

AP - 110

**ANNUAL
REPORT**

2011

SUPPLEMENT 2

Supporting Documents Regarding Spills and Leaks in 2011

RECEIVED OGD
MAY 16 4 23 PM

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company: Navajo Refining Co. LLC	Contact: Aaron Strange
Address: 7406 South Main Lovington, N.M.	Telephone No. 575-748-3311
Facility Name: Lovington Plant	Facility Type: Petroleum Refinery

Surface Owner	Mineral Owner	Lease No.
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LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
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Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release: Gas Oil	Volume of Release: ~ 37 barrels	Volume Recovered: ~ 35 barrels
Source of Release: HEP pump station at Lovington Refinery	Date and Hour of Occurrence: 01/29/2011 ~ 09:00	Date and Hour of Discovery: 01/29/2011 ~ 09:00
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Left a voicemail with Carl Chavez from OCD in Santa Fe (505-476-3490), spoke to EL Gonzalez with the OCD Lovington Office (575-393-6161), and sent an email to City of Lovington.	
By Whom? Estefani Banuelos reported it to the OCD. Darrell Moore reported it to the City of Lovington.	Date and Hour: 01/29/2011 at ~09:50 to OCD Santa Fe office, 01/29/2011 at ~09:57 to the OCD Artesia office, and 01/29/2011 at ~10:18 to the City of Lovington.	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse. NA	

If a Watercourse was Impacted, Describe Fully.* NA

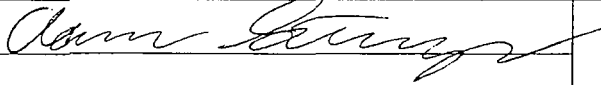
Describe Cause of Problem and Remedial Action Taken.*

On 01/29/2010 at ~ 09:00 the Lovington HEP (Holly Energy Partners) pump station RV (Relief Valve) lifted and went into a sump. The sump filled and overflowed, spilling Gas Oil to the ground. The spill was caused by both a malfunctioning RV and a stuck float in the sump that triggers a high level alarm. The pipeline was shut down to stop the spill and make the necessary repairs.

Describe Area Affected and Cleanup Action Taken.*

The area affected was the Lovington HEP pump station at the Lovington Refinery. A vacuum truck recovered ~ 37 barrels off the ground and placed it into the Light Slop Tank. The contaminated soil was removed and placed on plastic for disposal.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	OIL CONSERVATION DIVISION		
Printed Name: Aaron Strange	Approved by District Supervisor:		
Title: Sr. Environmental Technician	Approval Date:	Expiration Date:	
E-mail Address: aaron.strange@hollycorp.com	Conditions of Approval:		Attached <input type="checkbox"/>
Date: 02/14/2011	Phone: 575-703-5057		

NON-HAZARDOUS WASTE MANIFEST

64247

PART I: Generator Navajo Refining - Lea Plant
 Address 7406 S. Main
 City/State Lovington, N.M. 88260

(575) 396-5821

Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

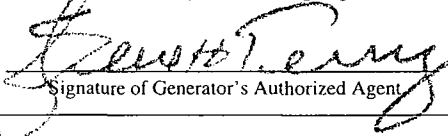
Permit No. NMD360010367

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<p><i>ALGO contaminated Soil 12 yds</i></p>		
<p><i>Locate @ South end of 103-B #20S38T</i></p>		

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

2-10-11
 Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

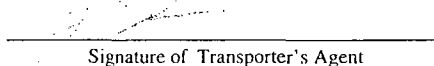
Name Fluid Transport
 Address _____
 City/State Spencer, NM

Telephone No. _____

130
 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

2-10-11
 Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079

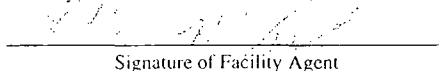
Telephone No.

www.crihobbs.com

E-mail

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

2-10-11
 Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

44250

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010267

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>Consent to Contaminated Soil 12 yd</u>		
<u>North of 8 Lane</u>		
<u>#20835</u>		

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]
Signature of Generator's Authorized Agent

2/19/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State Lovington, N.M.

