO COPY - Transpor

PART I:	Generator Address City/State	Amerada He Flains, Bex 7/2 Plains, Jefan	55 Corp.	(806) <u>456-5522</u> Telephone No.	
ORIGINATION OF	WASTE:				•
Operations Center		- 0.1		RRC No. 60407	7
Property Name		VS West Batt			
		NO AMOUNT BARTE DE VAN	SECURITY OF THE	asaunda et calesa a	
Commercial/Site Waster Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	The waste descrit	Oity Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Skudge (Water) Sludge (Petroleum)	Spill Clee Storm W. Used Co Used Co Used Lut Completic Completic Other	an-up & Debris ater Run-off ritainers intainers be Oils ion Solids on Liquids onalgned to the transporter named	
and the second second	GUT	Generator's Authorized Agent	toring knowledge.	S-12-95- 12 Docks and Time of Shipment	ice AM
PART II:	TRANSPOR Name Address City/State	BRULON Service BOX 1136 Denyer (1t, 1x)		706-592- Telophone No.	-2981 -
CERTIFICATION:		reade in quantity above we's received by r	me for shipment to the dest	بيد و سيست بد	:30 A.M -
PART III:	RECLAMA [*]	TION SITE: Controlled Recovery, Inc.	/Inland Products		·
	Address City/State	P.O. Box 369 Hobbs, NM 88241			
CERTIFICATION:	I certify that the v	raste described in Part I was received by	r me via the transporter des	scribed in Part II,	
	Şignei	ture of Facility Agent		Debe and Time Received	

PART I:	Generator KAIABZUBT Open Address 930 west 1st street (100 336 - City/State Fort Warth, TX 16/02 Telephone No.	5/3/
ORIGINATION OF !	WASTE: 69880	
Operations Center	KIABZUBA Oper Co, RRC No. 64600	S
Property Name	(Well, Tank Bettery, Plant, Facility)	
	HIT CONTROL OF A COUNTY BARBONS PARTY FOR THE STATE OF TH	3
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)	Plant Waste Water Storm Water Run-off Produced Sand Used Containers Produced Water Used Containers Used Lube Oils	
CERTIFICATION:	The waste described above is not instructions pursuant to 40CFR Part 261 and was consigned to the transporter named below. I certify the foregoing is true and correct to the best of the branchedge. Flancia Davis Dry Signature of Generator's Authorized Agent Dete and Time of Shipment	
PART II:	TRANSPORTER: (To be completed in full by Transporter)	'
	Name Briton Service Co 906-592- Address Box 1/36 Tetophone No. * City/State Danger City TX 79323 Truck No.	
CERTIFICATION:	I centify that the weste in quantity above was received by me for shipment to the destination below.	ooks
PART III:	RECLAMATION SITE:	\rc.
	Name Controlled Recovery, Inc./Inland Products Address P.O. Box 369 City/State Hobbs, NM 88241	\
CERTIFICATION:	I certify that the waste described in Part I was received by me via the transporter described in Part II. Signature of Facility Agent Date and Time Received	110 fm mst

	UN-MACA!	ADOOS MASIE MA	THE LOID	Old HOLLE.	
, , , , , , , , , , , , , , , , , , ,	Generator Address City/State	KALABZUI 930-West Bel Worth	3A 0 1 ^{s+} Street 7x 761	<u>e</u> e1 <u>(</u> (8	17 <u>336-57</u> 5 Telephone No. 5041 M. Rober
ORIGINATION OF A	NASTE:			`	JOHA M, Rober
Operations Center	KLAB	ZUBA Oper C	<u>7</u>	RRC	No. <u>64683</u>
Property Name		Stin SSt. rik Bettery, Plent, Facility)	<u>L</u> Se		
	NO COLUMN	OZ OWODOWY DANIES		evertiesev	(18) E / / / L L L L L L L L L
Commercial/Site Waste Orlled Solids Orlled Pit Liquids Filter Elements General Refuse H2S Scavengers/Sweeten BS&W/Crude (Tank Bottoms)		Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Skudge (Water) Sludge (Petroleum)		Spill Clean-up & Storm Water Rused Containers Used Containers Used Lube Olls Completion Solid Completion Liquid Other	p-off
CERTIFICATION:	FRANCIE	ed above is not hazardous pursual foregoing is true and correct to the DA UIS BOX Generator's Authorized Agent			to the transporter named
PART II:	TRANSPOR	TER: (To be complete	ed in full by Tr	ansporter)	
	Name Address City/State	Box 1136 Denve & City	TX 79	323 -	806-592-291 Teloptione No.
CERTIFICATION:	501	atte incluentity above was receive	d by me for shipmer	nt to the destination be	Truck No.
PART III:	RECLAMAT	ION SITE:			
	Name	Controlled Recovery.	Inc/inland P	roducta	
	Address City/State	P.O. Box 369 Hobbs, NM 88241			

HATTE CARGINAL - CAL YELLOW COPY - CAL PRIK COPY - Generator GOLDENAROO COPY - Transporter

Signature of Facility Agent

175

Dale and Time Received

PARTI:	Generator Address City/State	KA LABZUBA 930 West 1st Steet Fort Worth - 76102	OPer. [817] 336-5757 Tolophone Na RoBerts
ORIGINATION OF	•		JOHN M. KOISEW
Operations Center	KLAP	37,4BA Open.	Co RRC No. 44683
Property Name		MASTEN 5'ST, LSC ank Bendery, Plent, Facility)	
		DEPOSITE EN LES CONSTRUCTION	PROVED CHESTO DE LA CARROLLA DEL CARROLLA DEL CARROLLA DE LA CARRO
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Fitter Elements General Refuse H2S Scavengers/Sweeter BS&W/Crude (Tank Bottoms)		Otty Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Skudge (Water) Sludge (Petroleum)	Spill Clean-up & Debris Storm Water Run-off Used Containers Used Containers Used Lube Oils Completion Solids Completion Liquids Other
CERTIFICATION:	FRANCIE	bed above is not hazardous pursuant to 40CFR Par is foregoing is true and correct to the best of my know DAUIS BUS BUS BUS FOR Generator's Authorized Agent	1 261 and was consigned to the transporter named owledge. 1.30 P.M 54-95 Date and Time of Shipment
PART II:	TRANSPOR	TTER: (To be completed in full by	Transporter)
	Name Address City/State	Brito Service Do Bóx 1136 Densea City TX	79323 Truck No.
CERTIFICATION:		este in quantity above was received by me for ahip	ment to the destination below, 1.30. P.M 5.4 - 95 Date and Time Received
PART III:	RECLAMA	TON SITE:	
	Name Address City/State	Controlled Recovery, Inc./inland P.O. Box 369 Hobbs, NM 88241	i Products
CERTIFICATION:	I certify that the v	visible described in Part I was received by me via the	e transporter described in Part II.
	Signal	ture of Facility Agent	Dedu and Time Received

NON HAZARDOUS WASTE MANIFEST AND WASTE OIL ACCOUNTING

PART I TO BE COMPLETED BY GENI	ERATOR
Generator <u>Baker</u>	
Address 2815 Louing	ton Huy. Phone: (505) 392-5516
City/State Hobbs NM	el.
ORIGINATION OF WASTE:	Lease Name: PRinghorn Lse, # 634
Produced Water Oil Base Mud Water Base Mud W.O./Compl. Fluid Pit Sludges Net Oil Tank Sludges Cleanup Water Other: CERTIFICATION: The waste describe	Sands/Solids Fresh Water Pit Water Gas Plt. Water Salvage SB&W Iron Sponge Facility Water Oil Contaminated Soil:
named below. I certify that the best of my knowledge.	foregoing is true and correct to the
Signature of Generator's	5-31-95-8004m Date & Time of Shipment
Signature of Generator's Authorized Agent	Date & Time of Shipment
TO BE COMPLETED BY TRANSPORTER: Bruton Ser Address : P.O. BOX CITY/STATE : Denver Cit	rvice Co., Inc. PHONE: 806-592-2981 1132 TRUCK LIC#: TRUCK LIC#:
CERTIFICATION: I certify that the received by me for	ne waste in quantity above was or shipment to the above destination.
Signature:	uh wei Date:
PART III. TO BE SIGNED BY COMMERCE Commercial Facility Name: Control	CIAL FACILITY UND RECOVERY INC. (RI)
Site Address:	City/State:
CERTIFICATION: I certify that the received by me via the transport	e waste described in Part I was er described in Part III.
Signature of Facility Agent:	Date: 5-31-95

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 OIL CONSERVATION DIVISIONATING PLANT OPERATOR'S MONTHLY REPORT Form C-118 Revised 4-1-91 Sheet 1

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Controlled Recovery Inc. Report of_

1000 Rio Brazos Rd, Azicc, NM 87410

Month & year_

April 1995

P.O. Box 369

Hobbs, NM 88241-0369

	OIL BEGINNING OF MONTII (Attach additional sheets if	
, PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3556.65
	TOTAL ALL PLANTS	3556.65
TOTAL PIPELINE	OIL RECOVERED (Attach additional sheets if necessary)	3220.03
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	7163.12
	TOTAL ALL DI ANTIS	7163.12
D.D. W.Chron	TOTAL ALL PLANTS	/103.12
	PIPELINE OIL (Attach additional sheets if necessary) TO	BARRELS
FROM	10	BARRELS
Controlled Recovery Inc. Transfer from Oil Treating Plant to Disposal Area	Petrosource Partners Ltd. Water Solids	1568.18 .00 870.00
TOTAL STOCKS PIPI EL	TOTAL ALL PLANTS [NE OIL END OF MONTH (Attach additional sheets if nec	2438.18
PLANT NAME	LOCATION LOCATION	BARRELS
The second secon		
Controlled Recovery Inc.	Halfway Disposal	

I hereby certify that this report is true and complete to the best of my knowledge and belief.

6-1-95

505 393-1079

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY	OIL RECOVERED BY TREA	TING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17767 H-17747 H-17724	TRANSPORTER: A.A. Oilfield Service A.A. Oilfield Service Texaco TOTAL	A.A. OILFIELD SERVICE State AB SWD #1 State AB SWD #1 Buckeye Gas Plant	490.00 125.00 86.70 701.70	365.20
н-17804	TRANSPORTER: Dakota Resources TOTAL	B & E TRUCKING Big Eddy SWD	516.75 516.75	408.00
TEXAS	TRANSPORTER: Shell Western E & P TOTAL	CLAY TANK TRUCKS, INC. BRU Battery Tank #3	270.00	270.00
н-17756	TRANSPORTER: Devon TOTAL	GANDY CORPORATION Denton SWD #1	2330.00 2330.00	2330.00
H-17751 WATER	TRANSPORTER: Texaco Grace TOTAL	I & W TRANSPORTATION Cotton Draw Bat 1 Salty Bill	91.80 390.00 481.80	91.80
H-17732 H-17803 TEXAS TEXAS TEXAS	TRANSPORTER: McCasland McCasland Wilson Diposal Systems Scurlock Permian Scurlock Permian TOTAL	McCASLAND TRUCKING Atha #1 Atha #1 Monahans/Peyote Andrews Station Monahans Station	259.40 263.44 89.25 210.00 285.00 1107.09	1107.09
A-8463	TRANSPORTER: Old Loco Oil TOTAL	OK HOT OIL SERVICES Reclaiming Station	60.00	10.00
TEXAS TEXAS	TRANSPORTER: Shell Western E & P Shell Western E & P TOTAL	POOL TRUCKING NWCF Battery D GWCF W & R Station	978.25 355.00 1333.25	1333.25
A-8426 A-8477 A-8427 A-8452 H-17726	TRANSPORTER: Rowland Rowland Rowland Rowland Rowland TOTAL	ROWLAND TRUCKING BKE BKE Springs Springs RA	409.08 100.00 293.09 299.19 136.42 1237.78	1137.78

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	Y OIL RECOVERED BY TRE	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
TEXAS	TRANSPORTER: Scurlock Permian TOTAL	XL TRANSPORTATION Andrews Station	110.00	110.00
	TOTAL GROSS BARRELS TOTAL NET BARRELS		8148.37	7163.12
	#			

DISTRICTI P.Q.Box 1980, Hobbs, NM 88241-1980

P.O. Drawer DD, Artesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Departs

'95 AP OIL CONSERVATION DIVISION
PART BOX 2088
Santa Fe, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 4-1-91 Sheet 1

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled	d Recovery Inc.		Month & year_	March 1995
Address_	P.O. Box 369	Hobbs, NM	88241-0369	,	
		·			

TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional sheets i	f necessary)
. PLANT NAMÉ	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	9,394.59
,	TOTAL ALL PLANTS	9,394.59
	E OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3,734.35
	TOTAL ALL PLANTS PIPELINE OIL (Attach additional sheets if necessary)	3,734.35
FROM	TO	BARRELS
Controlled Recovery Inc. Tranfer from oil treating plant to Disposal area.	Petro Source Partners, LTD. Water Solids	3,622.29 4,500.00 1,450.00
	TOTAL ALL PLANTS	9,572.29
TOTAL STOCKS PIPLE	LINE OIL END OF MONTH (Attach additional sheets if ne	cessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3,556.65
	TOTAL ALL PLANTS	3,556.65

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Signature

Annette Curiel, Office Manager

505 393-1079

Printed Name & Title

Telephone No.

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY (OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17705 H-17702 H-17697	TRANSPORTER: A.A. Oilfield GPM GPM TOTAL	A.A. OILFIELD SERVION State AB SWD Lynch Booster Lea Booster	125.00 125.00 <u>210.00</u> 460.00	270.0
H-17633 H-17689 H-17674	TRANSPORTER: BTA I&W Transportation Charles B.Gillespi TOTAL		45.90 1055.00 <u>321.10</u> 1422.00	1166.
H-17701	TRANSPORTER: WJC, Inc. TOTAL	LUCKY SERVICES VF Cox #1	120.00 120.00	120.
H-17672 H-17678 TEXAS H-17670 H-17717	TRANSPORTER: & Midcontinent Unocal McCasland McCasland TOTAL	McCASLAND SERVICES Adobe Fed 1 & Belco Fed 1 & 2 Midland Tank Farm Atha #1 Atha #1	70.00 1240.00 257.90 294.01 1861.91	1731.
A-8356 A-8329 A-8386	TRANSPORTER: R&B Operating Rowland Rowland TOTAL	ROWLAND TRUCKING Brantley Comm #1 Springs SWD Springs SWD	136.40 160.00 <u>149.34</u> 445.74	445.
:	TOTAL GROSS BARREL TOTAL NET BARRELS	s	4309.65	3734.
	·			

PART I:		or Hancal	1. 4		9]Ara 4.01
	City/Stat	P.O. Act 15 te Ums, TX 75	790		3 1943-8686 Telephone No.
		•	-F-374	*************************************	4
ORGINATIO	ON OF W	ASTE:			
Operations	Center	UAN, TEXA	5	RRC N	0
Property N	eme	Minken To	CAL FRE 10 Rattery Plant, Pacility)		·
WASTE IDE	NTIFICAT	UOMA DIA NON	nt (Barrels, Yai	rds, tons, cuft.l	BS., UNITS, ETC.)
Commercial	Site Waste	c	hily Waste	Spill Cla	An—họ
Drilled Solid	s		ant Waste Water	& Del	-
Drilled Pit Li	iouide		roduced Sand	Storm W	ater Runoff
Filter Elemen	•	-	roduced Water	Used Ca	***************************************
General Refu			inste	Used Lu	
H25 Souveng			cale		ion solids
Sweetening			hidge (water)		ion liquids
PLAW/CRUDE			ludge (Petroleum)	Other	
(TANK BOT		- 120 S	in the franchiscon and	The state of the s	
CERTIFICA	HON;	Lary Ouiss	the the foregoing is true an	nat to 40 CFR Part 261 and w id correct to the best of my ke	<u> </u>
		_	rator's Authorized Agent		Date and time of Shipmant
PART II:	TRANSP	ORTER: (To be	completed in full	by Transporter)	
	Name	Mc Casbon	Seevice Inc.		505-394-2581
	Address	P.O. Box 9)	-	Telephone No.
	City/Stat	Eunice NM	8833		·- 4/
	•••		->15-6-04	Property and the Control of the Cont	Track No.
CERTIFICA	TION:	I certify that the weste	a Cuantity above was receiv	red by me for shipment to the	destination below.
		Albel 1	anten -		- 3-1.95
			raposter's Agest		Date and time of Received
PART III;		MATION SITE:			
	Name		ed Recovery, Inc.	fluitantid Products	<u> </u>
	Address		.O. Box 369		-
	City/Stat	e <u>H</u>	obbs, NM 68241		
CERTIFICA	TION:	I certify that the practe of	bearined in Part I was repair	iyed by === via the transports	r described in Fart II.
	•	all the the	1		3-1-95
		Signature of	Facility Agent		Date and time of Received

PART I:		or ilancal			
	Address	P.O. Box	25 W		1903 1963-8686
	City/Sta	te Ums TX	75790		Telephone No.
ORGINATI	ON OF W	ASTE:			
Operations	s Center	VAN, TE	CAS		RRC NO.
Property N	lame		Tank Farm		
WASTE ID	ENTIFICAT	TON AND AM	OUNT (BARRE	LS, YARDS, TON	S, CUFT, LBS, UNITS, ETC.)
Commercial	/Site Waste		Oily Waste		Spill Clean-up
Drilled Solid	İs	*************************************	Plant Waste Wa	ater	& Debris
Drilled Pit L	iquids		Produced Sand		Storm Water Runoff
Filter Eleme	nts		Produced Water	£ .	Used Containers
General Ref	้นระ		Rinsate		Used Lube Oils
H2S Scaven	gers/		Scale		Completion solids
Sweetening			Studge (water)		Completion liquids
BS&W/CRUD!	E		Sludge (Petrole	um)	Other
(TANK BOT	TOMS)	120 Bls		-	
		Lary Ours	tily the the foregoing	is true and correct to the	Part 261 and was consigned to the transporter to best of my knowledge, 3-1-9 5 Date and time of Shipment
PART II:	TRANSP	ORTER: (To	be completed	in full by Trans	sporter)
	Name	Mc Cash	on Service	Tor.	505 374-258
	Address	P.O. Box	99	Alle J. Herring	Telephone No.
	City/State	Eunice, N	m 88331		× 58
					Truck No.
CERTIFICA	ITION:		nte jah quantity above w	ras received by me for 1	hipment to the destination below.
	سه	Kobert	Anderser		3-1-95
		Signature of	Transporter's Agent		Date and time of Received
PART III:	RECLAM	ATION SITE:			
	Name		olled Recovery	, inc./luland Pi	en fra dec
	Address		P.O. Box 369		
	City/State	,	Hobbs, NM 8		
OFDYIMA :	~		Ω		
CERTIFICA	HON:	I certify that the was	te described in Part I	was received by me via	the transporter described in Part II.
		OH.	WVYCY		3-V1-45
		2@miles	e of Facility Agent		Date and time of Received
WHETE CREEDIAL	321	YELLOW COFY-CH	n	HK COPY-General	GOLDEN ROD COTY-Tremporter