Telephone No. _____

Truck No. 430

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

2/19/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

2-19-11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

44251

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. ND36001367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>Cement Contaminated Soil 12 yds</u>		
<u>North of Lea #20 S16</u>		

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]
Signature of Generator's Authorized Agent

2/19/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State Las Vegas, NV

Telephone No. _____

430
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

2/19/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

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

2/19/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

64275

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. 1MD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
Signature of Generator's Authorized Agent

2/9/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Box MK 30-3

Name Fluid Transport
Address _____
City/State Las Vegas, NV

Telephone No. _____

483
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

2/9/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

2/9/11
Date and Time Received

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
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Form C-141
Revised October 10, 2003

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District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company: Navajo Refining Co. LLC	Contact: Aaron Strange	
Address: 7406 South Main Lovington, N.M.	Telephone No. 575-748-3311	
Facility Name: Lovington Plant	Facility Type: Petroleum Refinery	
Surface Owner	Mineral Owner	Lease No.

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
-------------	---------	----------	-------	---------------	------------------	---------------	----------------	--------

Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release: Waste Water	Volume of Release: ~ 10 barrels	Volume Recovered: ~ 0 barrels
Source of Release: Tank 1209B	Date and Hour of Occurrence: 02/27/2011 ~ 05:30	Date and Hour of Discovery: 02/27/2011 ~ 05:30
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Sent an email to Michael Leighton the City Manager of Lovington, sent an email to Carl Chavez with the OCD in Santa Fe, left a voicemail for Larry Johnson with the OCD Hobbs Office.	
By Whom? Johnny Lackey	Date and Hour: 02/28/2011 at ~11:57 to the City Manager of Lovington, 02/28/2011 at ~11:57 to OCD Santa Fe office, 02/28/2011 at ~12:05 to the OCD Hobbs office.	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse. NA	

If a Watercourse was Impacted, Describe Fully.* NA

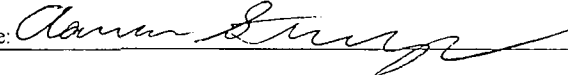
Describe Cause of Problem and Remedial Action Taken.*

On 02/27/2011 at ~ 06:15 Tank 1209B overflowed approximately 10 barrels of waste water onto the ground. The tank overflowed because a partial power failure in the plant that resulted in the loss of several pumps including the waste water pump from Tank 1209B.

Describe Area Affected and Cleanup Action Taken.*

The area affected was at Tank 1209B at the wastewater separator and flowed past monitor well #6 and to the south. There are no sign of the spill on the ground; no oily staining or wet areas. Some water was absorbed into the ground and/or evaporated due to the extremely high wind in the area; therefore there was no free standing water to recover. Safety and Environmental Solutions has started the delineation of the spill and have collected water samples for analysis.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	OIL CONSERVATION DIVISION	
Printed Name: Aaron Strange	Approved by District Supervisor:	
Title: Sr. Environmental Technician	Approval Date:	Expiration Date:
E-mail Address: aaron.strange@hollycorp.com	Conditions of Approval:	Attached <input type="checkbox"/>
Date: 03/04/2011	Phone: 575-703-5057	

Combs, Robert

From: David Boyer [dgboyer@sesi-nm.com]

Sent: Thursday, April 12, 2012 11:41 AM

To: Combs, Robert

Subject: Wastewater table, Lea Refinery

Attached.

The following constituents exceed WQCC standards: Benzene, chloride and TDS.

Other WQCC constituents are below WQCC standards.

The following non-WQCC constituents were minimal: TPH, Oil and Grease

Due to warm, dry windy conditions, spill liquids were not recoverable.

Conclusion:

Due to the above analyses and environmental conditions at the time of the spill, no drilling was performed. When the area was examined for possible drilling locations, no sign of the spill was visible. Benzene in the release would have quickly volatilized. Though chloride is the other constituent that exceeds a WQCC standard, depth to groundwater exceeds 100 feet at this location and there are three nearby monitor wells (MW-6 adjacent to the spill, and MW-9 and MW-10 downgradient) that are routinely sampled. Sampling of all three wells subsequent to the wastewater releases show that chloride concentrations in these wells are below groundwater standards.