PARTI: G	ienerato	ribacal	
A	ddress	P.O. Box 25W	(903)963-8686
C	ity/State	E UMA, TX 75790	Telephone No.
ORGINATION	OF WA	ASTE:	
Operations Co	enter	VAN, TEXAS	RRC NO.
Property Nam	n e .	Minken Tank Farm (Well, Tank Buttery, Plant, Pacility)	
WASTE IDEN	DFICAT	ION AND AMOUNT (BARRELS, YARDS, TO	NS, CU.FT.LBS., UNITS, ETC.)
Commercial/Site	a Waste	Oily Waste	Spill Clean—up
Drilled Solids	· // • • • •	Plant Waste Water	& Debris
Drilled Pit Liqui	ide	Produced Sand	Storm Water Runoff
Filter Elements		Produced Water	Used Contriners
General Refuse		Rinsate	Used Lube Oils
H2S Scavengers		Scale	Completion solids
Sweetening	- '	Shidge (water)	Completion liquids
BSAWKRUDE		Sludge (Petroleum)	Other
(TANK BOTTOM	مر. (۵۶	120	
CERTIFICATIO	ON:	The waste described above is not bezardous pursuant to 40 CI cusped below. I certify the the foregoing is true and correct to all a Court and Court and Signature of Generator's Authorized Agent	
PART II: TI	RANSP	ORTER: (To be completed in full by Tra	nsporter)
N	ame	Mc Cashon Service Inc.	505-394-258
A	ddress	P.O. Bet. 99	Telephone No.
C	ity/State	Eunice, NM 88331	<u> 57</u>
	-		Truck No.
CERTIFICATIO	ON:	I certify that the waste in quantity above was secreived by me \$	by shipment to the destination below.
		TONNY MOTES	V 3-1-45
	-	Signature of Transporter's Agent	Date and time of Received
PARTIII: R			Maria Control of the
4 CALL 1834 1 1 14	ECLAM		
	ECLAM amo	IATION SITE: Controlled Recovery, Inc./Inkand	Products
N A	amo ddress	ATION SITE: Controlled Recovery, Inc./Industrial P.O. Box 369	Products
N A	amo	ATION SITE: Controlled Recovery, Inc./Industrial P.O. Box 369	Products
N Ad C	amo ddress ity/State	ATION SITE: Controlled Recovery, Inc./Industrial P.O. Box 369 Hobbs, NM 88241	
N Ad C	amo ddress ity/State	ATION SITE: Controlled Recovery, Inc./Industrial P.O. Box 369	
N A	amo ddress ity/State	ATION SITE: Controlled Recovery, Inc./Industrial P.O. Box 369 Hobbs, NM 88241	

PART I:	Generat	tor UNDCal			
	Address	P.O. Box 25 11)	(^Q C3	1963-8686
	City/Sta	ite Uan, TX 757	<u> </u>		Telephone No.
ORGINAT	ION OF W	ASTE:			
Operation	s Center	VAN, TEXAS		RRC NC	
Property i	Name	Miolano Tan (Well, Tank Ba	Lery Plant, Facility)		
WASTE ID	ENTIFICAT	TION AND AMOUN	(BARRELS, YARD	S, TONS, CU.FT.,LB	S., UNITS, ETC.)
Commercia	l/Site Waste	Oils	Waste	Spill Clear	1-10
Drilled Soli	•		it Waste Water	& Debr	-
Drilled Pit 1			luced Sand		ter Runoff
Filter Elem	•		luced Water	Used Con	
General Re		Rins		Used Con-	
H2S Scaven		Scal		Completio	
Sweetenin	•		ge (water)		n liquids
BS&W/CRUD	•		ge (Water) ge (Petroleum)		a admos
(TANK BO	-	-130	Re (1 entotenni)	Other	
		Lary Durestrut		orrect to the best of my kno	3-3-95
		Signature of Generals	or's Authorized Agent		Date and time of Shipment
PART II:	TRANSF	PORTER: (To be c	ompleted in full b	y Transporter)	
	Name	Mc Caskno !	Service Inc.	*	505-394-2581
	Address	P.O. Box 99			Telephone No.
	City/Stat	le Eunice, Nm 8	18.131		•
					Truck No.
CERTIFICA	ATION:	I ceptify that the waste in q	uapfity above was received	by me for shipment to the d	
	~	Retreit	Inderso -		. 7-3-95
	· · · · · · · · · · · · · · · · · · ·	Signature of Trans	carter's Agent		Date and time of Received
PART III:	DCOL AL	AATION OITE			
rmniii,		MATION SITE:	-		
	Name Address		Recovery, Inc./In	land Products	-
	City/Stat		. Box 369	·····	•
	Çity/Stat	HOL	bs, NM 88241		-
CERTIFICA	ATION:	I certify that the warte desc	ribed in Part I was received	by me via the transporter o	lescribed in Part II.
		Signature of Fa	cility Agent		Date and time of Received
vaite original.	-CRI	YELLOW COPY-CRI	SDIK COPY-Go	terrici GOLDEN ROD	COTY-Transporter

•.5

PART I: Generator NOCO Address P. O. Bot 25 W City/State Van TX 75 790				03 <u> 963-8686</u> Telephone No.
ORGINATION	ON OF W	ASTE:		
Operations	Center	VAN, TEXAS	RRC	NO
Property N	ame	Miolano Tank Farm (Well, Tank Battery, Plant, Fa		•
WASTE IDI	ENTIFICAT	ION AND AMOUNT (BARRE	LS, YARDS, TONS, CU.FT.	,LBS., UNITS, ETC.)
Commercial Drilled Solid Drilled Pit L Filter Eleme General Ref H2S Scaveng Sweetening BS&W/CRUDI (TANK BOT	/Site Waste is iquids nts use gers/ TOMS)	Oily Waste Plant Waste W Produced Sand Produced Wat Rinsate Scale Sludge (water) Sludge (Petrole 130 h.) The waste described above is not hazard named below. I certify the the foregoin Signature of Generator's Authorize ORTER: (To be completed	Spill C ater & E i Storm er Used C Used I Compl Compl Compl Compl cum) Other lous pursuant to 40 CFR Part 261 and g is true and correct to the best of my	dean-up Debris Water Runoff Containers Lube Oils etion solids etion liquids d was consigned to the transporter
	Name Address	McCaslana Service P.O. Box 99 Eunice, NM 88231		.505-394-2581 Telephone No.
CERTIFICA	ITION:	I certify that the waste in quantity above	<u>~</u>	Truck No. the destination below. 3-3-95 Date and time of Received
PART III:	RECLAM Name Address City/State	P.O. Box 36		
CERTIFICA	TION:	Learnify that the waste described in Part Signature of Facility Agent	I was received by me via the transpor	rter described in Part II. 3 3 - 2 5 Date and time of Received
white original—	CRI	YELLOW COPY-CRI	PDR COPY-Sense Not GOLDEN	ROD COTY - Transporter

PART I:	Address	P.C. Box 25 W P.O. Box 25 W P. UAN, TX 75790	(903 <u>)963-8686</u> Telephone No.
ORGINATIO	ON OF WA	ASTE:	
Operations	Center	VAN, TEXAS	RRC NO
Property Name Mink of Tank Farm (Well, Tank Battery, Plant, Facility)			
WASTE IDE	ENTIFICAT	ION AND AMOUNT (BARRELS, Y	ARDS, TONS, CU.FT.,LBS., UNITS, ETC.)
Commercial/A Drilled Solids Drilled Pit Li Filter Elemen General Refu H2S Scaveng Sweetening BS&W/CRUDE (TANK BOTT	s iquids nts use ers/	Oily Waste Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (water) Sludge (Petroleum)	Spill Clean – up & Debris Storm Water Runoff Used Containers Used Lube Oils Completion solids Completion liquids Other
CERTIFICA	TION:	The waste described above is not hazardous punamed below. I certify the the foregoing is true for the foregoing in the foregoing is true for the foregoing in the foregoing is true for the foregoing in the foregoing in the foregoing is the foregoing in the fore	3-3-95 3'.4S
PART II: CERTIFICA	Name Address City/State	Tommy MoTes	Telephone No. Touck No.
PART III:	Name Address City/State	I certify that the waste described in Parl I was r	eceived by me via the transporter described in Part II. 3-3-95
		Signature of Facility Agent	Date and time of Received

WHITE ORIGINAL-CRI

YELLOW COPY-CRI

PINK COPY-Generator

GOLDEN ROD COPY-Transporter

FAX NO. 1000004200	FAX	NO.	1505394258
--------------------	-----	-----	------------

P 01

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET

PART I:	Generator	Nocal	·····		- 1
City/State Upo TX 75790				(903)963-8686 Telephone No.	
	N OF WASTE			. 	• • • • • • • • • • • • • • • • • • • •
				Parenth u.s.	_
Operations (TELICAL TOP	N, Texas		RAC N	D
Property Nar	me <u>M</u>	Okan Tank (Well Tank Berre			• • • •
WASTE IDEN	TIFICATION	AND AMOUNT (BARRELS, YARD	S, TONS, CUFT, L	BS., UNITS, ETC.)
Commercial/Si	te Waste	Oily V	Vaste	Spill Cles	10-m
Drilled Solids	***************************************		Waste Water	& Del	- 1
Drilled Pit Liqu	uids		ced Sand		ater Runoff
Filter Elements			ced Water	Used Co.	·
General Refuse	· 	Rinsat		Used Lui	
H28 Scavenger		Scale		Completi	
Sweetening	•		(Water)		on liquids
BSAW/CRUDE		Studen	(Petroleum)	Other	
(TANK BOTTO	MO - 124	OBBIS Studge			
	-24	DAY OLVER	Authorized Agent		3-3-9 S 81.30 Date and time of Shipment
PART II: T			npleted in full by	/ Transporter)	
N	lame Ma	Coshin S	guice Inc.	. ,	.585-384-3581
Ā	ddress D.C). Box 99	<u> </u>	_	Telephone No.
Ċ	ity/State F	nice, No 88	23)	 #	57
ERTIFICATI		-	dity above was received by	y me for shipment to the	
		andy hole			
		Significate of Transport	et's Agrat	<u> </u>	Date and time of Received
'ART III; R	ECLAMATIO	N SITE:			
	amo	Controlled R	eccyary, Inc./lal	and Products	
	ddress		XX 369		· ·
Ċ	ity/State	Hobbs	s, NM 88241		-
ERTIFICATION	ON: I carrily	they the water describe	ed in Part I was received t	by me via the transporter	described in Part II.
٠.		4 Houses	<u>n</u>	 .	3-3-46
		Signature of Facility	ty Agust		Date and time of Remived
ALTS CARCEDON' - CART	TELLOW	CDF7-CBI	FRE COPY-5		D COST - This sporter

TOTAL P.01

PART I:	Address	tor Undecol P.O. Bot 25 W Ite Uan, TX 75 790	(903) <u>963-8686</u> Telephone No.
ORGINAT		•	
Operation	s Center	VAN, TEXAS	RRC NO.
Property N	Name	Miolano Tank Farm (Well, Tank Battery, Plant, Facility)	·
WASTE ID	ENTIFICA	TION AND AMOUNT (BARRELS, YARD	S, TONS, CU.FT.,LBS., UNITS, ETC.)
Commercia Drilled Soli Drilled Pit I Filter Elem	Liquids	Plant Waste Water Produced Sand	Spill Clean-up & Debris Storm Water Runoff
General Re H2S Scaven	fuse igors/	Produced Water Rinsate Scale	Used Containers Used Lube Oils Completion solids
Sweetening BS&W/CRUD (TANK BOT	E	Sludge (water) Sludge (Petroleum)	Completion liquids Other
CERTIFICA	ATION:	The waste described above is not hazardous pursuant to named below. I certify the the foregoing is true and co	to 40 CFR Part 261 and was consigned to the transporter percet to the best of my knowledge.
		Signature of Generator's Authorized Agent	Date and time of Shipment
PART II:	Name Address	ORTER: (To be completed in full by Mc Cas land Sequice Tro. P.O. Box 99 to Eurice, am 88231	•
CERTIFICA	ATION:	I certify that the waste in quantity above was received to	Truck No. by me for shipment to the destination below.
Part III;	RECLAM Name Address City/Stat		land Products
CERTIFIC/	ATION:	I certify that the waste described in Part I was received Signature of Facility Agent	37-95
white original.	-CRI	YELOW COTY-CRI PDNK COTY-Gen	Date and time of Received

CKIVINĒHNU

	ator UNDCOL	(000) (000 000)
City/S	ss P.O. Bot 25 W tate ()AN; TX 75790	(903) <u>963-8686</u> Telephone No.
ORGINATION OF	•	
Operations Center	VAN, TEXAS	RRC NO
Property Name	Miokan Tank Farm (Well, Tank Battery, Plant, Facility)	•
WASTE IDENTIFIC	ATION AND AMOUNT (BARRELS, YARDS,	TONS, CU.FT.,LBS., UNITS, ETC.)
Commercial/Site Was	teOily Waste	Spill Clean-up
Drilled Solids	Plant Waste Water	& Debris
Drilled Pit Liquids	Produced Sand	Storm Water Runoff
Filter Elements	Produced Water	Used Containers
General Refuse	Rinsate	Used Lube Oils
H2S Scavengers/	Scale	Completion solids
Sweetening	Sludge (water)	Completion liquids
BS&W/CRUDE	Sludge (Petroleum)	Other
(2MOTTOB MAAT)	V 130_	
CERTIFICATION:	The waste described above is not hazardous pursuant to a named below. I certify the the foregoing is true and corre	· · · · · · · · · · · · · · · · · · ·
	Signature of Generator's Authorized Agent	Date and time of Shipment
PARTII: TRAN	SPORTER: (To be completed in full by	Transporter)
Name		<i>585</i> -394-2581
Addre	ss P.O. Box 99	Telephone No.
City/S	tate Funice, Nm 88331	w &/
		Truck No.
CERTIFICATION:	I certify that the waste imquantity above was received by	me for shipment to the destination below.
	- Alle Under	<u>~3-3-95</u>
	Signature of Transporter's Agent	Date and time of Received
PART III: RECL	AMATION SITE:	
Name		
Addre	ss P.O. Box 369	HG FTOGGES
Çity/Si		
PERTICIOATION.		
CERTIFICATION:	Territy that the waste described in Part I was received by	me vis the transporter described in Part II.
	Dogo	3-3-71
	Signature of Facility Agent	Date and time of Received
aute original-cri	YELLOW COPY-CRI PDIK COPY-Gazza	tor GOLDEN ROD COTY - Transporter

NON-HAZARDOUS WASTE MANIFEST/RUN TICKET

Address	tor UNDCOL S P.O. Box 25 W Ite UAN; TX 25790	(903 <u>)963-8686</u> Telephone No.
ORGINATION OF W	ASTE:	
Operations Center	VAN, TEXAS	RRC NO
Property Name	Minkan Tank Farm (Well, Tank Battery, Plant, Facility)	
WASTE IDENTIFICA	TION AND AMOUNT (BARRELS, YARDS	S, TONS, CU.FT.,LBS., UNITS, ETC.)
Commercial/Site Waste Drilled Solids Drilled Pit Liquids Filter Elements General Refuse H2S Scavengers/ Sweetening BS&W/CRUDE (TANK BOTTOMS)	Plant Waste Water Produced Sand Produced Water Rinsate Scale Sludge (water) Sludge (Petroleum)	Spill Clean—up & Debris Storm Water Runoff Used Containers Used Lube Oils Completion solids Completion liquids Other
	Signature of Generator's Authorized Agent	Date and time of Shipment
Name Address	ORTER: (To be completed in full by McCas land Service Inc. P.O. Box 99 to Eunice, NM 88231	505 394-2581 Telephone No.
CERTIFICATION:	I certify that the waste in quantity above was received b	Truck No. sy me for shipment to the destination below. 2-2-55 Date and time of Received
Name Address City/Sta	Hobbs, NM 88241	
CERTIFICATION:	Terrify that the waste departbed in Part I was received Signature of Facility Agent	by me via the transporter described in Part II. Date and time of Received
oute original—cri	YELLOW COFY-CRI FINK COFY-GAZ	

DISTRICT II

P.O.Box 1980, Hobbs, NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88211-0719

1000 Rio Brazos Rd, Azicc, NM 87410

DISTRICT III

State of New Mexico ergy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 875(4-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled Re	ecovery Inc.	Mont	h & yearFebrua	ary 1995
Address	P.O. Box 369	Hobbs, NM	88241-0369		

	OIL BEGINNING OF MONTH (Attach additional sheets if	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	5,734.83
Oil Skimmed from pits		833.00
	TOTAL ALL PLANTS	6,567.83
	OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4,067.65
	TOTAL ALL PLANTS	4,067.65
DELIVERIES I	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	OTO	BARRELS
Controlled Recovery Inc.	Petro Source Partners, Ltd.	1,240.89
	TOTAL ALL PLANTS	1,240.89
	INE OIL END OF MONTH (Attach additional sheets if nec	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	9,394.59

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager
Printed Name & Tide

3-10-95

505 393-1079

Telephone No.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DEDMIT T	4.	IL RECOVERED BY TREAT	GROSS VOLUME	NET BBLS, P.L.
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	SEDIMENT OIL	OIL RECOVERED
H-17619 H-17586	TRANSPORTER: A.A. Oilfield Texaco TOTAL	A.A. OILFIELD SERVION Alpha Phi Crude Plann NM AB Battery		
H-17635 H-17627	TRANSPORTER: Purvis Operating Purvis Oil Co. TOTAL	GANDY SWD Well H-5 Purvis SWD #5	200.00 <u>135.30</u> 335.30	
H-17624	TRANSPORTER: Conoco TOTAL	GOLD STAR MCA Battery #2	43.35 43.35	23.3
H-17652	TRANSPORTER: WJC, Inc. TOTAL	I & W TRANSPORTATION CE Brooks #2	66.50 66.50	66.5
H-17605 H-17625 H-17597 H-17593 TEXAS	TRANSPORTER: Arco McCasland McCasland Richard Coe Unocal TOTAL	McCASLAND SERVICES EL Steeler Atha #1 Atha #1 Government N2 Midland Tank Farm	35.00 239.70 244.05 38.00 1429.00 1985.75	
A-8308 A-8314 A-8287 A-8315 A-8288 H-17641 H-17631 H-17637 H-17620	TRANSPORTER: Rowland Rowland Rowland Rowland Rowland Pogo Rowland Meridian Cross Timbers TOTAL	ROWLAND TRUCKING BKE BKE BKE Springs SWD Springs SWD Battery 23 RA #1 State DS US Minerals Battery	123.00 140.00 139.44 365.20 272.51 30.00 399.10 70.00 30.00 1569.25	
	TOTAL GROSS BARRELS TOTAL NET BARRELS	5	4395.15	4067.6

DISTRICTI * P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico ergy, Minerals and Natural Resources Departs

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Anesia, NM 88211-0719 TUN DIVISION

DISTRICT III OIL CONSERVATION DIVISION

P.O. Box 2088

1000 Rio Brazos Rd, Aziec, NM 87410

COSanta Fc. New Mexica 87504 2000

TRIEABING-PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of

Controlled Recovery Inc.

Month & year_

January 1995

882/1-0369

TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTII (Attach additional sheets if r	necessury)
. PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4,350.59
	TOTAL ALL PLANTS OIL RECOVERED (Attach additional sheets if necessary)	4,350.59
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3,878.35
	TOTAL ALL PLANTS PIPELINE OIL (Attach additional sheets if necessary)	3,878.35
FROM	TO	BARRELS
Controlled Recovery Inc.	Petro Source Partners, LTD.	1,094.11
Transfer from oil treating plant to disposal area:	Water =	1,400.00
	TOTAL ALL PLANTS	2,494.11
TOTAL STOCKS PIPLEL	INE OIL END OF MONTH (Attach additional sheets if nece	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	5,734.83
	TOTAL ALL PLANTS	5,734.83

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager Drinted Name & Title

Telephone No.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17522 H-17518	TRANSPORTER: NATCO A.A. Oilfield TOTAL	A.A. OILFIELD SERVICE Hobbs yard inventory State AB SWD	95.00 <u>91.80</u> 186.80	96.00
A-8223	TRANSPORTER: Dakota Resources TOTAL	B&E TRUCKING Big Eddy #100 SWD	120.00 120.00	40.00
H-17509	TRANSPORTER: Arch Petroleum TOTAL	CHAPARRAL SERVICES CH Lockhard #6	90.00 90.00	90.00
H-17560	TRANSPORTER: Harvard Operation TOTAL	I & W TRANSPORTATION Dickinson Cattle Co.	320.00 320.00	<i>2</i> 75 . 00
H-17532 H-17501	TRANSPORTER: Breck Operating L.B. Simmons TOTAL	LUCKY SERVICES State SC Dennis Fed Battery	235.00 80.00 315.00	190.00
H-17546 H-17496 H-17488 H-17505 H-17489 H-17500	TRANSPORTER: McCasland Services McCasland Services Chevron Parabo Sandhills Petroleum TOTAL	Atha #1 Janda J Parabo SWD Monument Lack Unit	235.14 118.85 20.00 1485.00 100.00 105.00 2063.99	2043.99
A-8223 A-8232 A-8224 H-17520 H-17540	TRANSPORTER: Marathon Rowland Trucking Rowland Trucking Texaco Texaco TOTAL	ROWLAND TRUCKING COMP McMillian Fed Com #1 BKE Springs State AQ CVU Central Battery	PANY 100.60 271.24 411.12 120.00 330.00 1232.96	
	TOTAL GROSS BARRELS TOTAL NET BARRELS		4328.75	3878.35
·				

<u>DISTRICT I</u> P.O.:Box 1980, Hobbs, NM 88241-1980

DISTRICT II

State of New Mexico

Pergy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

OIL CONSERVATION DIVISION SERVE TON DIVISION

P.O. Box 2088

RECE. VED

Submit 2 copies to appropriate District Office by 15th of next

DISTRICT III 1000 Rio Brazos Rd, Aziec, NM 87410

P.O. Drawer DD, Anesia, NM 88211-0719

Santa Fe, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHS RIPPORT

All 8 sueceding month.

Report of Controlled Recovery Inc. Month & year December 1994

Address P.O. Box 369 Hobbs, NM 88241-0369

TOTAL STOCKS PIPELINE O	IL BEGINNING OF MONTH (Attach additional sheets	
. PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	5,758.53
	TOTAL ALL PLANTS IL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3,610.65
	TOTAL ALL PLANTS	3,610.65
DELIVERIES PI	PELINE OIL (Attach additional sheets if necessary)	
FROM	70	BARRELS
Controlled Recovery Inc. Transfer from oil treating to disposal area: water=	Petro Source	2,635.59 1,900.00
solids=		483.00
	TOTAL ALL PLANTS	5,018.59
TOTAL STOCKS PIPLELIN	E OIL END OF MONTH (Attach additional sheets if n	eccssary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4,350.59
	TOTAL ALL PLANTS	4,350.59

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Amette Civiel

Annette Curiel, Office Manager

Deinted Name & Title

1-10-95

505 393-1079

Telephone No.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME	NET BBLS. P.L.
NOMBER			SEDIMENT OIL	OIL RECOVERED
H-17431 H-17436 H-17483	TRANSPORTER: A.A. Oilfield A.A. Oilfield A.A. Oilfield	A.A. OILFIELD SERVICE State AB SWD #1 Alpha Phi Crude Plant Alpha Phi Crude Plant	125.00 125.00 350.00	405.00
	TOTAL		600.00	495.00
RRC#6236	TRANSPORTER: 2 Brazos Petroleum TOTAL	McCASLAND SERVICES Willard	260.00 260.00	260.00
H-17397	TRANSPORTER: I & W Transporation TOTAL	I & W TRANSPORTATION L.C. State #2	260.00 260.00	2 45 . 00
H-17433 H-17440 H-17478 H-17456	TRANSPORTER: McCasland Services McCasland Services McCasland Services McCasland Services	Atha #1 Atha #1	260.00 300.00 680.00 123.75	A.
H-17474	McCasland Services	Atha #1	110.00 1473.75	14 43.75
H-17510	TRANSPORTER: Merit Energy Co. TOTAL TRANSPORTER:	GANDY CORPORATION Susco State 1 CHAPARREL SERVICES	40.00	35.00
H-17403	Оху	West Dollar Hide	220.00	
H-17424 H-17416	0ху 0ху	West Dollar Hide West Dollar Hide	405.00	}
TEXAS	Oxy	W. Seminole San Andre		
	TOTAL		975.00	600.00
RRC#672	TRANSPORTER: 92 Placid Oil TOTAL	PATE Red Dog 1	<u>96.90</u> 96.90	96.9 0
	mp i vapanmpp -	DOUT AND TRUIGHTING COM	22.27	
A-8098	TRANSPORTER: Pogo	ROWLAND TRUCKING COMPUTED TRUC	90.00	
H-17454	Pogo	Calmon 3 Battery	130.00	i i
H-17405	Pogo	Pure Gold Battery	40.00	l.
H-17425	Texaco	CVU Battery	370.00	
	TOTAL		630.00	300.00
			İ	

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY (OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
RRC#27561	TRANSPORTER: Wilson SWD TOTAL	McCASLAND SERVICES West Texas Disposal	<u>180.00</u> 180.00	130.0
	TOTAL GROSS BARRELS TOTAL NET BARRELS		4515.65	36 10.6
		; .		
·				
	' :		-~	

DISTRICT I P.9 20x 1980, Hobbs, NM 88241-1980

P.O. Drawer DD, Artesia, NM 88211-0719

State of New Mexico ergy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

Santa Fe, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

ort of Controlled Recovery Inc.	Month & y	earNovember 1994
ress_ P.O. Box 369 Hobbs, NM	1 88241-0369	-
TOTAL STOCKS PIPELINE OIL	BEGINNING OF MONTH (Attach additional sho	pets if necessary)
PLANT NAME	LOCATION LOCATION	BARRELS
. PLANT NAME	LOCATION	DARGEES
Controlled Recovery Inc.	Halfway Disposal	8,232.22
	TOTAL ALL PLAY	NTS 8,232.22
TOTAL PIPELINE OIL	RECOVERED (Attach additional sheets if necess	
PLANT NAME	LOCATION	BARRELS
a more than the large distribution	DOUR TON	DAKKEW
Controlled Recovery Inc.	Halfway Disposal	3,039.75
	TOTAL ALL PLAN	rrs 3,039.75
DELIVERIES PIPE	ELINE OIL (Attach additional sheets if necessary)	
FROM	то	BARRELS
Controlled Recovery Inc. Transfer from oil treating	Petro Source	4,092.44
to disposal area:		1,421.00
	TOTAL ALL PLAN	TS 5,513.44
TOTAL STOCKS PIPLELINE	OIL END OF MONTH (Attach additional sheets	
PLANT NAME	LOCATION	BARRELS
· De dite in ditto		
Controlled Recovery Inc.	Halfway Disposal	5,758.53
	TOTAL ALL PLAN	rrs 5,758.53

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Ann Ann

Annette Curiel, Office Manager

505 393-1079



State of New Mexico Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY	OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17331 H-17358	TRANSPORTER: A.A. Oilfield A.A. Oilfield TOTAL	A.A. OILFIELD SERVIC State AB SWD #1 State AB SWD #1	110.00 115.00 225.00	225.00
A-8058	TRANSPORTER: Maco Industries TOTAL	B & E State 15 #1	100.00 100.00	60.00
RRC#640	TRANSPORTER: 15 North American Roy. TOTAL	BRUTON Harrison	100.00 100.00	100.00
H-17372 H-17393 H-17344 H-17394 H-17343 RRC#634	McCasland Services McCasland Services Parabo	McCASLAND SERVICES Pike Federal Atha #1 Atha #1 SWD Disposal CE Lamuiyor #30 Batt Beavers #1	70.00 260.00 980.00 510.00 ery 80.00 305.00 2205.00	1510.00
TEXAS TEXAS	TRANSPORTER: DCB Oil & Gas Placid Oil Co. TOTAL	PATE TRUCKING Brumley #1 Weaver #1	130.00 <u>70.00</u> 200.00	190.00
TEXAS	TRANSPORTER: Pride Pipeline TOTAL	PRIDE PIPELINE Crane station #24	379.75 379.75	269.75
H-17382 H-17380 A-8066 A-8052	TRANSPORTER: Pogo Pogo Pogo Pogo TOTAL	ROWLAND TRUCKING CO. Amex Battery Pure Gold Battery Mobil Fed Battery Cal Mon #2	10.00 90.00 170.00 <u>135.00</u> 405.00	
H-17330	TRANSPORTER: Jenex TOTAL	SONNY'S OILFIELD SER Hobbs Station	VICE 690.00 690.00	
	TOTAL GROSS BARRELS TOTAL NET BARRELS	5	4304.75	3039.75
-				1

P.O.Box 1989, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Anesia, NM 88211-0719 ED OIL CONSERVATION DIVISION DISTRICT III

DISTRICT III 1000 Rio Brazos Rd, Azicc, NM 87410

FIREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	Controlled	Recovery Inc.		Month & year	October 1994	
A dd	P.O. Box 369	Hobbs, NM	88241-0369			

	OIL BEGINNING OF MONTH (Attach additional sheets if	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	12,629.21
Oil skimmed from pits		180.44
	TOTAL ALL PLANTS	12,809.65
TOTAL PIPELINE (OIL RECOVERED (Attach additional sheets if necessary)	
LIMI I MAYE	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2,811.90
DELIVERIES P	TOTAL ALL PLANTS IPELINE OIL (Attach additional sheets if necessary)	2,811.90
FROM	10	BARRELS
Controlled Recovery Inc.	Petro Source Petrolite	5,321.14 1,232.86
Transfer from oil treating to Disposal area:	Water/Solids	835.33
	TOTAL ALL PLANTS	7,389.33
TOTAL STOCKS PIPLELI	NE OIL END OF MONTH (Attach additional sheets if nec	essary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	8,232.22

I hereby certify that this report is true and complete to the best of my knowledge and belief.

11-07-94 Annette Curiel, Office Manager

form C-118 Revised 10-1-78 Sheet 1-A

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Ô

P. O. BOX 2088 SANTA FE, NEW MEXICO 8750

PIPELINE QUALITY OIL RECOVERED BY TREATING PLAN

.n . %.	PIPELINE QUAL	ITY OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR TRANSPORTER:	LEASE NAME A.A. OILFIELD SERVICE	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17305	A.A. Oilfield TOTAL	State AB SWD #1	375.00 375.00	375.00
H-17307	TRANSPORTER: Lynx TOTAL	I & W TRANSPORTATION Midwest State #1	<u>50.00</u> 50.00	50.00
H-17270	TRANSPORTER: Jenex Operating TOTAL	JENEX Hobbs Station Yard	279.24 279.24	279.24
TEXAS H-17273	TRANSPORTER: Placid Oil Jenex Operating TOTAL	PATE TRUCKING Weaver #1 Hobbs Station Yard	131.15 <u>775.00</u> 906.15	906.15
TEXAS H-17284 H-17311 TEXAS TEXAS	TRANSPORTER: Coda Energy McCasland Services McCasland Services Wilson Operating Prime Operating TOTAL	McCASLAND SERVICES Shafter Lake Unit Atha #1 Atha #1 Penwell Plant Arco Holt 35 & 36	370.00 264.43 132.63 305.00 118.00	1136.36
TEXAS	TRANSPORTER: Pride Pipeline TOTAL	RAPID TRANSPORT Keystone #57	<u>70.00</u> 70.00	2.00
A-7977 A-7976 H-17351	TRANSPORTER: El Paso Nat'l Gas Rowland Trucking Texaco TOTAL	ROWLAND TRUCKING CO. Pecos River Plant BKE SWD CVU Battery	70.00 220.00 <u>90.15</u> 380.15	63.1 5
H-17264	TRANSPORTER: OXY USA TOTAL	LUCKY'S SERVICES Tracy B #1	110.00 110.00	0.00
	TOTAL GROSS BARRELS TOTAL NET BARRELS		3360.60	2811.90
			·	
{	•			

State of New Mexico

DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980 CONSERVEY, Minerals and Natural Resources Department

DISTRICT III

"DISTRIĈT II P.O. Drawer DD, Anesia, NM 88211-0719

1000 Rio Brazos Rd, Aztec, NM 87410

RE OIL CONSERVATION DIVISION

194 OC 74

Santa Fe, Yew Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 4-1-91 Sheet 1

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

		· ·
Report of Controlled Recovery Inc.	Month & year_	September 1994
Address P.O. Box 369 Hobbs,	NM 88241-0369	
	OIL BEGINNING OF MONTH (Attach additional sheets i	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	14,824.97
·	TOTAL ALL PLANTS	14,824.97
	OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2,281.00
	TOTAL ALL PLANTS	2,281.00
DELIVERIES P	IPELINE OIL (Attach additional sheets if necessary)	
FROM	TO	BARRELS
Controlled Recovery Inc. Transfers from oil treating plant to disposal area:	Petro Source Water=	731.66 3,745.00
promo to disposar drea.	Water .	
	TOTAL ALL PLANTS	4,476.66
TOTAL STOCKS PIPLELI	NE OIL END OF MONTH (Attach additional sheets if no	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	12,629.31
		12,629.31
	TOTAL ALL PLANTS	## 6 CM / 6 CT

hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT	4.	OIL RECOVERED BY TREAT		
NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
	TRANSPORTER:	A.A. OILFIELD SERVICE		
H-17175	A.A. OIlfield	State AB SWD #1	<u>250.00</u> 250.00	250.00
	TOTAL		250.00	230.00
	TRANSPORTER:	BANDERA	225 22	
H-17226	Bandera TOTAL	Bandera Plant	225.00 225.00	225,00
	IVIAL		223100	
PPC-1727	TRANSPORTER: 8 Pure Flow	BERGSTEIN SERVICES JE Barkerd	300.00	
	8 Pure Flow	Andrews Butane Disp.	300.00	
	TOTAL		600.00	190.00
	TRANSPORTER:	GANDY CORPORATION		
H-17214	BTA	Byers #2 SWD	120.00	
H-17216	Plains Radio Pet.	L.E. Ranch 16	10.00 130.00	80.00
	TOTAL		130.00	30. W
	TRANSPORTER:	I & W TRANSPORTATION		ξ.
H-17180	I & W Transport. TOTAL	Shell State	120.00 120.00	100.00
H-17269	TRANSPORTER: Texaco	MCCASLAND SERVICES BF Harrison B #3	100.00	
H-17234	McCasland Services	Atha SWD #1	350.00	
RRC-1248	2 Wilson Systems	Penwell Plant	676.00	
RRC-1248	2 Wilson Systems	TXL B Lease Goldsmith	80.00 1206.00	1026.00
	TOTAL		1200.00	1120.00
	TRANSPORTER:	PRIDE PIPELINE	50.00	
TEXAS	Pride Pipeline TOTAL	Orla Station #77	50.00 50.00	50.00
.				
A-7937	TRANSPORTER: CRW-SWD	ROWLAND TRUCKING CO. SWD Disposal	230.00	
A-7949	Rowland Trucking	Springs SWD	110.00	
A-7958	Tide West Oil	Worth Fed . Tank Batte	ry <u>140.00</u>	
	TOTAL		480.00	330.00
	TRANSPORTER:	SONNY'S OILFIELD SERV	1	
H-17166	Penroc	State AF	65.00	
H-17167	Koch TOTAL	East Lovington	<u>45.00</u> 110.00	30.00
	TOTAL GROSS BARRELS TOTAL NET BARRELS		3171.00	2281.00
	TOTAL TURE TOTAL			200.00

DISTRICTI OIL CONSERVE ON STATE OF New Mexico
P.O.Box 1980, Hobbs, NM 88241-1980 CFIVED Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Ancesis, My SE21-19719 AM & OTH CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of_	 Conti	rolled	Recover	y Inc	•		 Month & year_	August	1994	
• -	 					 	 , _			

P.O. Box 369 Hobbs, NM 88241-0369 Address TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS 20326.70 Controlled Recovery Inc. Halfway Disposal Skimmed from water pits 502.06 20828.76 TOTAL ALL PLANTS TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal 3905.10 3905.10 TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS Petro Source Controlled Recovery Inc. 347.89 Transfers from oil treating 3065.00 Water = plant to disposal area: Soil =6496.00 TOTAL ALL PLANTS 9908.89 TOTAL STOCKS PIPLELINE OIL END OF MON'TH (Attach additional sheets if necessary) BARRELS PLANT NAME LOCATION Halfway Disposal Controlled Recovery Inc. 14824.97

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager

505 885-9765

14824.97

TOTAL ALL PLANTS

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT		JIL RECOVERED BY TREAT	GROSS VOLUME	NET BBLS. P.L.
NUMBER	LEASE OPERATOR	LEASE NAME	SEDIMENT OIL	OIL RECOVERED
A-7908	TRANSPORTER: Dakota Resources TOTAL	B & E Big Eddy Fed 100	745.00 745.00	130.00
TX RRC-1	TRANSPORTER: Chevron Pure Flow SWD TOTAL	BERGSTEIN SERVICES Coons Water Flood St Andrews Butane Dispo	i l	160.00
A-7861 H-17163 H-17095	TRANSPORTER: CRW-SWD H & M Disposal Texaco E & P TOTAL	GANDY CORPORATION SWD Mayme Grahm #1 Vacuum Grayburg	90.00 115.00 <u>325.00</u> 530.00	275.00
H-17154	TRANSPORTER: Oxy TOTAL	LUCKY SERVICES Colonia A #1	210.00 210.00	120.00
H-17106 H-17112 A-7664	TRANSPORTER: Clayton Williams Marshall Young Wilson Disposal TOTAL	MCCASLAND SERVICES State A-16-A #13 Carrie O Davis Wilson Disposal Hill	25.50 530.10 <u>227.00</u> 782.60	
H-17117	TRANSPORTER: Osborne Heirs TOTAL	PATE TRUCKING Maddie Price	60.00 60.00	
A-7861 A-7820 H-17089 A-7881 A-7886 A-7873 A-7856 H-17095	TRANSPORTER: CRW-SWD Rowland Rowland El Paso Nat'l Meridian Pogo Pogo Texaco TOTAL	ROWLAND TRUCKING SWD Springs SWD Lynx Trunk A Malano Amax 28 #8 Fed 12 #4 Vacuum Grayburg	255.00 255.00 40.00 90.00 50.00 210.00 290.00 1677.50 2867.50	
H-17135 H-17111	TRANSPORTER: Koch Penroc Oil	SONNY'S OILFIELD East Lovington State AF	45.00 <u>150.00</u> 195.00	
	TOTAL NET BARRELS			3905.10