David G. Boyer, P.G.
Hydrogeologist
Safety and Environmental Solutions, Inc.
P.O. Box 1613
703 E. Clinton
Hobbs, NM 88241
office: 575-397-0510
fax: 575-393-4388
cell: 575-390-7067
email: dgboyer@sesi-nm.com

Wastewater samples from Lea Refinery

Constituent	Date	Result (mg/L)	WQCC standard (mg/L)
Benzene	01/31/11	0.068	0.010
"	02/18/11	2.4	0.010
Toluene	01/31/11	0.088	0.75
"	02/18/11	0.12	0.75
Ethybenzene	01/31/11	0.035	0.75
"	02/18/11	0.064	0.75
Total Xylenes	01/31/11	0.058	0.62
"	02/18/11	0.10	0.62
MTBE	02/18/11	<0.0050	- -
TPH (Diesel range)	02/18/12	2.4	- -
TPH (Gasoline range)	02/18/11	1.25	- -
Metals			
Aluminum	02/18/11	0.0162	5.0
Arsenic	01/31/11	0.0780	0.1
"	02/18/11	0.0845	0.1
Barium	01/31/11	0.148	1.0
"	02/18/11	0.212	1.0
Boron	02/18/11	0.557	0.8
Cadmium	01/31/11	<0.00200	0.01
"	02/18/11	<0.00200	0.01
Calcium	01/31/11	223	- -
Chromium	01/31/11	0.00903	0.05
"	02/18/11	0.0212	0.05
Copper	02/18/11	<0.00500	1.0
Lead	01/31/11	<0.00500	0.05
Magnesium	01/31/11	38.0	- -
Manganese	02/18/11	0.0684	0.2
Mercury	02/18/11	<0.000200	0.002
Molybdenum	02/18/12	0.00987	1.0
Nickel	02/18/11	<0.00500	0.2
Potassium	01/31/11	17.0	- -
Selenium	01/31/11	0.0243	0.05
"	02/18/11	0.0178	0.05
Silver	01/31/11	<0.00500	0.05
"	02/18/11	<0.00500	0.05
Sodium	01/31/11	854	- -
Zinc	02/18/11	0.0429	10.0

Total Dissolved Solids	01/31/11	3,530	1,000
Anions			
Chloride	02/18/11	1,670	250
Fluoride	02/18/11	1.57	1.6
Sulfide	01/31/11	10.2	--
Cyanide	02/18/11	<0.0200	0.2
Nitrogen			
Nitrate/Nitrite (as N)	01/31/11	1.75	10.0
Ammonia (as N)	01/31/11	0.243	--
"	02/18/11	2.90	--
Nitrogen, Total Kjeldahl	01/31/11	11.3	--
"	02/18/11	14.5	--
Nitrogen, organic	02/18/11	11.6	--
Others			
BOD	02/18/11	34.8	--
Phenolics	02/18/11	<0.0500	--
Oil and Grease	01/31/11	8.62	--
Total Suspended Solids	02/18/11	6.67	--



28-Feb-2011

Darrell Moore
Navajo Refining Company
PO Box 159
Artesia, NM 88211

Tel: (575) 746-5281
Fax: (505) 746-5421

Re: Water

Work Order: 1102567

Dear Darrell,

ALS Environmental received 1 sample on 19-Feb-2011 09:20 AM for the analyses presented in the following report.

The analytical data provided relates directly to the samples received by ALS Environmental and for only the analyses requested. Results are expressed as "as received" unless otherwise noted.

QC sample results for this data met EPA or laboratory specifications except as noted in the Case Narrative or as noted with qualifiers in the QC batch information. Should this laboratory report need to be reproduced, it should be reproduced in full unless written approval has been obtained by ALS Environmental. Samples will be disposed in 30 days unless storage arrangements are made.

The total number of pages in this report is 33.

If you have any questions regarding this report, please feel free to call me.

Sincerely,

Electronically approved by: Mary K. Knowles

JayLynn F Thibault
Project Manager



Certificate No: T104704231-09A-TX

ADDRESS 10450 Stancliff Rd, Suite 210 Houston, Texas 77099-4338 | PHONE (281) 530-5656 | FAX (281) 530-5887

ALS GROUP USA, CORP. Part of the ALS Laboratory Group. A Campbell Brothers Limited Company

Environmental

www.alsglobal.com

RIGHT SOLUTIONS. RIGHT PARTNERS.

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company
Project: Water
Work Order: 1102567

Work Order Sample Summary

<u>Lab Samp ID</u>	<u>Client Sample ID</u>	<u>Matrix</u>	<u>Tag Number</u>	<u>Collection Date</u>	<u>Date Received</u>	<u>Hold</u>
1102567-01	Lovington Waste Water	Water		2/18/2011 12:15	2/19/2011 09:20	<input type="checkbox"/>

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company

Project: Water

Work Order: 1102567

Case Narrative

Batch R105680, Method 8015_GRO_W, Sample 1102398-09ZMSD: RPD OK

Batch R105687, Method 300_W, Sample CCV: CCVs' fluoride recoveries out of control .