DISTRICTI OIL CONSERVE ON DIVISION P.Q.Box 1980, Hobbs, NM 88240, 4986ED

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

DISTRICT II

P.O. Drawer DD. According 88211-6970 8 50 OIL CONSERVATION DIVISION

P.O. Box 2088

1000 Rio Brazos Rd, Aztec, NM 87410

Santa Fe, New Mexico 87504-2088 TREATING PLANT OPERATOR'S MONTHLY REPORT Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of Controlled Recovery Inc.	Month & year_	July 1994
Address P.O. Box 369 Hobbs,	NM 88241-0369	***
	IL BEGINNING OF MONTH (Attach additional sheets	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	27584.51
	TOTAL ALL PLANTS OIL RECOVERED (Attach additional sheets if necessary)	27584.51
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2445.76
·		
	TOTAL ALL PLANTS	2445.76
DELIVERIES PI	PELINE OIL (Attach additional sheets if necessary)	
FROM	TO	BARRELS
Controlled Recovery Inc. Adjustments for transfers made from oil treating plant to disposal area: Jan 1994 through July 1994	Petro Source Water = Soil =	884.16 8689.00 130.41
	TOTAL ALL PLANTS	9703.57
TOTAL STOCKS PIPLELI	NE OIL END OF MONTH (Attach additional sheets if no	ecessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	20326.70
	TOTAL ALL PLANTS	20326.70

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager

505 885-9765

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	DIL RECOVERED BY TREAT LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-17044 H-17065	TRANSPORTER: A.A. Oilfield A.A. Oilfield TOTAL	A.A. OILFIELD SERV. State A.B. SWD State A.B. SWD	75.00 <u>516.95</u> 591.95	591.95
H-17024	TRANSPORTER: Oxy TOTAL	LUCKY'S SERVICES State CX Com #1	<u>100.00</u> 100.00	5.00
H-17066 A-7664	TRANSPORTER: McCasland Services Navajo TOTAL	MCCASLAND SERVICES Atha #1 Artesia Station	240.00 <u>1403.81</u> 1643.81	1643.81
H-17052	TRANSPORTER: Jim Abbott TOTAL	PETRO THERMO Goodwill Treating Pl	ant <u>210.00</u> 210.00	135.00
TEXAS	TRANSPORTER: Mobil TOTAL	ROWLAND TRUCKING Cowden Lease Battery	<u>85.00</u> 85.00	
H-17041	TRANSPORTER: Mobil TOTAL	XL TRANSPORTATION Cowden Lease Battery	<u>35.00</u> 35.00	
	TOTAL NET BARRELS			2445.76

NON-HAZARDOUS OFFSITE WASTE DISPOSAL SHIPPING PAPER

THE PROPERTY OF THE PROPERTY O

MOBIL EXPLORATION AND PRODUCING U.S. INC. P.O. BOX 1760 DENVER CITY, TX 79323 Attention: Environmental Technician RETURN COMPLETED FORM TO:

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turms. Disnasar and tanarator and Canarator CANARY: Disnasar Keen PINK: Transnorter Keen GOLDEN: Canarator Keen	Sclassified non-hazardous. I certify that the foregoing is true and correct to the best of my knowledge and parameter to the best of my knowledge and parameter to the best of my knowledge and parameter to the best of my knowledge and the barren when the foregoing is true and correct to the best of my knowledge and the barren when the foregoing the fo	10 BE FILLED OUT BY CENERATOR And vews Co., lexas Junk Iron Tank Bottoms Municipal Waste Carrier named below. Pursuant to appliable law, this Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the best of my knowledge. Bistrue and correct to the above. Bistrue and correct to the above. Bistrue and correction and the correction of the above. Bistrue and correction and the correction and the correction and the correction and
	Kow land land land land the guantity above at ton. If that the waste in the quantity above that the waste in the quantity and lify that the waste in the quantity and a voy the land land land the waste in the quantity and a voy the land land land land land land land land	
OF DISPOSER ***********************************	Kow land In the quantity above that the waste in the quantity and ify that the waste in the quantity and ify that the waste in the quantity and ify that the waste in the quantity and ify that the waste in the quantity and	7
PRINTED NAME OF DISPOSER WANTED NAME OF DISPOSER PRINTED NAME OF DISPOSER DATE RECEIVED SIGNATURE OF DISPOSER DATE RECEIVED	Kow hand I waste in the quantity above at form. If y that the waste in the quantity above at form. TRANSPORTER **********************************	t I was received by me for proper disposal.
RIFICATION: I certify that the waste in the quantity and describition in Part I was received by me for proper disposal. A A A A A A A A A	TER'S NAME: Kow land I waste in the quantity above destination. OH Sheek of TRANSPORTER	Н Л
SPOSAL FACILITY NAME: ADDRESS: DDRESS: ADDRESS: ADDRES	RITICATION: I Certify that the waste in the quantity above was accepted by me for shipment to the above Record Reco	BY DISPOSER
SPOSAL FACILITY NAME: ADDRESS: ADD	ANSPORTER'S NAME: ADDRESS: ADDRESS	TRANSPORTER / DATE ACCEPTED
TRANSPORTER **********************************	TO BE FILLED OUT BY TRANSPORTER ANSPORTER'S NAME: ADDRESS: 1/8 S C C C C C C C C C C C C C C C C C C	12/12
ation. C. A. T. C. C. A. C. C. A. C. C. C. A. C. C. C. A. C.	FAINTED RATE OF CENERALIAN ***********************************	0.4.5.
ANSPORTER'S NAME: ADDRESS: TIRS S COLORES - Helber N N 188740 RIPICATION: I certify that the waste in the quantity above was accepted by me for shipment to the above SCONTINE OF TRANSPORTER TO BE FILLED OUT BY DISPOSER SPOSAL FACILITY NAME: ADDRESS: ADRESS: ADDRESS:		OCHUMATON ************************************
CENTIFICATION: The waste described above was consigned to the carrier named below. Pursuant to appliable law, this waste described above was consigned to the carrier named below. Pursuant to appliable law, this waste in the foregoing is true and correct to the best of my knowledge. Mobile Mobil		
The described above was consigned to the hazardous. I certify that the foregoing of the second secon	CRI Controlled Recovery In	or
Bels. (Controlled above was consigned to the hazardous. I certify that the foregoing that the foregoing that the waste in the quantity above the waste in the quantity and the proposer.	85 (Bbis.) (Bbs., or Contralled Recovery Inc	
Produced Water Drilling/Workover Waste Other (Describe) 8 5 (Bbls.) Re described above was consigned to the hazardous. I certify that the foregoing that the waste in the quantity above the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste in the quantity and the waste waste waste in the quantity and the waste w	Produced Water Drilling/Workover Waste Other (Describe) 8 5 (8bls.) CAL Contamined Soil Libs., or	
Location Code: 51/18/3/4/1 Produced Water Drilling/Workover Waste Other (Describe) 8 5 (Bbls.) C Z C C C C C C C C C C C C C C C C C	Docation Code:	Hadrews Co., lexa

P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Ariesia, NM 88311-0719 SERVE QUICONSERVATION DIVISION

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410 RECE. VED

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

194 JUL TREATING BLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Controlled Recovery Inc. June 1994 Month & year_ Report of Hobbs, NM P.O. Box 369 88241-0369 Address

	E OIL BEGINNING OF MONTII (Attach additional sheets if n	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	23178.43
Oil skimmed from pits		161.93
·	TOTAL ALL PLANTS	23340.36
	E OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	6201.14
	TOTAL ALL PLANTS	6201.14
DELIVEDIES		0201.14
FROM	S PIPELINE OIL (Attach additional sheets if necessary) TO	BARRELS
1 KOM		DINACES
Controlled Recovery Inc.	Petro Source	1956.99
	TOTAL ALL PLANTS	1956.99
TOTAL STOCKS PIPLE	CLINE OIL END OF MONTH (Attach additional sheets if neces	ssary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	27584.51

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager

7-8-94

505 885-9765

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-19633	TRANSPORTER: I & W Transport. TOTAL	I & W TRANSPORTATION Shell State	420.00 420.00	190.00
A-7691	TRANSPORTER: Tom Boy Operating TOTAL	I & W, INC. Hinkle	<u>30.60</u> 30.60	30.60
H-16978	TRANSPORTER: Rice Engineering TOTAL	LUCKY SERVICES Vacuum G 35	220.00 220.00	0.00
H-16945	TRANSPORTER: Arco Oil & Gas TOTAL	MCCASLAND SERVICES Learcy McBuffington	<u>45.00</u> 45.00	45.00
A-7664	TRANSPORTER: Navajo Refining TOTAL	MCCASLAND SERV. Artesia Station Stora	ge <u>5264.94</u> 5264.94	5264.94
TEXAS	TRANSPORTER: Pride Pipeline TOTAL	RAPID TRANSPORT Shell Tank Farm #141	<u>290.00</u> 290.00	170.00
A-7679 A-7731 TEXAS	TRANSPORTER: El Paso Llano Energy Develop.	ROWLAND TRUCKING Guadalupe Compressor Weems #1 Borden Co. SWD	80.00 40.80 <u>440.00</u>	E00 (0
	TOTAL NET BARRELS		560.80	500.60 6201.14

DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico rgy, Minerals and Natural Resources Depar

Form C-118 Revised 4-1-91

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P.O. Drawer DD, Artesia, NM 88211-0719 OIL CONSERVATION DIVISION P.O. Box 2088

Sheet 1

DISTRICT III
1000 Rio Brazos Rd, Aziec, NM 87410

Submit 2 copies to appropriate District Office by 15th of next

Santa Fe, New Mexico 87504-2088

'94 JUA 14 FILL O 50

succeeding month.

Report of

Controlled Recovery Inc.

Month & year_

May 1994

P.O. Box 369

Hobbs, NM 88241-0369

	OIL BEGINNING OF MONTII (Attach additional sheets if	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	21,642.27
skimmed from water pits	·	190.00
	TOTAL ALL PLANTS	21,832.27
TOTAL PIPELINE	OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2,070.00
	TOTAL ALL PLANTS	2,070.00
DELIVERIES	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	ТО	BARRELS
Controlled Recovery Inc.	Petro Source	723.84
	TOTAL ALL PLANTS	723.84
TOTAL STOCKS PIPLEL	INE OIL END OF MONTH (Attach additional sheets if necessity	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	23,178.43
	TOTAL ALL PLANTS	23,178.43

I helpby certify that this report is true and complete to the best of my knowledge and belief.

Annette Curiel, Office Manager

505 885-9765

Telephone No.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY	OIL RECOVERED BY TREATI	NG PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-19620 H-16823	TRANSPORTER: AA Oilfield Serv. AA Oilfield Serv. TOTAL	A.A. OILFIELD SERVICE State AB SWD #1 State AB SWD #1	125.00 <u>125.00</u> 250.00	250.00
H-16909	TRANSPORTER: Alliance Corp. TOTAL	LUCKY SERVICES ST AJ	1300.00 1300.00	780.00
H-16917 H-7621 A-7639 A-7635 A-7679 TEXAS	TRANSPORTER: Lynx Petroleum Pogo Producing Rowland Trucking Rowland Trucking El Paso Energy Development TOTAL	ROWLAND TRUCKING CO. Sprinkle Fed Federal #1 BKE SWD BKE SWD Compressor Station Borden Co. SWD	95.00 90.04 100.00 78.92 80.00 491.00 934.96	843.96
H-16923	TRANSPORTER: Rice Engineering TOTAL	SONNY'S OILFIELD SERV I-1 SWD Well	430.00 430.00	95.00
H-16873	TRANSPORTER: Cheveron TOTAL	MCCASLAND SERV. Mattern D & E Battery	30.00 30.00	30.00
TEXAS	TRANSPORTER: Aectra TOTAL	WHY WASTEWATER?, INC. Rio Grande Plant	$\frac{71.04}{71.04}$	71.04
TOTAL NE	T BARRELS			2070.00

<u>ÎSSTRICTÎ</u> P.O.Box 1980, Hobbs, NM 88241-1980 State of New Mexico THE CONSTRUCTION DIVISION Energy, Minerals and Natural Resources Department, 1950

DISTRICT II
P.O. Drawer DD, Anesia, NM 88211-0719

OII

OIL CONSERVATION DIVISION AN AN 8 50

P.O. Box 2088

Submit 2 copies to appropriate

DISTRICT III
1000 Rio Brazos Rd, Aziec, NM 87410

Santa Fc, New Mexico 87504-2088
TREATING PLANT OPERATOR'S MONTHLY REPORT

District Office by 15th of next succeeding month.

Form C-118

Revised 4-1-91 Sheet 1

Report of_	Controlled	Recovery Inc.	Month & year_	April 1994
Address	P.O. Box 369	Hobbs, NM	88241-0369	

	OIL BEGINNING OF MONTH (Attach additional sheets i	
. PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	19,923.37
TOTAL DIDELAND	TOTAL ALL PLANTS	19,923.37
PLANT NAME	OIL RECOVERED (Attach additional sheets if necessary) LOCATION	DADDCLC
Lagra regita	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4,774.61
,	TOTAL ALL DI ANTIC	4,774.61
Day Manua	TOTAL ALL PLANTS	
	IPELINE OIL (Attach additional sheets if necessary)	D. D. D. D. C.
FROM	TO	BARRELS
Controlled Recovery Inc.	Petro Source	3,055.71
		2.055.71
	TOTAL ALL PLANTS	3,055.71
	INE OIL END OF MONTH (Attach additional sheets if no	BARRELS
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	21,642.27
	TOTAL ALL PLANTS	21,642.27

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Comette Comel

Annette Curiel, Office Manager

5-09-94

505 885-9765

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

TRANSPORTER: Alliance Corp. ST AJ 260.00 Rice Engineering EME-K33 260.00 Rice Engineering EME-K33 240.00 Rice Engineering TOTAL RICE Engineering EME-K33 240.00 RICE Engineering TOTAL ROWLAND TRUCKING CO. Jenex Plant 360.00 450.00 ST AJ 260.00 RICE Engineering TOTAL ROWLAND TRUCKING CO. Jenex Plant 360.00 450.00 ST AD 450.0	PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS					
H-16824		LEASE OPERATOR	LEASE NAME			
H-16827 Rice Engineering EME-K33 260.00 REME-K33 240.00 1060.00 REME-K33 240.00 1060.00 REME-K33 240.00 REME-K33 REME-K33 240.00 REME-K33 REME	H-16799	Amerada Hess Corp. AA Oilfield Serv. AA Oilfield Serv.	NMG/SAU 09660-96 State AB SWD #1	65.12 <u>124.32</u>	179.32	
H-16798	H-16828 H-16822	Alliance Corp. Rice Engineering Rice Engineering Rice Engineering	ST AJ EME-K33 EME-K33	300.00 260.00 <u>240.00</u>	180.00	
H-16795		Jenex Yates Petroleum	Jenex Plant	90.00	50.00	
H-16820 Rice Engineering TOTAL SWD K-33 S00.00 180.00	H-16795	I & W Transport.	· ·		350.24	
H-16829 Jenex Operating Arco Carlton 208.40 H-16818 Cheveron Arnott C State #4 41.44 H-16848 McCasland Services TOTAL PETRO SOURCE Aectra TOTAL Rio Grande Plant 2611.21 TRANSPORTER: Aectra TOTAL GROENDYKE TRANSPORTS Aectra TOTAL Rio Grande Plant 884.00 TOTAL ROSPORTER: Aectra TOTAL Rio Grande Plant 884.00 ROSPORTER: Aectra TOTAL Rio Grande Plant 884.00 ROSPORTER: Aectra TOTAL Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: Rio Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00 ROSPORTER: RIO Grande Plant 884.00	H-16820	Rice Engineering	1	<u>500.00</u>	180.00	
Aectra TOTAL Rio Grande Plant 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21 2611.21	H-16796 H-16818	Jenex Operating Arco Cheveron McCasland Services	Jenex Plant Carlton Arnott C State #4	208.40 41.44 <u>120.00</u>	339.84	
Aectra TOTAL Rio Grande Plant 884.00 884.00		Aectra			2611.21	
TOTAL NET BARRELS 4774.6		Aectra			884.00	
	TOTAL NE	T BARRELS			4774.61	

<u>DISTRICT I</u> P.O.Box 1980, Hopbs, NM \$8241-1980

1000 Rio Brazos Rd, Aztec, NM 87410

DISTRICT III

State of New Mexico egy, Minerals and Natural Resources Depart

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Ancsia, NM 88211-0719

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fc, New Mexico, 87504-2088; AM 8 49
TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Report of Controlled Recovery Inc. Month & year March 1994

Address P.O. Box 369 Hobbs, NM 88241-0369

TOTAL STOCKS PIPELINE (OIL BEGINNING OF MONTH (Attach additional s	heets if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	16,785.30
	TOTAL ALL PL	ANTS 16,785.30
	OIL RECOVERED (Attach additional sheets if nece	
PLANT NAME	LOCA'IION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	4,454.05
	TOTAL ALL PL/	ANTS 4,454.05
DELIVEDIES	PIPELINE OIL (Attach additional sheets if necessary	
FROM	TO	BARRELS
TROM		- DARKES
Controlled Recovery Inc.	Petro Source	1,315.98
· · · · · · · · · · · · · · · · · · ·	TOTAL ALL PLA	NIS 1,315.98
TOTAL STOCKS PIPLELI	INE OIL END OF MONTH (Attach additional shee	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	19,923.37
	TOTAL ALL PLA	NTS 19,923.37

I heteby certify that this report is true and complete to the best of my knowledge and belief.

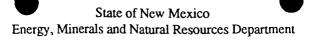
Signature

Annette Curiel, Office Manager

4/6/94

505 885-9765

Printed Name & Title



OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS					
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED		
H-16642 H-16710 H-16740 H-16727 H-16739	TRANSPORTER: AA Oilfield Service TOTAL	State AB #1 State AB #1 State AB #1	E 250.00 125.00 375.92 106.56 125.00	858.88		
H-16701	TRANSPORTER: Rice Engineering TOTAL	GENERAL PETROLEUM Vacuum G-39	417.36	375.92		
H-16736 H-16742 A-7487 A-7503 A-7508	TRANSPORTER: Jenex Shell Pogo Rowland Trucking Rowland Trucking TOTAL	ROWLAND TRUCKING CO. Jenex Plant Shell Central Batter Federal #1 Bonesprings SWD Bonesprings SWD	237.48 y 90.80 40.00 76.96 71.04	313.00		
H-16753 H-16770 H-16722	<u> </u>	I & W TRANSPORTATION Shell State Richardson Fee Shell State	643.45 613.08 266.40	1126.21		
H-16607 H-16728 H-16711 H-16769	TRANSPORTER: Rice Engineering Rice Engineering Rice Engineering Rice Engineering	SONNY'S OILFIELD SER C-2 SWD Well H-16 Pump Station Vacuum G-35 G-8 SWD Well	V. 325.60 53.28 115.44 633.44	442.32		
H-16749 H-16723 H-16715 H-16713 H-16741	TRANSPORTER: Arco Arco McCasland Services Mobile Oil Zia Energy TOTAL	MCCASLAND SERV. Arnott Ramsey H-28 Gregory A Fed. Batte Atha #1 SE Long Battery 3 Toby #1-H	14.80 ry 103.60 238.78 26.64 82.88	383.82		
(TEXAS) 06-0156	TRANSPORTER: Texaco TOTAL	OIL TRANSPORTATION Basin TK Farm Midland, TX	313.76	313.76		
3						

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
(TEXAS)	TRANSPORTER: Strata Production Aectra	PETRO SOURCE Gansa St. #1 Rio Grande Plant	175.14 465.00	
	TOTAL			640.1
		TOTAL NET BARRELS		4454.0

DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980 State of New Mexico

ergy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

DISTRICT I P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

DISTRICT III

DIL CONSERV - UN DIVISION 1000 Rio Brazos Rd, Aztec, NM 87410 REC: VED

P.O. Box 2088

Santa Fc, New Mexico 87504-2088

TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Controlled Recovery Inc. February 1994 Report of Month & year_ P.O. Box 369 Hobbs, NM 88241-0369 Address TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal 16857.46 TOTAL ALL PLANTS 16857.46 TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS 05 1 Controlled Recovery Inc. Halfway Disposal feloption. 1937.84 1 -1937.84 TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) BARRELS FROM Controlled Recovery Inc. Petrolite 1862.20 \$100 Petro Source 147.80 TOTAL ALL PLANTS 2010.00 TOTAL STOCKS PIPLELINE OIL END OF MONTH (Attach additional sheets if necessary) BARRELS LOCATION PLANT NAME Controlled Recovery Inc. Halfway Disposal 16765.30

by certify that this report is true and complete to the bost of my knowledge and belief.

Steve McLane General Manager

03-09-94

TOTAL ALL PLANTS

505 885-9765

16785.30

DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico ergy, Minerals and Natural Resources Department

Form C-118 Revised 4-1-91 Sheet 1

DISTRICT IL

P.O. Drawer DD, Artesia, NM 88211-0719

OLL CONSERVATION DIVISION JN DIVISION

P.O. Box 2088

OIL CONSERV -1000 Rio Brazos Rd, Aztec, NM 87410 RECE VED

Santa Fc, New Mexico 87504-2088

TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

AM 8 39 Controlled Recovery Inc. Report of February 1994 Month & year_ P.O. Box 369 Hobbs, NM 88241-0369 Address TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal 16857.46 16857.46 TOTAL ALL PLANTS TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS 505 1 Controlled Recovery Inc. Halfway Disposal foliaption. 1937.84 Del 1 -TOTAL ALL PLANTS 1937.84 DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) BARRELS FROM Controlled Recovery Inc. Petrolite 1862.20 Petro Source 147.80 2010.00 TOTAL ALL PLANTS TOTAL STOCKS PIPLELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal 16765.30

by certify that this report is true and complete to the best of my knowledge and belief.

Steve McLane General Manager

03-09-94

TOTAL ALL PLANTS

505 **885-976**5

16785.30

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
		A.A. OILFIELD SERVICE	•	
H-16642	TRANSPORTER:	W. Lovington Battery	125.80	
B-10047	TOTAL	w. Doamgeon baccery	223,00	70.56
	+ V 4441			
	TRANSPORTER:	BANDERA		
H-16638	Bandera	Bandera Plant	94.20	
H-16638	Bandera	Bandera Plant	94.20	
H-16638	Bandera	Bandera Plant	88.80	
H-16638	Bandera	Bandera Plant	100.64	00.0 mm
	TOTAL			226.71
	MBANCDODEED.	ROWLAND TRUCKING CO.		
H-16611	TRANSPORTER: Lynx Petroleum	State 20 Battery	83.20	
H-16637	Jenex	Jenex Plant	120.00	
H-16637	Jenex	Jenex Plant	75.00	
H-16637	Jenex	Jenex Plant	121.36	
H-16679	Jenex	Jenex Plant	120.00	
H-16679	Jenex	Jenex Plant	120.00	
H-16679	Jenex	Jenex Plant	120.00	
H-16670	Jenex	Jenex Plant	120.00	
H-16670	Jenex	Jenex Plant	125.00	
H-16670	Jenex	Jenex Plant	110.00	
H-16670	Jenex Tomas	Jenex Plant	130.00	768.27
	TOTAL			190.41
	TRANSPORTER:	PETRO THERMO		
H-16657		Goodwin Plant	121.36	
H-16657		Goodwin Plant	121.36	
H-16657	Petro Thermo	Goodwin Plant	121.36	
	TOTAL			154.66
	TRANSPORTER:	SONNY'S OILFIELD SER	· ·	
H-16607	Rice Engineering	C-2 SWD Well	106.56	,
H-16691 H-16607	Rice Engineering	Vaccuum SWD F-35 C-2 SWD Well	32.56 12 4. 32	•
H-16607	Rice Engineering Rice Engineering	C-2 SWD Well	114.48	
H-16671	Rice Engineering	G-8 SWD Well	112.48	
	TOTAL			143.29
	Transporter:	MCCASLAND SERV.		
H-16686		Jr Cone S Battery	50.32	
H-16643		Buffington	55.00	
H-16695		Atha #1	56.24	
H-16695 H-16640		Atha #1 Mattox #1	109.52 100.64	
H-16703	Yates	Lost Tank Battery	65.00	
	TOTAL		55.00	248.98
<u></u>				

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS					
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED	
H-16690	TRANSPORTER: Rice Engineering TOTAL	GENERAL PETROLEUM Vaccuum SWD F-35	118.40	41.21	
(TEXAS) 06-0156	TRANSPORTER: Texaco TOTAL	OIL TRANSPORTATION Basin TK Farm Midland, TX	535.76	284.16	
i					
		TOTAL NET BBLS.		1937。84	

DISTRICT

P.O.Box 1980, Hobbs, NM 88241-1980 DISTRICT No. 1

P.O. Drawer DD, Anesia, NM 88211-0719

DISTRICTUI 1000 Rio Brazos Rd, Aztec, NM 87410

STATE OF INCM INTEXTED

Fnergy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

Sheet 1

Form C-118

Revised 4-1-91

January 1994

TREATING PLANT OPERATOR'S MONTHLY REPORT

P.U. Box 2088

ON CONSER. IN DIVISION
Submit 2 copies to appropriate
District Office by 15th of next
suggeodding month 194 FE+ 74 Controlled Recovery Inc.

Month & year_

leport of

ess P.O. Box 369 Hobbs,	NM 88241-0369	1
TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional sheets	if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	15061.09
	TOTAL ALL PLANTS	
	OIL RECOVERED (Attach additional sheets if necessary)	*** **********************************
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	3176.37
	TOTAL ALL PLANTS	3176.37
DELIVERIES	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	70	BARRELS
Controlled Recovery Inc.	Petro Lite Petro Source	1200 180
	TOTAL ALL PLANTS	1380
TOTAL STOCKS PIPLEL	INE OIL END OF MONTH (Attach additional sheets if n	ecessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	16857,46
	TOTAL ALL PLANTS	16857.46

ereby certify that this report is true and complete to the best of my knowledge and belief.

Steve L. McLane General Manager

2-09-94

(505) 393-1079

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

<u></u>	PIPELINE QUALITY	OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
	TRANSPORTER:	A.A. OILFIELD SERVICE		
H-16515	AA Oilfield Service	l f	145.00	
H-16563	AA Oilfield Service		124.32	
			124.32	
H-16562	AA Oilfield Service			
H-16571	AA Oilfield Service		65.12	
H-16584	AA Oilfield Service		47.36	
H-16615	AA Oilfield Service	Alphi Crude Plant	124.32	316.21
H-16521	TRANSPORTER: Hanson Operating	GANDY McBride State Bat.	30.00	
H-10221	TOTAL	MCBITUE State Bat.	30.00	15.00
		1		
	TRANSPORTER:	ROWLAND TRUCKING CO.	~~	
A-7384	OGS Operating	Lucy Pearl #1	35.52	
H-16569	Lynx	B-Lee State Bat.	153.92	
H-16569	Lynx	B-Lee State Bat.	59.20	
A-7368	El Paso Natural Gas	Trunk B	100.64	
H-16597	Armstrong Energy	Mobil Lea State	85.00	
H-16598	Armstrong Energy	Gov. E 1 Battery	25.00	
A-7391	OGS Operating	Lucy Pearl #1	100.64	
H-16611	Lynx Petroleum	State 20 Battery	65.12	
	TOTAL			261.71
	TRANSPORTER:	JENNEX	·	
H-16509	Jenex Operating	Jenex Plant	110.00	
10007	TOTAL	0 0 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		49.50
	TRANSPORTER:	SONNY'S OILFIELD SERV	,_	
H-16540		Blindbrey Drinkard	256.00	
	Rice Engineering			
H-16608	Rice Engineering	68 SWD Well	219.04	120 40
	TOTAL			130.40
	TRANSPORTER:	MCCASLAND SERV.	; (
H-16520	Arco	Endura State	12.75	l
H-16519	Arco	South Justice	43.25	
(TEXAS)	Greenhill Petroleum	Emma Pit	2779.14	
H-16579	McCasland Services	Atha #1	110.00	!
H-16582	McCasland Services	Atha #1	112.48	l .
H-16616	American Explor.	Citgo Federal	124.32	
	TOTAL			388.59
	TRANSPORTER:	GENERAL PETROLEUM		
H-16510	Rice Engineering	H-20	398.12	
H-16550	Rice Engineering Rice Engineering	H-35 B.D.	90.00	
j ,		C-2 B.D. SWD	130.24	
H-16574	Rice Engineering			
H-16606	Rice Engineering	G-8 SWD	130.24	340.10
	TOTAL			340.10

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
(TEXAS)	TRANSPORTER: Texaco TOTAL	OIL TRANSPORTATION Basin TK Farm Midland, TX	2392.65	1674.80
		TOTAL NET BBLS.		3176.3
:				
	•			

DISTRICT I P.O.Box 1980, Hobbs, NM 88241-1980 <u>DISTRICT II</u>

P.O. Drawer DD, Antesia, NM 88211-0719

State of New Mexico ergy, Minerals and Natural Resources Depart

REVISED

Form C-118 Revised 4-1-91

OIL CONSERVATION DIVISION DIVISION Sheet 1

P.O. Box 2088

RECEIVED

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

Santa Fc, New Mexico 87504-2088

Submit 2 copies to appropriate

Submit 2 copies to appropriate

Pist 65-50 (fice by 15th of next

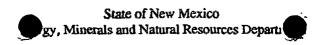
TREATING I	PLANT OPERATOR'S MONTHEY REPORT	succeeding month.				
Report of Controlled Recovery Inc.	Month & year_	December 1993				
Address P.O. Box 369 Hobbs,	NM 88241-0369	1				
TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary)						
PLANT NAME	LOCATION	BARRELS				
" FLANT NAME	LOCATION					
Controlled Recovery Inc.	Halfway Disposal	-0-				
	TOTAL ALL PLANTS	-0				
TOTAL TATACA						
PLANT NAME	OIL RECOVERED (Attach additional sheets if necessary) LOCATION					
FLANT NAVIE	EXCATION	BARRELS				
Controlled Recovery Inc.	Halfway Disposal	⁽¹⁹⁵⁾ ⊕ 15061.09				
•						
	15061.09					
DELIVERIES P						
FROM	OF	BARRELS .				
Controlled Recovery Inc.		-0-				
	TOTAL ALL PLANTS	-0-				
TOTAL STOCKS PIPLELI	eccssary)					
PLANT NAME	LOCATION	BARRELS				
Controlled Recovery Inc.	Halfway Disposal	15061.09				
•	·					
	TOTAL ALL PLANTS	15061.09				

hereby certify that this report is true and complete to the best of my knowledge and belief.

Steve L. McLane General Manager

2-09-94

505 393-1079



Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS				
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-16463 H-16462 H-16481	A.A. Oilfield Services A.A. Oilfield Services A.A. Oilfield Services TOTAL	Alpha Phi Crude State "AB" SWD #1 Alpha Phi Crude	202.78 257.52 375.00	356.51
H-16461 H-16467 H-16505 H-16506 H-16547	Rice Engineering Rice Engineering Rice Engineering Rice Engineering Rice Engineering	Hobbs SWD F-29 EME K-33 SWD G-8 H-20 B-D System SWD Well	245.67 187.96 430.00 257.54 761.02	200 01
н-16485	TOTAL Alliance Corp. TOTAL	State A.J.	220.00	232.21 98.61
H-16502	Jenex Operating TOTAL	Jenex Plant	285.00	133,95
H-16482	Petro Thermo Corp. Total	Goodwin Treating Plant	345.00	110.40
A-7732	Rowland Trucking TOTAL	Springs SWD	79.74	32.69
Н~16489	Sonny's Oilfield Serv. TOTAL	Hobbs St. #3	783.62	192.86
RRC#A-7732	Petroleum Contractors (Texaco) TOTAL	Basin Tank Farm Midland, TX	2142.90	1671.46
R-9166	Controlled Recovery TOTAL	Halfway Disposal	30581.00	12232.40
		Total Net BBLS.		1506109

DISTRICT I

DISTRICT II

DISTRICT III

P:O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Drawer DD, Artesia, NM 88211-0719 OIL CONSERVA FUN DIVISIONP.O. Box 2088

1000 Rio Brazos Rd, Aztec, NM 87410 RECEIVED Santa Fe, New Mexico 87504-2088

TREATING PLANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

Sheet 1

Form C-118

Revised 4-1-91

AM 9 54 Controlled Recovery Inc. Report of

Month & year_

December 1993

P.O. Box 369

Hobbs. 88241-0369

	OIL BEGINNING OF MONTH (Attach additional sheets if	
, PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL PLANTS	0-
	OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2828.69
	TOTAL ALL PLANTS	2828.69
DELIVERIES P	IPELINE OIL (Attach additional sheets if necessary)	
FROM	ТО	BARRELS
Controlled Recovery Inc.		-0-
	·	
<u></u>	TOTAL ALL PLANTS	-0-
TOTAL STOCKS PIPLELI	NE OIL END OF MONTH (Attach additional sheets if nea	cessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	2828.69
•		
	TOTAL ALL PLANTS	2828:69

I hereby certify that this report is true and complete to the best of my knowledge and belief.

for Rod Bramwell, General Manager

Telephone No:

Dringed Name & Title

Date

Form C-118 Revised 4-1-91 Sheet 1-A

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

	PIPELINE QUALITY (OIL RECOVERED BY TREAT	ING PLANTS	
PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-16463 H-16462 H-16481	A.A. Oilfield Services A.A. Oilfield Services A.A. Oilfield Services TOTAL	Alpha Phi Crude State "AB" SWD #1 Alpha Phi Crude	202.78 257.52 375.00	356.51
H-16461 H-16467 H-16505 H-16506 H-16547	Rice Engineering Rice Engineering Rice Engineering Rice Engineering Rice Engineering TOTAL	Hobbs SWD F-29 EME K-33 SWD G-8 H-20 B-D System SWD Well	245.67 187.96 430.00 257.54 761.02	232.21
H-16485	Alliance Corp. TOTAL	State A.J.	220.00	98.61
н-16502	Jenex Operating TOTAL	Jenex Plant	285.00	133.95
н-16482	Petro Thermo Corp. Total	Goodwin Treating Plant	345.00	110.40
A-7732	Rowland Trucking TOTAL	Springs SWD	79.74	32.69
н-16489	Sonny's Oilfield Serv. TOTAL	Hobbs St. #3	783.62	192.86
RRC#A-7732	Petroleum Contractors (Texaco) TOTAL	Basin Tank Farm Midland, TX	2142.90	1671.46
	·	Total Net BBLS.		2828.69

Controlled Recovery Inc C-117 November 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
11/15/93	McCasland Services	Atha #1	H-16364	230	220
11/16/93	Pronghorn SWD System	Pronghorn Central Facility	H-16370	75	75
11/23/93	McCasland Services	Atha #1	H-16398	100	100
11/29/93	Phillips Petroleum	M.E. Hale Battery	H-16416	235	235
			Total Rar	rels	630

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DISTRICT I P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico gy, Minerals and Natural Resources Departn

Form C-118 Revised 4-1-91 Sheet 1

P.O. Drawer DD, Anesia, NM 188291 57 F5 12 10 N DOWE CONSERVATION DIVISION DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

93 DE: 1 TREATING LANT OPERATOR'S MONTHLY REPORT

Submit 2 copies to appropriate District Office by 15th of next succeeding month.

rt of	Controlled Re	covery Inc.		Month & year_	November 1993
ess P.	0. Box 369	Hobbs, NM	88241-0369		
	TOTAL STO	CKS PIPELINE OIL	BEGINNING OF MONTH (Attach additional sheets if	necessary)
	PLANT NAME	CALO TAL DELL'E CAE	LOCATIO		BARRELS
**	1 LANT TANK		BOCKTION	11	DARRELS
Contr	olled Recovery	Inc.	Halfway Dispos	al	-0-
				TOTAL ALL PLANTS	-0-
	TO	TAL PIPELINE OIL	RECOVERED (Attach addit		
	PLANT NAME		LOCATION		BARRELS
Contr	olled Recovery	Inc.	Halfway Dispos	al	-0-
				TOTAL ALL PLANTS	-0-
		DELIVERIES PIPE	LINE OIL (Attach additional	sheets if necessary)	
	FROM		то		BARRELS
Contr	olled Recovery	Inc.	Halfway Dispos	al	-0-
·				:	
				TOTAL ALL PLANTS	-0-
	TOTAL	TOCKS DIDI EI INE	OIL END OF MONTH (Atta		· · · · · · · · · · · · · · · · · · ·
		1 OCKS I IL LEDINE	LOCATION		BARRELS
	PLANT NAME		LOCATION		DARKELD .
Contr	colled Recovery	Inc.	Halfway Dispos	eal .	-0-
	,				
				TOTAL ALL PLANTS	-0-

12-10-93

Date

505 393**-**1079

Telephone No.

for Ken Marsh, President

Printed Name & Title

FECEIVED

DEC 1 41993

OCD HOBBS OFFICE

DISTRICT I

DISTRICT II

P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico ergy, Minerals and Natural Resources Depar

Form C-118 Revised 4-1-91

Sheet 1

OIL CONSERVATION DIVISION CONSERVATION DIVISION

P.O. Box 2088

RECF: VED<u>Submit 2 copies</u> to appropriate District Office by 15th of next

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

P.O. Drawer DD, Artesia, NM 88211-0719

AM su@ccding month.

Santa Fe, New Mexico 87504-2088 TREATING PLANT OPERATOR'S MONTHLY REPORT 5

. •		1111 2 71
Report of Controlled Recovery Inc.	Month & year_	October 1993
Address P.O. Box 369 Hobbs,	NM 88241-0369	
TOTAL STOCKS DIDELINE	OIL BEGINNING OF MONTH (Attach additional sheets i	f ====================================
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
		·
"	TOTAL ALL PLANTS	-0-
TOTAL PIPELINE	OIL RECOVERED (Attach additional sheets if necessary)	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL PLANTS	-0-
DELIVERIES I	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	ТО	BARRELS
TROM		J., (40.55
Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL PLANTS	-0-
TOTAL STOCKS PIPLEL	INE OIL END OF MONTH (Attach additional sheets if ne	cessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL BLANTS	-0-

I hereby certify that this report is true and complete to the best of my knowledge and belief.

for Ken Marsh, President

October 8, 1993

505 393-1079

Printed Name & Title

Date

Telephone No.