Fluoride not reported in this analytical sequence

Batch R105701, Method 300_W, Sample 1102567-01FMSD: 1102567-01F MS/MSD -Spike recoveries out of control due to elevated analytes in background sample

Batch R105677, Method BTEX_W, Sample BLCSW2-022111: Surrogate failure for 1102568-02A & 1102569-02A; confirmed by reanalysis at dilution.

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company

Project: Water

Work Order: 1102567

Sample ID: Lovington Waste Water

Lab ID: 1102567-01

Collection Date: 2/18/2011 12:15 PM

Matrix: WATER

Analyses	Result	Qual	Report Limit	Units	Dilution Factor	Date Analyzed
TPH DRO/ORO						
TPH (Diesel Range)	2.4		SW8015M 0.10	mg/L	2	Prep Date: 2/19/2011 Analyst: RPM 2/22/2011 04:25 PM
Surr: 2-Fluorobiphenyl	118		70-130	%REC	2	2/22/2011 04:25 PM
GASOLINE RANGE ORGANICS						
Gasoline Range Organics	1.25		SW8015 0.0500	mg/L	1	Analyst: LAJ 2/21/2011 09:13 PM
Surr: 4-Bromofluorobenzene	118		70-130	%REC	1	2/21/2011 09:13 PM
BTEX						
Benzene	0.24		SW8021B 0.010	mg/L	10	Analyst: KKP 2/22/2011 11:18 PM
Toluene	0.12		0.010	mg/L	10	2/22/2011 11:18 PM
Ethylbenzene	0.064		0.0010	mg/L	1	2/21/2011 11:07 PM
Methyl tert-butyl ether	ND		0.0050	mg/L	1	2/21/2011 11:07 PM
Xylenes, Total	0.10		0.0030	mg/L	1	2/21/2011 11:07 PM
Surr: 4-Bromofluorobenzene	116		77-129	%REC	1	2/21/2011 11:07 PM
Surr: 4-Bromofluorobenzene	99.4		77-129	%REC	10	2/22/2011 11:18 PM
Surr: Trifluorotoluene	97.5		75-130	%REC	1	2/21/2011 11:07 PM
Surr: Trifluorotoluene	90.7		75-130	%REC	10	2/22/2011 11:18 PM
MERCURY						
Mercury	ND		SW7470 0.000200	mg/L	1	Prep Date: 2/22/2011 Analyst: JCJ 2/23/2011 01:14 PM
METALS						
Aluminum	0.0162		SW6020 0.0100	mg/L	1	Prep Date: 2/22/2011 Analyst: ALR 2/23/2011 01:43 PM
Arsenic	0.0845		0.00500	mg/L	1	2/22/2011 09:20 PM
Barium	0.212		0.00500	mg/L	1	2/22/2011 09:20 PM
Boron	0.557		0.0200	mg/L	1	2/22/2011 09:20 PM
Cadmium	ND		0.00200	mg/L	1	2/22/2011 09:20 PM
Chromium	0.0212		0.00500	mg/L	1	2/22/2011 09:20 PM
Copper	ND		0.00500	mg/L	1	2/22/2011 09:20 PM
Lead	ND		0.00500	mg/L	1	2/22/2011 09:20 PM
Manganese	0.0684		0.00500	mg/L	1	2/22/2011 09:20 PM
Molybdenum	0.00987		0.00500	mg/L	1	2/22/2011 09:20 PM
Nickel	ND		0.00500	mg/L	1	2/22/2011 09:20 PM
Selenium	0.0178		0.00500	mg/L	1	2/22/2011 09:20 PM
Silver	ND		0.00500	mg/L	1	2/22/2011 09:20 PM
Zinc	0.0429		0.00500	mg/L	1	2/22/2011 09:20 PM
MISCELLANEOUS ANALYSIS						
Miscellaneous Analysis	See Attached		NA		1	Analyst: HN 2/23/2011
ANIONS						
Chloride	1,670		E300 25.0	mg/L	50	Analyst: TDW 2/21/2011 08:24 PM

Note: See Qualifiers Page for a list of qualifiers and their explanation.