Controlled Recovery Inc C-117 October 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
10/13/93	Devon Energy	Caprock St. #1	H-16309	10	10
10/15/93	Pronghorn SWD System	Pronghorn Central Facility	H-16315	240	240
10/19/93	Pronghorn SWD System	Pronghorn Central Facility	H-16321	230	190
10/22/93	McCasland Service, Inc.	ATHA #1	н-16328	140	140
			Total Bar	rels	580

DISTRICT I - P.O.Box 1980, Hobbs, NM 88241-1980

State of New Mexico rgy, Minerals and Natural Resources Depart

Form C-118 Revised 4-1-91

DISTRICT II P.O. Drawer DD, Artesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION ERV. ON DIVISION
P.O. Box 2088

RECEIVED

Submit 2 copies to appropriate District Office by 15th of next recording month. Santa Fe, New Mexico 87504-2088

TREATING PLANT OPERATOR'S MONDING REPORT

8 36

Report of Control	lled Recovery Inc.	Month & year_	September 1993
Address P.O. Box	369 Hobbs, 1	NM 88241-0369	
TO	TAL STOCKS PIPELINE OF	IL BEGINNING OF MONTH (Attach additional sheets	if necessary)
	T NAME	LOCATION LOCATION	BARRELS
Controlled Re		Halfway Disposal	-0-
		TOTAL ALL DI ANTO	-0-
	TOTAL DIDELINE O	TOTAL ALL PLANTS IL RECOVERED (Attach additional sheets if necessary)	
PLAN	T NAME	LOCATION	BARRELS
Controlled R		Halfway Disposal	-0-
		TOTAL ALL PLANTS	-0-
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FF	ROM	ТО	BARRELS
Controlled R		Halfway Disposal	-0-
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	TOTAL STOCKS PIPLELIN	NE OIL END OF MONTH (Attach additional sheets if n	ecessary)
	T NAME	LOCATION	BARRELS
Controlled R	ecovery Inc.	Halfway Disposal	-0-

I hereby certify that this report is true and complete to the best of my knowledge and belief.

for Ken Marsh, President

10-7-93

505 393-1079

-0-

Printed Name & Title

Date

TOTAL ALL PLANTS

Telephone No.

Controlled Recovery Inc C-117 September 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
07/22/93	Kerr McGee	Lukachukai Tank Battery	3-563	1500	859
09/03/93 09/13/93	Weatherford US Inc. McCasland	Hobbs Yard ATHA #1	н-16217 н-16249	120 30	100 30
09/21/93	Rowland	Springs SWD	A-7097	80	80

Total Barrels......1069

P.O.Box 1980, Hobbs, NM 88241-1980 DISTRICT II

P.O. Drawer DD, Anesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico rgy, Minerals and Natural Resources Depart

Form C-118 Revised 4-1-91 Sheet 1

SPARERY: ION DIVISION RECLIVED

P.O. Box 2088

Submit 2 copies to appropriate Santa Fe, New Mexico 8750462088 For The District Office by 1 TREATING PLANT OPERATOR'S MONTHEY REPORT 10 14 Succeeding month. District Office by 15th of next

Controlled Recovery Inc. August 1993 Report of Month & year_ Hobbs, NM 88241-0369 P.O. Box 369 Address TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME -()-Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0--0-TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS Controlled Recovery Inc. Halfway Disposal -0--()-TOTAL ALL PLANTS TOTAL STOCKS PIPLELINE OIL END OF MONTH (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS

I hereby certify that this report is true and complete to the best of my knowledge and belief.

Johncox

for Ken Marsh, President

09/10/93

505 393-1079

Printed Name & Title

Date

Telephone No.

Controlled Recovery Inc C-117 August 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
08/02/93	Mobil	North Vacuum Abo Water	H-16133	230	240
08/02/93	McCasland	Atha 1	H-16135	105	105
08/17/93	McCasland	Atha 1	H-16164	100	200
08/18/93	McCasland	Atha 1	H-16169	100	100
07/22/93	Kerr McGee	Lukachukai Tank Battery	3-563	1500	2680

Total Barrels..................3325

P O. DOR 2048

SANTA FK, NEW MEXICO 87301 EATING PLANT OPERATOR'S MONTH. REPORT

Form C-113 Revised 10-1-78 Sheet 1

Report of _	Controlled Recovery Inc.	GIL CONSERVE JN DIVISION Month of July	1993
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Address	P.O. Box 369	Hobbs	NM 88240
	. (Street)	193 AUG 16 AM 10 02 (Sig)	(State)
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	ontrolled Recovery Inc.	Halfway Disposal	- O-
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		TOTAL ALL PLANTS	

Thereby certify that this report is true and complete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR BLOOM Controlled Recovery Inc. for Kon March

Controlled Recovery Inc C-117 July 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
07/22/93	Kerr McGee	Lukachukai Tank Battery	3-563	1500	300
07/08/93	Rowland	Springs SWD	A-6920	100	432
07/19/93	Dakota Resources	Big Eddy #100 SWD	A-6942	200	240
07/06/93	McCasland Service	Atha #1	H-16071	330	215
07/08/93	McCasland	Atha #1	H-16078	220	220
07/22/93	Chevron	CDU Waterflood Station	H-16103	175	185
07/20/93	McCasland	Atha #1	H-16104	30	40

Total Barrels................1632

Form C-118

ATING PLANT OPERATOR'S MONTH REPORT

Controlled Recovery Inc. Month of June 1993 P.O. Box 369 88240 TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) BARRELS PLANT NAME LOCATION Controlled Recovery Inc. Halfway Disposal -0- · -0-TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessory) FROM BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME Controlled Recovery Inc. Halfway Disposal ~0-

NAME OF TREATING PLANT OPERATOR STORY CONTROLLED CONTRO

for Ken Marsh

Thereby certify that this report is true and complete to the best of my knowledge and bellef.

Controlled Recovery Inc C-117 June 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
06/01/93	McCasland Service	Atha #1	H-15979	500	600
06/09/93	St. Clair Energy	Superior Fed A	H-15994	255	255
06/14/93	Texaco	State I Battery	H-16005	120	120
06/14/93	Texaco	Penrose Skelly F	H-16006	75	70
06/25/93	ABC Rental Tool	Yard Pit	H-16048	80	80

Total Barrels......1125

STATE OF NEW MEXICO EHEAGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION P 0, 00 5 2016

SANTA FK, NEW MEXICO 87501

Form C-118 Rzvised 10-1-78 Sheet 1

TITE ATTERVEL AND PREBATOR'S MONTHLY EPORT

RECE VED

Report of	Controlled Recovery Inc.	Month of May	1993
	*93 JUN	25 NM 8 56	
Address	P.O. Box 369 (Street)	Hobbs (City)	NM 88240 (State)
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	Controlled Recovery Inc.	Halfway Disposal	-0-
		FOTAL ALL PLANTS	0-

! hereby certify that this report is true and complete to the best of my knowledge and bellef.

NAME OF TREATING PLANT OPERATOR ____

Controlled Recovery Inc.

for Ken Marsh . President

6/23/93

Controlled Recovery Inc C-117 May 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Volume (BBLS)	Volume (BBLS)
05/04/93	Koch Oil Company	Scharb Station	н-15901	50	70
			Total Bar	rels	70

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION BANTA FK, NEW MEXICO 87301 ATING PLANT OPERATOR'S MONTHLY

OIL CONSERV- UN DIVISION Month of April 1993 Controlled Recovery Inc. RECEIVED P.O. Box 369 Hobbs TOTAL STOCKS RIVELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0- · -0-TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME BARRELS LOCATION Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS -0-

! hereby certify that this report is true and complete to the best of my knowledge and bellef.

Controlled Recovery Inc. Beoker Johnson

for Ken Marsh President

5/25/93

Controlled Recovery Inc C-117 April 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
04/07/93 04/09/93 04/23/93 04/30/93	Homco Western Reserves Homco Phillips Petroleum	Hobbs Yard State 24-26 Hobbs Yard Hobbs Fed	H-15814 Verbal by Sexton H-15859 H-15893	0 95 130 10	60 95 235 10
			Total Barr	els	400

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NAME OF TREATING PLANT OPERATOR _____ Controlled F Buckey Gohncox you Robert Whittemore

OIL CONSERVATION DIVISION OIL CONSER PARTOR SIMONTHLY REPORT REATING PLANT OPERATOR SIMONTHLY REPORT

Form C-118 Revised 10-1-78 Sheet 1

	•	Month of March	•
ddress	P.O. Box 369	Hobbs	NM 88240
	. (Street)	(CitA)	(State)
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		TOTAL ALL PLANTS	-0-

Controlled Recovery Inc.

Tido General Manager

Doto _ 4/13/93

Controlled Recovery Inc C-117 March 1993

E 62 - F

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
03/10/93	S&J Operating Co.	North Denton Wolfcamp	H-15722	140	145
03/12/93	Penroc Oil Company	State AE	H-15729	30	30
03/26/93	B&E, Inc.	Tuzlu Koek	A-6641	150	220
03/31/93	Homco	Hobbs Yard	H-15800	110	10

Total Barrels......405

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION P. O. BOR 2016 SANTA FK, NEW MEXICO 87501 · TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118
Revised 10-1-78
Sheet 1

Report of	ary 1993		
	D.O. Borr 260		
Address_	P.O. Box 369 (Street)	Hobbs (City)	NM 88240 (State)
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		FOTAL ALL PLANTS	

Controlled Recovery Inc. Johnson Govert Shittemore, General Manager

Doto 3/13/93

Controlled Recovery Inc C-117 February 1993

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Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
02/09/93	Greenhill Petroleum	Lovington San Andres	н-15658	110	110
02/09/93	Oryx	Akins State G Battery	H-15659	50	60
02/10/93	Homeo	Hobbs Yard	H-15662	130	40
02/11/93	Pennzoi l	Littlefield AB Federal	H-15664	120	120
02/11/93	Phillips	Wyatt Federal	H-15665	50	50
02/07/93	AA Oilfield	State AB SWD #1	H-15669	125	140
02/23/93	Sid Richardson	Plant #4 Production	H-15685	260	78
02/23/93	AA Oilfield	State AB SWD #1	H-15683	375	375
02/23/93	Arco	State 367 Co-Mingle Tank Bat	H-15687	35	32
02/22/93	Santa Fe Energy	North Pure Gold 9 Fed 1	A-6549	10	10

Total Barrels......1015

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION P O. BON 2028

BANTA FR. NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1

ENERSY AND MINERALS DEPARTMENT TREATING PLANT OPERATOR'S MONTHLY KEPORT OIL CONSERVE FON DIVISION RECE VED Controlled Recovery Inc. ____ Month of January 1993 '93 MAR AM 9 06 P.O. Box 369 Hobbs TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME BARRELS LOCATION Controlled Recovery Inc. Halfway Disposal -0-

thereby certify that this report is true and complete to the best of my knowledge and belief.

HAME OF TREATING PLANT OPERATOR Robert Whitemore

Controlled Recovery Inc.

General Manager 2/26/93

TOTAL ALL PLANTS

Controlled Recovery Inc C-117 January 1993

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)	
12/31/92	Chevron USA	Drinkard B #5	ห-15584	100	100	
01/07/93	Bristol Resources	Featherstone Federal	verbal(J. Sexton)	80	80	
01/07/93	AA Oilfield Service	State "AB" SWD	H-15593	375	310	
01/15/93	Homco International	Hobbs Yard	H-15613	130	85	
01/20/93	AA Oilfield Service	State "AB" SWD	H-15618	125	125	
01/26/93	Conoco	SEMU Drinkard Battery	H-15626	45	45	

Total Barrels......745

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION BANTA FR, NEW MEXICO 87301 TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 10-1-78

Controlled Recovery The CONSER. - ON DIVISION Month of December 1992 Report of _ P.O. Box 369 88240 TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME Controlled Recovery Inc. Halfway Disposal -0- --0-TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) BARRELS PLANT NAME LOCATION Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS

thereby certify that this report is true and complete to the best of my knowledge and bellef.

Controlled Recovery Inc. NAME OF TREATING PLANT OPERATOR Becky Johncox for Robert Ir hittemore

... General Manager

Controlled Recovery Inc C-117 December 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
12/01/92	Phillips	Wyatt Federal	H-15535	50	50
12/02/92	Samedan Oil Corp	Speight	H-15538	120	150
12/07/92	Conoco	Federal BI Battery	H-15543	87	97
12/11/92	Two State Tank Rental	Hobbs Yard	H-15554	?	500
12/14/92	Conoco	MCA Battery 4	H-15555	75	60
12/21/92	AA Oilfield Service	AB SWD	H-15566	125	125
12/29/92	D-Mill Production	Pruitt A Battery	H-15574	35	45
12/29/92	ABC Rental Tools	Hobbs Yard	H-15576	250	110
12/29/92	Capataz	Reeves State #1	н-15577	110	130
11/30/92	AA Oilfield Service	Hobbs Yard	н-15533	15 yds	23.56 yds
				rels	

STATE OF NEW MEXICO ANERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION SANTA FR, NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1

OIL CONSERVING PLANTING PERATOR'S MONTHLY REPORT

Report of	Controlled Reco	REC very Inc.	i.√ED		: Month of _	Noveml	ber, 1992	•
	P.O. Box 369	'92 DEE: 7	AM 9	04	Hobbs		NM	88240
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Controlled Recovery Inc. MAME OF TREATING PLANT OPERATOR Controlled Re George Johnson for Robert Skhittemore

General Manager

12/4/92

Thereby certify that this report is true and complete to the best of my knowledge and belief.

Controlled Recovery Inc C-117 November 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
11/04/92	Texaco	Federal Neff 13	H-15510	20	20
11/04/92	Texaco	Getty Federal 24 2&4	H-15511	20	20
11/04/92	Texaco	Getty Federal 24 1	H-15512	50	65
11/09/92	AA Oilfield Service	State AB SWD	H-15516	250	250
11/10/92	Warren Petroleum	Saunders Plant	H-15518	40	40
11/11/92	Warren Petroleum	Saunders Plant	Verbal by Ray Smith	65	65
11/17/92	Anadarko	Metex Supply Battery	H-15527	35	35
11/19/92	AA Oilfield Service	State AB SWD	H-15528	375	375

Total Barrels.....870

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION TREATING PLANT OPERATOR'S MONTHLY REPORT

OIL CONSER. ON DIVISION Month of October 1992 Controlled Recovery Inc. RECE, VED P.O. Box 369 (State) (Street) TOTAL STOCKS BIRBLINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME Controlled Recovery Inc. Halfway Disposal **-**0- · -0-DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) LOCATION BARRELS PLANT NAME Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS thereby certify that this report is true and complete to the best of my knowledge and belief.

Controlled Recovery Inc.

Bloky Johnesk yor Robert Whittemore Tillo General Manager

Controlled Recovery Inc C-117 October 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
10/02/92	Union Oil of California	Red Hills Unit #2	H-15441	100	70
10/05/92	Conoco	Baish B Battery	H-15445	30	45
10/06/92	ABC Rental Tool	Yard Pit	H-15451	200	200
10/09/92	Phillips	Denton	H-15460	60	60
10/14/92	Conoco	Baish B Battery	H-15466	100	70
10/21/92	Lynx Petroleum	B Lee State Battery	H-15479	40	36
10/23/92	AÁ Oilfield	Hobbs Yard	H-15483	250	85
10/30/92	Homco	Hobbs Yard	H-15499	60	75

Total Barrels......641

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION BANTA FK, NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1

- TREATING PLANT OPERATOR'S MONTHLY REPORT

Report ofControlled Recovery Inc	RECLIED Month of Septe	ember 1992
Address P.O. Box 369 (Street)	92 NC 7 15 PM 8 59 Hobbs	NM 88240 (State)
. (511681)	(SNI)	(oldis)
	LINE OIL BEGINNING OF MONTH (Attach additional shee	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL PLANTS	-0-
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Controlled Recovery Inc.	Halfway Disposal	-0- ·
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Controlled Recovery Inc.	Halfway Disposal	-0-
	TOTAL ALL PLANTS	
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I hereby certify that this report is true and complete to the best of my knowledge and bellef.

Berky Johncox for Robert Whitemers, General Manager

Controlled Recovery Inc.

Dois 10/8/92

Controlled Recovery Inc C-117 September 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
09/02/92 09/09/92 09/18/92 09/21/92	AA Oilfield Service Jim's Water Service Two State Tank Rental Penroc	State AB SWD #1 Artesia Yard Hobbs Yard State AF	H-15385 A-6062 H-15404 H-15419	250 96 yds 0 35	250 96 yds 3.88 yds 40
				rels !s	

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NAME OF TREATING PLANT OPERATOR _____ Controlled By Becky Johnson for Robert I thattemere

OIL CONSERVATION DIVISION P 0. 80 R 2048 BANTA FK, NEW MEXICO 87501

FORD C-118
Revised 10-1-78
Sheet 1

TREATING PLANT OPERATOR'S MONTHLY REPORT

P.O. Box 369		Month of Augus	NM 88240
P.O. BOX 369 (Street)	<u> 192 SEº 28 PM 9 37¹</u>	(City)	(State)
TOTAL STOCKS PI	PELINE OIL BEGINNING OF MON	TH (Attach additional shee	ts if necessary)
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Controlled Recovery Inc.

Tille General Manager

Doto 9/25/92

Controlled Recovery Inc C-117 August 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
08/03/92	AA Oilfield Service	Conoco MCA Battery #3	H-15340	140	210
07/31/92	AA Oilfield Service	State AB SWD	H-15334	400	377
08/04/92	Arco Oil and Gas	B.J. Barber	H-15341	75	103
08/07/92	Arco Oil and Gas	A.M. York	H-15342	40	25
08/07/92	Two State Tank Rental	Hobbs Yard	H-15337	10	12 yds
08/11/92	Coastal Oil and Gas	State 32	H-15352	120	120 ´
08/10/92	AA Oilfield Service	Hobbs Yard	H-15346	15	14.4 yds
08/25/92	Trident NGL	Bluitt Plant	H-15376	60	60 [°]
08/31/92	Homco	Hobbs Yard	H-15382	120	120
08/31/92	LB Simmons	Denius Federal #1	H-15370	55	55
08/31/92	Yates	Howe TG Fed #1	H-15384	50	50
			Total Barrels Total Yards		

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OIL CONSERVATION DIVISION SANTA FK, NEW MEXICO 87501

· TREATING PLANT OPERATOR'S MONTHLY REPORT

OIL CONSER: UN DIVISION Month of July, 1992 Controlled Recovery Inc. Report of P.O. Box 369 88240 TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS -0-TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0- · -0-DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) FROM BARRELS TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS

Thereby certify that this report is true and complete to the best of my knowledge and bellef.

Controlled Recovery Inc.

NAME OF TREATING PLANT OPERATOR CONTLICTION RECEIPTION OF TREATING PLANT OPERATOR ROBERT WHITEMERS General Manager

2/10/02

Controlled Recovery Inc C-117 July 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
07/06/92	McCasland Disposal	Atha #1	H-15278	400	570
07/07/92	Conoco	MCA Batt 2	H-15280	120	105
07/08/92	Pyramid	West Pearl Queen Battery	H-15285	55	55
07/08/92	A.A. Oilfield	State "AB" SWD #1	H-15289	250	235
07/10/92	Conoco	MCA Battery 1	H-15292	250	175
07/13/92	Conoco	MCA Battery 3	H-15298	275	155
07/16/92	Homco	Hobbs Yard	H-15303	110	150
07/01/92	Dakota Resources	Big Eddy SWD #100	A-5931	250	320
07/10/92	Enron Oil and Gas	Loving 36 State #1	A-5939	26	25

Total Barrels......1790

OF NEW MEXICO MINERALS DEPARTMENT

OIL CONSERVATION DIVISION P. O. SON 2016 SANTA FE, NEW MEXICO 87801

TREATING PLANT OPERATOR'S MONTHLY REPORT OIL CONSERVEND DIVISION

RECE VED

7-13-92

Doto_

Controlled Recovery Inc.	Month of Jur	92 ¹ 98 ² 16 67 8 50
P.O. Box 369	Hobbs	NM
ess P.U. BOX 309 (Street)	(City)	(State)
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Controlled Recovery Inc.	Halfway Diapogal	9
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	TOTAL ALL PLANTS	- 0-

Controlled Recovery Inc.

General Manager

Controlled Recovery Inc C-117 June 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
06/01/92 06/01/92 06/11/92 06/11/92 06/17/92 06/24/92 06/29/92 06/30/92	A.A. Oilfield Kem Oil Co. Unocal A.A. Oilfield Homco Warren Petroleum Texaco Homco	State AB #1-SWD ML Gains #4 Gulf Fed 1-12 Hobbs Yard Hobbs Yard Warren Plant State H #2 Hobbs Yard	H-15200 H-15201 H-15222 H-15223 H-15238 H-15252 H-15259 H-15262	250 15 20 15 yds 65 30 35 205	235 15 25 22 yds 60 30 35 205
				els ls	

OIL CONSERVATION DIVISION FOR SON 2018 BANTA FE, NEW MEXICO 97301 TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 10-1-78 Sheet 1

Controlled Recovery Inc.	OIL CO Month of May 19	NSERVE ON DIVISION
dress P.O. Box 369 (Street)	Hobbs '92 J	UN 8 AM 919
TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional sheet	is if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
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Controlled Recovery Inc.	Halfway Disposal	-0-
Controlled Recovery Inc.	Halfway Disposal	-0-
Controlled Recovery Inc.	Halfway Disposal	-0-

I hereby certify that this report is true and complete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR ___ CONTROlled Recovery Inc.

By Buckey Johnson General Manager

____ Doro 6-4-92

Controlled Recovery Inc C-117 May 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
05/12/92	Enron Oil and Gas	James Ranch #14	A-5777	60	92
05/01/92	Yates Petroleum	Sombrero State	H-15140	95	95
05/04/92	Conoco	MCA Filter Station	H-15141	250	110
05/04/92	A.A. Oilfield	State AB SWD	H-15145	450	400
05/01/92	Graham Resources	State OE 13	H-15148	35	35
05/07/92	LLano Inc.	Rattlesnake Flats Delivery	H-15152	100	83
05/08/92	Unocal	Lea State J	H-15153	45	45
05/11/92	Conoco	Gilmore-Houston-Chambers	H-15162	40	20
05/14/92	Tamarack Petroleum	Bronco Wolfcamp Unit #4	H-15169	30	40
05/19/92	Samedan Oil Corp	Langlie Mattix B-4 Penrose	H-15177	75	60
05/20/92	Zachary Oil Operating	Federal GPS	H-15179	30	30

Total Barrels......1010

OIL CONSERVATION DIVISION P.O. BON JOHN SANTA FR. NEW MEXICO 87801

Form C-118 Revised 10-1-78 Sheet 1

· TREATING PLANT OPERATOR'S MONTHLY REPORT

Report of Controlled Recovery Inc.	Month of April	1992
Address P.O. Box 369 (Street)	Hobbs (City)	NM (State)
TOTAL STOCKS PIPELIN	E OIL BEGINNING OF MONTH (Attach additional sheet	s if necessary)
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Controlled Recovery Inc.	Halfway Disposal	-0-
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Controlled Recovery Inc.	Halfway Disposal	-0-
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PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	-0-
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	FOTAL ALL PLANTS	-0-
	TOTAL ALL TEAMIN	

I hereby certify that this report is true and complete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR Controlled Recovery Inc.

Ole General Manager

Doto 6-4-92

Controlled Recovery Inc C-117 April 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
03/31/92	Phillips Petroleum	M.E. Hale Battery	H-15079	400	307
04/02/92	Оху	State DW #4 SWD	H-15080	50	80
04/07/92	McCasland Disposal	Atha #1	н-15086	150	480
04/15/92	Coastal Oil and Gas	State 5 SWD	H-15098	600	80
04/15/92	Mewbourne Oil Co	Gulf State	H-15103	25	25
04/20/92	Phillips	Philmex Batt #3	H-15121	50	50
04/22/92	AA Oilfield	State AB #1 SWD	H-15129	125	120
04/23/92	ABC Rental Tool	Yard Pit	H-15130	370	350
04/29/92	AA Oilfield	Hobbs Yard	н-15135	10 yd	20 yd

OIL CONSERVATION DIVISION P O. SOR 2088 BANTA FE, NEW MEXICO 97501

Form C-118 Revised 10-1-78 Sheet 1

TREATING PLANT OPERATOR'S MONTHLY REPORT ALL CONSERTS ON DIVISION

Report of _	Controlled Recovery Inc.	RE .: vED Month of Mar	ch 1992
Address	P.O. Box 369 (Street)	(C2 C7 (24 AM 8 58 Hobbs	NM (State)
Γ	TOTAL STOCKS PIPEL IN	HE OIL BEGINNING OF MONTH (Attach additional shee	ets if necessary)
	PLANT NAME	LOCATION	BARRELS
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	Controlled Recovery Inc.	Halfway Disposal	-0-
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		TOTAL ALL PLANTS	-0-
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	PLANT NAME	LOCATION	BARRELS
	Controlled Recovery Inc.	Halfway Disposal	-0
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ļ	PLANT NAME	LOCATION	BARRELS
	Controlled Recovery Inc.	Halfway Disposal	-0-
			·
		TOTAL ALL PLANTS	-0-

Thereby certify that this report is true and comprete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR Controlled Legly John cox of Robert Whitemore

Controlled Recovery Inc. General Manager

4-20-92

Controlled Recovery Inc C-117 March 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
02/28/92	Marathon Oil Company	Lea Unit SWD	н-14998	125	45
03/04/92	A.A. Oilfield	Alpha Phi Crude	H-15009	200	190
03/10/92	Texaco	J.R. Phillips	H-15021	50	50
03/12/92	Jack Phillips	NM CR State	H-15030	110	110
03/17/92	Fina Oil	Horton Federal	H-15048	110	100
03/17/92	Marathon	Hamon Fed Comm #1	H-15049	50	30
03/23/92	Homco	Hobbs Yard	H-15058	65	25
03/30/92	AA Oilfield	Alpha Phi Crude	H-15074	1000	1125
03/31/92	Texaco	CH Weir A #14	H-15025	35	35

Total Barrels......1710

OIL CONSERVATION DIVISION P. O. BOX 2014 BANTA FE, NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1

· TREATING PLANT OPERATOR'S MONTHLY REPORT

Report of	Controlled Recovery Inc.	Month of Febru	ary 1992
Address	P.O. Box 369	Hobbs	NM (State)
	. (Street)	(City)	(Sidile)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional shee	ts if necessary)
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	Controlled Recovery Inc.	Halfway Disposal	-0-
			-0-
<u> </u>		TOTAL ALL PLANTS	

Thereby certify that this report is true and complete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR ___ Controlled Recovery Inc.

Herbil Johnson (hor) KNyrt Whittemas 1- General Manager

3-11-92

Controlled Recovery Inc C-117 February 1992

Permit	Lease	Lease	Permit	Estimated Volume	Actual Volume
Date	Operator	Name	Number	(BBLS)	(BBLS)
02/26/92	Oxy, USA	Merland A #2	A-5561	88	88
02/03/92	Doyle Hartman	Britt A-6	H-14886	100	120
02/03/92	Marathon	Johnson "B" Fed A/C 1 Bty	H-14890	75	75
02/07/92	Conoco	State H-35 Heater 4480	H-14908	20	20
02/07/92	Phillips	Phillips State E #1	H-14911	100	100
02/07/92	Amerada Hess	W.D. Haruney #1	H-14912	15	15
02/07/92	AA Oilfield	State AB SWD #1	H-14914	125	145
02/10/92	AA Oilfield	Hobbs Yard	H-14917	20	20
02/10/92	Phillips	Loco Hills Booster	H-14920	75	60
02/11/92	Marathon Oil	Hamon #1	H-14921	25	35
02/13/92	Phillips	Phillips Booster	H-14935	200	35 75
02/17/92	Conoco	MCA Battery 1	H-14957	80	42
02/19/92	Conoco	MCA 296	H-14964	45	45
02/19/92	Phillips	Ranger Lake Unit	H-14966	120	120
02/24/92	AA Oilfield	State AB SWD #1	H-14981	125	105
02/25/92	Conoco	MCA Battery 3	H-14986	50	50
02/27/92	Marathon	SEU-SRQ Water Flood Station	H-14994	30	35
02/27/92	Koch	Scharb	H-14996	30	20

Total Barrels......1170

OIL CONSERVATION DIVISION SANTA FE, NEW MEXICO 87501



Revised 10-1-78

Dote 2/7/92

TREATING PLANT OPERATOR'S MONTHLY REPORT OIL CONSER. IN DIVISION TV Inc. REC: VED JA

P.O. BOX 369 General Control TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Antach additional sheets if accessory) PLANT NAME Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc. Halfway Disposal Controlled Recovery Inc.	Report of	Controlled Recovery Inc.	KELL YEV JAIN	lary 1992
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FOTAL ALL PLANTS -0-			TOTAL ALL PLANTS	-0-

Controlled Recovery Inc.

General Manager

Controlled Recovery Inc C-117 January 1992

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
12/31/91	AA Oilfield	AB SWD Plant	H-14808	175	197
01/02/92	Conoco	MCA Unit Bty 2	H-14816	150	179
01/02/92	B&E, Inc.	Tuzlu Kopek	A-5425	1000	2930
01/06/92	Hanson Operating	Max Gutman	H-14821	10	10
01/06/92	Trident NGL, Inc.	Bluitt Plant	H-14822	120	810
01/13/92	Amerada Hess	Joyce Pruitt	H-14835	90	90
01/15/92	Conoco	MCÁ Battery 4	H-14843	150	93
01/21/92	Conoco	State H-35	H-14855	80	25
01/23/92	Anadarko	Breedlove A Battery	letter	50	35
		•	from J. S	exton	
01/30/92	Conoco	Anderson Ranch Battery	H-14880	100	42

Total Barrels......4411

ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION F. O. BOR 2024 BANTA FE, NEW MEXICO 87501



Form C-118 Revised 10-1-78 Sheet 1

TREATING PLANT OPERATOR'S MONTHLY REPORT
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I hereby certify that this report is true and compiete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR

Controlled Recovery Inc.

General Manager

TOTAL ALL PLANTS

2/7/92

Controlled Recovery Inc C-117 December 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
12/09/91 12/10/91 12/18/92 12/18/91	Grace Petroleum Oxy USA Conoco Homco	Cline Fed Battery Byers B Battery State H - 35 Hobbs Yard	H-14746 H-14757 H-14781 H-14783	30 80 25 125	30 155 30 125
			Total Barr	els	340

OIL CONSERVATION DIVISION P. O. BOX 2024 BANTA FE, NEW MEXICO 87501



Form C-118 Revised 10-1-78 Sheet 1

Doto 12-12-91

- TREATING PLANT OPERATOR'S MONTHLY REPORT

OIL CONSERVATION DIVISION

	Controlled Recover	y Inc. REFF VED Month of Nove	ember 1991
	P.O. Box 369	'91 DET 13 AM 8н 95 s	NM
	(Street)	(City)	(State)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional sheet	s if necessary)
	PLANT NAME	LOCATION	BARRELS
Control	led Recovery Inc.	Halfway Disposal	-0-
		TOTAL ALL PLANTS	-0-
		OIL RECOVERED (Attach additional sheets if necessar	
	PLANT NAME	LOCATION	BARRELS
Control	led Recovery Inc.	Halfway Disposal	-0-
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		TOTAL ALL PLANTS	-0-
	DELIVERIES PI	PELINE OIL (Attach additional sheets if necessary)	
	FROM	то	BARRELS
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		TOTAL ALL PLANTS	-0-
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	PLANT NAME	LOCATION	BARRELS
Control	led Recovery Inc.	Halfway Disposal	-0-
			· .
	· .	TOTAL ALL PLANTS	-0-

Controlled Recovery Inc.

General Manager

bhneax for Robert Whittemore

Controlled Recovery Inc C-117 November 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
11/04/91	Homco	Hobbs Yard	H-14656	125	115
11/07/91	Bonneville Fuels	Asland #1	H-14713	90	120
11/08/91	Baber Well Service	NM DL State #1	H-14720	200	180
11/08/91	O'rion Services	Sawyer Battery	H-14721	125	105
11/11/91	Homco	Hobbs Yard	H-14726	125	130
11/18/91	A.A. Oilfield Serv	State AB SWD #1	H-14703	125	125
11/18/91	A.A. Oilfield Serv	State AB SWD #1	H-14704	600	460
11/22/91	Chaparral	Lea #1	H-14680	250	130
11/25/91	ABC Rental Tool	Yard Pit	н-14681	200	100

Total Barrels.....1465

NAME OF TREATING PLANT OPERATOR.

OIL CURSENVATION DIVISION P. O. BOX 1016 RANTA FE. NEW MEXICO 87501

TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 10-1-78 Sheet 1

OIL CONSERVE ON DIVISION

11 of	Controlled Recovery	7 Inc. Month of 160	ober 1991
	P.O. Box 369	'91HAND: 18 AM	9 37 NM
	(Street)	(City)	(State)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional shee	ets if necessary)
	PLANT NAME	LOCATION	BARRELS
			
Co	ontrolled Recovery Inc.	Halfway Disposal	-0-
		TOTAL ALL PLANTS	-0-
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	PLANT NAME	LOCATION	BARRELS
Co	ontrolled Recovery Inc.	Halfway Disposal	-0-
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		TOTAL ALL PLANTS	-0-
	TOTAL STOCKS PIPELIN	E OIL END OF MONTH (Attach additional sheets if n	ecessary)
	PLANT NAME	LOCATION	BARRELS
Co	ontrolled Recovery Inc.	Halfway Disposal	-0-
			i
			,

Controlled Recovery Inc.

Johncox for Robert Whittemore Tirlo General Manager Doro 11-15-91

Controlled Recovery Inc C-117 October 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
10/1/91	SPX Charm	Pearl Queen Unit	H-14574	60	60
10/3/91	Conoco	MCA Unit Battery 2	H-14576	70	22
10/8/91	Marathon	Lea Unit #13	H-14593	25	25
10/9/91	Homco	Hobbs Yard	H-14596	125	125
10/17/91	Homco	Hobbs Yard	H-14615	125	120
10/18/91	Chevron	Lea "G" State	H-14620	35	60
10/18/91	Chevron	Artesia San Andres	H-14619	100	100
10/21/91	Purvis Oil	Gladiola SWD	H-14621	600	690
10/25/91	A.A. Oilfield Serv	Alpha Phi Crude	H-14635	375	340
					4=45

Total Barrels......1542

NAME OF TREATING PLANT OPERATOR _

OIL CONSERVATION DIVISION BANTA FE, NEW MEXICO 87801

Form C-118 Revised 10-1-78 Sheet 1

Dote 10/29/91

General Manager

TREATING PLANT OPERATOR'S MONTHLY REPORT

ort of	Controlled Recovery Inc.	Month of Sept	ember
lress	P.O. Box 369	Hobbs,	NM
	(Street)	(City)	(State)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional she	ets if necessary)
	PLANT NAME	LOCATION	BARRELS
Con	trolled Recovery Inc.	Halfway Disposal	₩ - 0-
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		TOTAL ALL PLANTS	-0-
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	PLANT NAME	LOCATION	BARRELS
Cont	trolled Recovery Inc.	Halfway Disposal	-0-
		TOTAL ALL PLANTS	-0-

Controlled Recovery Inc C-117 September 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
9/9/91	Homco	Hobbs Yard	H-14509	125	125
9/13/91	ABC Rental	Eunice Yard	H-14518	200	100
9/17/91	Homco	Hobbs Yard	H-14526	125	120
9/17/91	AA Oilfield Services	State Ab SWD #1	H-14254	125	105
9/24/91	Conoco	MCA Battery #2	H-14545	115	50
9/25/91	Homco	Hobbs Yard	H-14550	125	120
9/26/91	Оху	Fed-R	H-14553	20	25
9/27/91	Oryx	Jennings B	H-14557	30	220
			Total Barr	els	865
8/23/91	AA Oilfield Services	Hobbs Yard	H-14479	20 yd	22 yd
			Total Yard	ls	22

OIL CONSERVATION DIVISION P. O. BOR 1084 BANTA FE, NEW MEXICO 97801

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· TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 10-1-78 Sheet 1

Report of	CONTROLLED RECOVERY I	NC Month of AU	GUST 1991
	P.O. BOX 369	HOBBS	NM
Address	(Street)	(City)	(State)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional shee	ts if necessary)
	PLANT NAME	LOCATION	BARRELS
CONTI	ROLLED RECOVERY INC	HALFWAY DISPOSAL	-0-
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		TOTAL ALL PLANTS	-0-
		L RECOVERED (Attach additional sheets if necessa	
	PLANT NAME	LOCATION	BARRELS
CONTI	ROLLED RECOVERY INC	HALFWAY DISPOSAL	-0 -
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		TOTAL ALL PLANTS	-0-
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	FROM	то	BARRELS
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		TOTAL ALL PLANTS	-0-
	TOTAL STOCKS PIPELINE	OIL END OF MONTH (Attach additional sheets if ne	ecessary)
	PLANT NAME	LOCATION	BARRELS
CONTR	ROLLED RECOVERY INC	HALFWAY DISPOSAL	-0-
			-0-
		TOTAL ALL PLANTS	-()

NAME OF TREATING PLANT OPERATOR ahalled Lecures, Inc.