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company
Project: Water
Sample ID: Lovington Waste Water
Collection Date: 2/18/2011 12:15 PM

Work Order: 1102567
Lab ID: 1102567-01
Matrix: WATER

Analyses	Result	Qual	Report Limit	Units	Dilution Factor	Date Analyzed
Fluoride	1.57		0.100	mg/L	1	2/19/2011 08:02 PM
Surr: Selenate (surr)	100		85-115	%REC	1	2/19/2011 08:02 PM
Surr: Selenate (surr)	103		85-115	%REC	50	2/21/2011 08:24 PM
BOD			SM5210 B		Prep Date: 2/19/2011	Analyst: CMC
Biochemical Oxygen Demand	34.8		2.00	mg/L	1	2/24/2011 02:00 PM
CYANIDE			M4500CN E&G			Analyst: IAB
Cyanide	ND		0.0200	mg/L	1	2/22/2011 03:00 PM
Cyanide, Amenable to Chlorination	ND		0.0200	mg/L	1	2/22/2011 03:00 PM
AMMONIA AS N			SM4500 NH3-B-F			Analyst: IAB
Nitrogen, Ammonia (as N)	2.90		0.125	mg/L	5	2/22/2011 03:00 PM
ORGANIC NITROGEN			M4500-N C			Analyst: CMC
Nitrogen, Organic	11.6		1.00	mg/L	1	2/24/2011 12:40 PM
PHENOLICS			E420.1			Analyst: IAB
Phenolics, Total Recoverable	ND		0.0500	mg/L	1	2/22/2011 10:00 AM
TOTAL KJELDAHL L NITROGEN			M4500 NH3 D			Analyst: CMC
Nitrogen, Total Kjeldahl	14.5		1.00	mg/L	1	2/23/2011 09:00 AM
TOTAL SUSPENDED SOLIDS			M2540D			Analyst: JKP
Suspended Solids (Residue, Non-Filterable)	6.67		2.00	mg/L	1	2/22/2011 05:00 PM

Note: See Qualifiers Page for a list of qualifiers and their explanation.

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company
Work Order: 1102567
Project: Water

QC BATCH REPORT

Batch ID: 50170 Instrument ID FID-8 Method: SW8015M

MBLK Sample ID: FBLKW1-110219-50170 Units: mg/L Analysis Date: 2/21/2011 08:49 PM

Client ID: Run ID: FID-8_110219A SeqNo: 2286023 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
TPH (Diesel Range)	ND	0.050								
Surr: 2-Fluorobiphenyl	0.09841	0.0050	0.1	0	98.4	70-130	0			

LCS Sample ID: FLCSW1-110219-50170 Units: mg/L Analysis Date: 2/21/2011 09:08 PM

Client ID: Run ID: FID-8_110219A SeqNo: 2286024 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
TPH (Diesel Range)	1.051	0.050	1	0	105	70-130	0			
Surr: 2-Fluorobiphenyl	0.1141	0.0050	0.1	0	114	70-130	0			

LCSD Sample ID: FLCSDW1-110219-50170 Units: mg/L Analysis Date: 2/21/2011 09:27 PM

Client ID: Run ID: FID-8_110219A SeqNo: 2286025 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
TPH (Diesel Range)	1.053	0.050	1	0	105	70-130	1.051	0.17	20	
Surr: 2-Fluorobiphenyl	0.1158	0.0050	0.1	0	116	70-130	0.1141	1.42	20	

The following samples were analyzed in this batch:

1102567-011

Client: Navajo Refining Company
Work Order: 1102567
Project: Water

QC BATCH REPORT

Batch ID: R105677 Instrument ID BTEX1 Method: SW8021B

MBLK Sample ID: BBLKW2-022111-R105677 Units: µg/L Analysis Date: 2/21/2011 09:04 PM

Client ID: Run ID: BTEX1_110221B SeqNo: 2285397 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Ethylbenzene	ND	1.0								
Methyl tert-butyl ether	ND	5.0								
Xylenes, Total	ND	3.0								
Surr: 4-Bromofluorobenzene	27.56	1.0	30	0	91.9	77-129	0			
Surr: Trifluorotoluene	26.08	1.0	30	0	86.9	75-130	0			

LCS Sample ID: BLCSW2-022111-R105677 Units: µg/L Analysis Date: 2/21/2011 08:29 PM

Client ID: Run ID: BTEX1_110221B SeqNo: 2285396 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Ethylbenzene	19.51	1.0	20	0	97.6	76-125	0			
Methyl tert-butyl ether	99.56	5.0	100	0	99.6	75-128	0			
Xylenes, Total	58.01	3.0	60	0	96.7	79-124	0			
Surr: 4-Bromofluorobenzene	28.79	1.0	30	0	96	77-129	0			
Surr: Trifluorotoluene	26.59	1.0	30	0	88.6	75-130	0			