Title GENERAL MANAGER Dote 9/9/91

Controlled Recovery Inc C-117 August 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
8/1/91	AA Oilfield Services	State AB #1 SWD	H-14405	125	108
8/12/91	Pyramid Energy	West Pearl Queen Unit	H-14437	100	100
8/15/91	Conoco	MCA Unit Battery 3	H-14446	40	6
8/7/91	Oxy USA	FED AA	H-14442	20	20
8/8/91	Oxy USA	FED AA	H-14429	45	45
8/8/91	OXY USA	FED AA	H-14430	35	35
8/22/91	AA Oilfield Services	Hobbs Yard	H-14473	200	150
8/27/91	Homco	Hobbs Yard	H-14482	150	115
8/22/91	Conoco	MCA Unit Battery	H-14472	100	75
8/23/91	Sonny's Oilfield	Hobbs State #3 SWD	H-14476	250	630
			Total Bar	rels	1284

OIL CONSERVATION DIVISION P. O. BON 2018 SANTA FE, NEW MEXICO 07501



Form C-118 Revised 10-1-78 Sheet 1

Doto 9/9/91

GENERAL MANAGER

TREATING PLANT OPERATOR'S MONTHLY REPORT OIL CONSERV JN DIVISION

rt of	CONTROLLED RECOVERY	INC REC: /ED Month of JULY	1991
e s s	P.O. BOX 369 (Street)	'91 SE ^p 1 новир 9 25	NM (State)
	TOTAL STOCKS PIPELINE	OIL BEGINNING OF MONTH (Attach additional shee	ts if necessary)
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CONT	FROLLED RECOVERY INC	HALFWAY DISPOSAL	-0-
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		TOTAL ALL PLANTS	-0-
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CONT	TRALLED DECOMEDY INC	HALBUAY DIGDOGAL	0
CON.	IROLLED RECOVERY INC	HALFWAY DISPOSAL	-0-
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		TOTAL ALL PLANTS	-0-
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	PLANT NAME	E OIL END OF MONTH (Attach additional sheets if ne LOCATION	BARRELS
CONT	TROLLED RECOVERY INC	HALFWAY DISPOSAL	-0-
COM	TROPHED RECOVERT INC	HALFWAI DISPOSAL	-0-
		. •	
i			
	•		
		FOTAL ALL FLANTS	-0-

Controlled Recovery Inc C-117 July 1991

Permit Date	Lease Operator	Lease Name	Permit Number	Estimated Volume (BBLS)	Actual Volume (BBLS)
7/12/91	Homco International	Hobbs Yard	H-14350	130	115
7/12/91	AA Oilfield Services	State AB SWD #1	H-14349	300	185
7/16/91	AA Oilfield Services	State AB SWD #1	H-14356	600	330
	ABC Rental Tool	ABC Yard	H-14369	250	220
8/2/91	Oryx Energy	Jennings Fed Comm Tank Batt	H-14409	33	33
7/31/91	Homco International	Hobbs Yard	H-14404	130	115
			Intel Rer	rale	999

OIL CONSERVATION DIVISION P. O. BON 1018 BANTA FE, NEW MEXICO 97501



Form C-118 Revised 10-1-78 Sheet 1

TREATING PLANT OPERATOR'S MONTHLY REPORT

OIL CONSERVE TON DIVISION

on of <u>Controlled Recovery Inc</u>	REG VED Month of MAY	ch 1991
Iress P.O. Box 369	91 APR 25 AM 9 55 Habba	New Mexico
(Street)	(City)	(State)
TOTAL STOCKS PIPELI	NE OIL BEGINNING OF MONTH (Attach additional sheets	if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	- 0 -
	TOTAL ALL PLANTS	Θ
TOTAL PIPELINI	E OIL RECOVERED (Attach additional sheets if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	
		•
	TOTAL ALL PLANTS	Cj
DELIVERIES	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	ТО	BARRELS

TOTAL STOCKS PIPELINE OIL END OF MONTH (Artach additional sheets if necessary)

PLANT NAME

LOCATION

BARRELS

Controlled Recovery Inc.

Halfway Disposal

'I hereby certify that this report is true and complete to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR.

By Joh XMM/c

THE SAIN SIMM

Doto 9/15/91

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

TANK CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION OF MISCELLANEOUS HYDROCARBONS AND DISPOSAL PERMIT

11 /> 000
PERMIT NUMBER $\frac{H/3998}{}$
Operator or Owner HOMCO INTERNATIONAL, INCAddress P.O. BOX 2442 HOUSTON TEXAS
Lease Name If Sediment Oil Yard Location 3000 W. COUNTY RD HOBBS, NM UL Sec. Twp. Rge.
OPERATION TO BE PERFORMED
☐ Tank Cleaning ☐ Sediment Oil Removal ☐ Transportation of Miscellaneous Hydrocarbons
Operator or Owner Representative authorizing work HOMCO INTERNATIONAL, INC.
Date Work to be Performed 3-2-91 TANK CLEANING DATA
Tank NumberVolume
Tank Type Volume Below Load Line
SEDIMENT OIL OR MISCELLANEOUS HYDROCARBON DATA
Sediment Oil from: Pit Cellar Other* MISCELLANEOUS OIL
Tank Bottoms From: Pipeline Station Crude Terminal Refinery Other*
Catchings From: Gasoline Plant Gathering Lines Galt Water Disposal System Gother*
Pipéine Break Oil or Spill 🗀
*Other (Explain) NON-HAZARDOUS OILY WASTE WATER/SLUDGES FROM ONSITE STEAM
CLEANING OF OILFIELD RENTAL EQUIPMENT. (SEE ATTACHEMENT A)
VOLUME AND DESTINATION
Estimated Volume 130 Bbls. Field test volume of good oilBbls. [Not required prior to Division approval.]
Destination (Name and Location of treating plant or other facility) CONTROLLED RECOVERY, INC. HALFWA
NM MAILING ADDRESS 5600 CARLSBAD, HWY. HOBBS, NEW MEXICO 88240
DESTRUCTION OF SEDIMENT OIL
Destruction by: Burning Pit Disposal Use on Roads or firewalls Other
(Explain)
ocation of Destruction
luslification of Destruction
APPLICATION MAY BE MADE BY EITHER OF THE FOLLOWING:
hereby certify that the information above is true and complete to the best of my knowledge and belief. Dwner HOMCO INTERNATIONAL, XNC. Transporter GENERAL PETROLEUM
CONDAD I DE
012
Date 3-1-91 Date 3-1-91
ORIGINAL SIGNED BY OIL CONSERVATION DIVISION BONNIE PRICHARD
Approved By Dale Dale

A COPY OF THIS FORM MUST BE ON LOCATION DURING TANK CLEANING, REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS HYDROCARBONS, AND MUST BE PRESENTED WITH TANK BOTTOMS, SEDIMENT OIL MISCELLANEOUS HYDROCARBONS AT THE TREATING PLANT TO WHICH IT IS DELIVERED.

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	Operator
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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

SANTA FE, NEW MEXICO 87501

NK CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION OF MISCELLANEOUS HYDROCARBONS AND DISPOSED

TANA CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION OF MISCELLANEOUS HYDROCARBONS AND DISPOSAL PERMIT
Operator or Owner HOMCO INTERNATIONAL, INC. P.O. Box 2442 Houston, Texa
Lease Name If Sediment Oil Yard Location 3000 W. County Rd. Hobbs, N
OPERATION TO BE PERFORMED
☐ Tank Cleaning ☐ Sediment Oil Removal ☐ Transportation of Miscellaneous Hydrocarbons
Operator or Owner Representative authorizing work HOMCO INTERNATIONAL, INC.
Date Work to be Performed 3-21-91
TANK CLEANING DATA
Tank Number Volume
Tank Type Volume Below Load Line
SEDIMENT OIL OR MISCELLANEOUS HYDROCARBON DATA
Sediment Oil from: Pit Cellar Dk Other* MISCELLANEOUS OIL
Tank Bottoms From: Pipeline Station Crude Terminal Refinery Other*
Catchings From: Gasoline Plant Gathering Lines Salt Water Disposal System Other*
Pipeline Break Oil or Spiil
*Other(Explain) Non-hazardous oily waste water/sludges from onsite steam
cleaning of oilfield rental equipment. (see attachment A)
VOLUME AND DESTINATION
Estimated Volume 130 Bbls. Field test volume of good oilBbls. (Not required prior to Division approval.)
Destination (Name and Location of treating plant or other facility) Controlled Recovery, Inc. Halfwa
NM Mailing Address 5600 Carlsbad, Hwy Hobbs, NM 88240
DESTRUCTION OF SEDIMENT OIL
Destruction by: Burning Pit Disposal Use on Roads or firewalls C Other
(Explain)
Location of Destruction
Justification of Destruction
APPLICATION MAY BE MADE BY EITHER OF THE FOLLOWING:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.
Owner Homco International Inc. General Petroleum
By Conrad Lee By Dou (Mill)
Tille District Manager Tille DICALLONG
Dale 3-21-91 Dale 5-01-91
ORIGINAL SIGNED BY OIL COMSERVATION DIVISION Approved By Dale MAR 2 1'91
A CORY OF THE FORM MUST BE ON LOCATION DURING TANK CLEANING REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS

A COPY OF THIS FORM MUST BE ON LOCATION DURING TANK CLEANING, REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS HYDROCARBONS AT THE THEATING BLANT TO WHICH IT IS DELIVERED.

OIL CONSERVATION DIVISION P. O. BOX 2014 SANTA FE, NEW MEXICO 87801



Form C-118 Revised 10-1-78 Sheet 1

TREATING PLANDIDER NOTOR'S MONTHLY REPORT OIL CONSERVED

New Mexico TOTAL STOCKS PIPELINE OIL BEGINNING OF MONTH (Attach additional sheets if necessary) BARRELS PLANT NAME LOCATION - 0 -Controlled Recovery Inc. Halfway Disposal -0-TOTAL ALL PLANTS TOTAL PIPELINE OIL RECOVERED (Attach additional sheets if necessary) PLANT NAME LOCATION BARRELS Controlled Recovery Inc. Halfway Disposal - 0 -TOTAL ALL PLANTS DELIVERIES PIPELINE OIL (Attach additional sheets if necessary) BARRELS FROM TOTAL ALL PLANTS TOTAL STOCKS PIPELINE OIL END OF MONTH (Attach additional sheets if necessary) PLANT NAME BARRELS LOCATION Controlled Recovery Inc. Halfway Disposal TOTAL ALL PLANTS I hereby certify that this report is true and complete to the best of my knowledge and belief.

Tirle Manager

NAME OF TREATING PLANT OPERATOR ___ Controlled Recovery Inc.

RECEIVED

FEB 2 6 1991

COD OTHER

FILE: CRI117

CONTROLLED RECOVERY INC.

C - 117 RECAP

PERMIT	LEASE	LEASE	PERMIT	ESTIMATED A	CTULLY
DATE	OPERATOR	MAME	NUMBER	VOLUMES (BBLS) VOLU	MES (BBLS)
=======================================			*********		***********
01/08/91	HONCO INTERNATIONAL	FACILITY 3000 W COUNTY RD	H-13826	130	108
01/24/91	HONCO INTERNATIONAL	FACILITY 3000 # COUNTY RD	H-13871	130	130

PECHYED

FEB 2 6 1991

OCO HOGAS OSTICE

OIL CONSERVATION DIVISION BANTA FE, NEW MEXICO 67301

TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118
Revised 10-1-78
Sheet 1
N DIVISION

RECE VED 'Q1_mon

t of	Month of Fablr ii	開刊 9 09
ss_P.O. Box 369	Hobbs	New Mexico
(Street)	(City)	New Mexico (State)
TOTAL STOCKS PIPELIN	HE OIL BEGINNING OF MONTH (Attach additional shee	ets if necessary)
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc.	Halfway Disposal	- 0 -
	•	
·		
•		,
	TOTAL ALL PLANTS	l
	OIL RECOVERED (Attach additional sheets if necessary	
PLANT NAME	LOCATION	BARRELS
Controlled Recovery Inc	Halfway Disposal	- 0 -
<u>-</u>		
	· TOTAL ALL PLANTS	- 0 -
DELIVERIES F	PIPELINE OIL (Attach additional sheets if necessary)	
FROM	то	BARRELS
	·	
		- 0 -
	TOTAL ALL PLANTS	- 0 -
TOTAL STOCKS PIPELL	NE OIL END OF MONTH (Attach additional sheets if no	<u> </u>
PLANT NAME	LOCATION	BARRELS
		*
Controlled Recovery Inc.	Halfway Diazzzz	_
nocovery inc.	Halfway Disposal	- 0 -
		•
	FOTAL ALL PLANTS	-0-

"I hereby certify that this report is true and . rmpr. to to the best of my knowledge and belief.

NAME OF TREATING PLANT OPERATOR _

Mana.

3/11/61

FILE: CRITIT

CONTROLLED RECOVERY INC. C - 117 RECAP

PERMIT DATE		LEASE OPERATOR	LEASE NAME	NUMBER	VOLUMES (BOLS) VOLUME	
02/11/91	номсо	INTERNATIONAL INTERNATIONAL	FACILITY 3000 W COUNTY RD FACILITY 3000 W COUNTY RD CONTAMINATED SOILS	H-13932 H-13914	130	130
			50IL			130 543.10

OIL CONSERVATION DIVISION P. O. BOR 2018 SANTA FE, NEW MEXICO 87801



TREATING PLANT OPERATOR'S MONTHLY REPORT

Form C-118 Revised 10-1-78 Sheet 1

parr of <u>Controlled Recovery Inc</u>	Janua	January 1991		
	Hobbs,	New Mexico		
dress P.U. BUX 767	(City)	(State)		
TOTAL STOCKS PIPELIN	E OIL BEGINNING OF MONTH (Attach additional shee	ts if necessary)		
PLANT NAME	LOCATION	BARRELS		
Controlled Recovery Inc.	Halfway Disposal	- 0 -		
	TOTAL ALL PLANTS	0		
TOTAL PIPELINE	OIL RECOVERED (Attach additional sheets if necessa	- 0 - rv)		
PLANT NAME	LOCATION	BARRELS		
Controlled Recovery Inc.	Halfway Disposal	- 0 -		
controlled kecovery inc.	nairway bisposai	- 0 -		
		•		
		•		
		·		
	TOTAL ALL PLANTS	0		
FROM	IPELINE OIL (Attach additional sheets if necessary)	0.4.00.51.6		
PROM	10	BARRELS		
		- 0 -		
		- 0 -		
	·			
	TOTAL ALL PLANTS	- 0 -		
TOTAL STOCKS PIPELIN	NE OIL END OF MONTH (Attach additional sheets if ne			
PLANT NAME	LOCATION	BARRELS		
Controlled Recovery Inc.	Halfway Disposal	- O -		
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NAME OF TREATING PLANT OPERATOR Controlled Recovery Inc.

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1-A

PIPELINE QUALITY OIL RECOVERED BY TREATING PLANTS

- ERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-13735	Homco International	Facility 3000 West County Road, Hobbs	. 589	- 0 -
H-13780	Homco International	Facility 3000 West County Rd., Hobbs	95	- 0 -
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<i>i</i> /	Transporter (2)

Form C-117 A Revised 2-1-82

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

TANK CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION OF MISCELLANEOUS HYDROCARBONS AND DISPOSAL PERMIT

	PERMIT NUMBER
	Address P.O. Box 2442 Houston, Tx.77252
Lease Name if Sediment OII N/A	Facility Location 3000 W.County Rd.Hobbs.NM
OPERATION TO BE PERFORMED	UL Sec. Twp. Rge. ' 20 185 385
\square Tank Cleaning \square Sediment Oil Removal $\square X$ Transporta	llon of Miscellaneous Hydrocarbons
Operator or Owner Representative authorizing work Homco	International, Inc.
Date Work to be Performed 12/21/90	
TANK CLEANING DATA	
Tank Number	Volume
Tank Type	Volume Below Load Line
SEDIMENT OIL OR MISCELLANEOUS HYDROCARBON DATA	
Sediment Oil from: Pit Deliar Dother* MISCELLANEOUS OIL	
Tank Bottoms From: Pipeline Station Crude Termina	I □ Refinery □ Other*
Catchings From: Gasotine Plant Gathering Lines	☐ Salt Water Disposat System ☐ Other*
Pipeline Break Oil or Spill 🗆	
*Other (Explain) Non-Hazardous Oily waste	water/sludges from onsite steam
cleaning of oilfield rental equipr	ment (see attachement A)
VOLUME AND DESTINATION	
Estimated Volume 750 Bbis. Field test volume of good (Not required prior to	
Destination (Name and Location of treating plant or other facility	Controlled Recovery, Inc.
Halfway, NM Mailing address 5600	Carlsbad Hwy. Hobbs, NM
DESTRUCTION OF SEDIMENT OIL	
Destruction by: Burning Plf Disposal Use on Road	s or firewalls
(Explain)	
Location of Destruction	
Justification of Destruction	
APPLICATION MAY BE MADE BY EITHER OF THE FOLLOWING:	
I hereby certify that the information above is true and complete	o the best of my knowledge and belief.
Owner Homco International, Inc.	Transporter Adoutifield Services
By Conrad Lee	By By
MMe District Manager	Tille President
Date 12/19/90	Date12/19/90
ORIGINAL SIGNED BY OIL CONSERVAT	DFC o α on α

A COPY OF THIS FORM MUST BE ON LOCATION DURING TANK CLEANING, REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS HYDROCARBONS, AND MUST BE PRESENTED WITH TANK BOTTOMS, SEDIMENT OIL MISCELLANEOUS HYDROCARBONS AT THE

ilo.	of Copies Required (5)
	TREDUTION BY CCD
	Santa Fe
	Fila
	Operator
一	





Form C-117 A Revised 2-1-82

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

SANTA FE, NEW MEXICO 87501 TANK CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION OF MISCELLANEOUS HYDROCARBONS AND DISPOSAL PERMIT PERMIT NUMBER 1373 Operator or Owner HOMCO INTERNATIONAL, INC Address P.O. BOX 2442, HOUSTON TEXAS facility 3000 WEST COUNTY ROAD, HOBBS, Lease Name If Sediment Oil N/AOPERATION TO BE PERFORMED 20 18'S 38 E ☐ Tank Cleaning ☐ Sediment Oil Removal 🕱 Transportation of Miscellaneous Hydrocarbons Operator or Owner Representative authorizing work $\underline{\hspace{0.1in} HOMCO} \underline{\hspace{0.1in} HOMCO} \underline{\hspace{0.1in} INTERNATIONAL}$, $\underline{\hspace{0.1in} INC}$. DECEMBER 7, 1990 Date Work to be Performed TANK CLEANING DATA Tank Number_ Volume Tank Type ___ Volume Below Load Line ___ SEDIMENT OIL OR MISCELLANEOUS HYDROCARBON DATA Sediment Oil from: Plt 🗆 Cellar XIX Other* MISCELLANEOUS OIL Catchings From: Gasoline Plant Gathering Lines ☐ Salt Water Disposal System ☐ Pipeline Break Oll or Spill 🔲 *Other (Explain) NON-HAZARDOUS OILY WASTE WATER/ SLUDGES FROM ONSITE STEAM CLEANING OF OILFIELD RENTAL EQUIPMENT. (SEE ATTACHEMENT A) **VOLUME AND DESTINATION** Estimated Volume 750 Bbis. Field test volume of good oil. (Not required prior to Division approval.) Destination (Name and Location of treating plant or other facility) $\underline{\texttt{CONTROLLED}}$ $\underline{\texttt{RECOVERY}}$, $\underline{\texttt{INC}}$. HALFWAY, NEW MEXICO MAILING ADDRESS: 5000 CARLSBAD HIGHWAY HOBBS, NM DESTRUCTION OF SEDIMENT OIL Destruction by:
Burning Pit Disposal Use on Roads or firewalls
Other (Explain) _ Location of Destruction _ Justification of Destruction ___ APPLICATION MAY BE MADE BY EITHER OF THE FOLLOWING: I hereby certify that the information above is true and complete to the best of my knowledge and belief. HOMCO INTERNATIONAL INC. Transporter, Owner_ CONRAD LEE DISTRICT MANAGER Title _ 12-4-90 Date Date ORIGINAL SIGNED BY OIL CONSERVATION DIVISION

A COPY OF THIS FORM MUST BE ON LOCATION DURING TANK CLEANING, REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS HYDROCARBONS, AND MUST BE PRESENTED WITH TANK BOITOMS, SEDIMENT OIL, MISCELLANEOUS HYDROCARBONS AT THE

DEC 0 4 '90

EDDIE W. SEAY

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-118 Revised 10-1-78 Sheet 1-A

PERMIT NUMBER	LEASE OPERATOR	LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
	PRODUCED WATER	84,560	1691.20	
				90 1 60
				ON DIVISION ON DIVISION RECTORED 190 NOU 30 AM 9 27
				AN DIVISION
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P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

OLE COMPERVATION DIVIDION Form C-118 Revised 10-1-78 Sheet 1-A

PERMIT NUMBER	LEASE OPERATOR	ON CONSET LEASE NAME	GROSS VOLUME SEDIMENT OIL	NET BBLS. P.L. OIL RECOVERED
H-13538 H-13564	Mobil Producing, T Coastal Oil & Gas	& NM Bridges State 26	306.00 180.00	30.60 9.00
			486.00	39.60
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