MS Sample ID: 1102477-01AMS Units: µg/L Analysis Date: 2/21/2011 10:14 PM

Client ID: Run ID: BTEX1_110221B SeqNo: 2285401 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Ethylbenzene	20.83	1.0	20	0	104	76-125	0			
Methyl tert-butyl ether	111.6	5.0	100	0	112	75-128	0			
Xylenes, Total	63.15	3.0	60	0	105	79-124	0			
Surr: 4-Bromofluorobenzene	28.66	1.0	30	0	95.5	77-129	0			
Surr: Trifluorotoluene	25.84	1.0	30	0	86.1	75-130	0			

MSD Sample ID: 1102477-01AMSD Units: µg/L Analysis Date: 2/21/2011 10:31 PM

Client ID: Run ID: BTEX1_110221B SeqNo: 2285402 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Ethylbenzene	21.35	1.0	20	0	107	76-125	20.83	2.42	20	
Methyl tert-butyl ether	113.6	5.0	100	0	114	75-128	111.6	1.78	20	
Xylenes, Total	64.42	3.0	60	0	107	79-124	63.15	1.99	20	
Surr: 4-Bromofluorobenzene	29	1.0	30	0	96.7	77-129	28.66	1.18	20	
Surr: Trifluorotoluene	26.22	1.0	30	0	87.4	75-130	25.84	1.45	20	

The following samples were analyzed in this batch:

1102567-01A

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105680 Instrument ID FID-9 Method: SW8015

MBLK Sample ID: GBLKW2-022111-R105680 Units: mg/L Analysis Date: 2/21/2011 03:36 PM

Client ID: Run ID: FID-9_110221D SeqNo: 2285452 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Gasoline Range Organics	ND	0.050								
Surr: 4-Bromofluorobenzene	0.105	0.0050	0.1	0	105	70-130	0			

LCS Sample ID: GLCSW2-022111-R105680 Units: mg/L Analysis Date: 2/21/2011 03:22 PM

Client ID: Run ID: FID-9_110221D SeqNo: 2285451 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Gasoline Range Organics	0.9629	0.050	1	0	96.3	70-130	0			
Surr: 4-Bromofluorobenzene	0.1073	0.0050	0.1	0	107	70-130	0			

MS Sample ID: 1102398-09ZMS Units: mg/L Analysis Date: 2/21/2011 05:20 PM

Client ID: Run ID: FID-9_110221D SeqNo: 2285454 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Gasoline Range Organics	0.8438	0.050	1	0.03764	80.6	70-130	0			
Surr: 4-Bromofluorobenzene	0.1035	0.0050	0.1	0	103	70-130	0			

MSD Sample ID: 1102398-09ZMSD Units: mg/L Analysis Date: 2/21/2011 05:34 PM

Client ID: Run ID: FID-9_110221D SeqNo: 2285455 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Gasoline Range Organics	0.849	0.050	1	0.03764	81.1	70-130	0.8438	0.609	30	
Surr: 4-Bromofluorobenzene	0.1051	0.0050	0.1	0	105	70-130	0.1035	1.6	30	

The following samples were analyzed in this batch:

1102567-01B

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105750 Instrument ID BTEX1 Method: SW8021B

MBLK Sample ID: BBLKW1-022211-R105750 Units: µg/L Analysis Date: 2/22/2011 05:50 PM

Client ID: Run ID: BTEX1_110222B SeqNo: 2287140 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Benzene	ND	1.0								
Toluene	ND	1.0								
Surr: 4-Bromofluorobenzene	27.47	1.0	30	0	91.6	77-129	0			
Surr: Trifluorotoluene	26.66	1.0	30	0	88.9	75-130	0			

LCS Sample ID: BLCSW1-022211-R105750 Units: µg/L Analysis Date: 2/22/2011 04:24 PM

Client ID: Run ID: BTEX1_110222B SeqNo: 2287139 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Benzene	18.63	1.0	20	0	93.1	77-126	0			
Toluene	19.35	1.0	20	0	96.7	80-124	0			
Surr: 4-Bromofluorobenzene	29.73	1.0	30	0	99.1	77-129	0			
Surr: Trifluorotoluene	27.64	1.0	30	0	92.1	75-130	0			

MS Sample ID: 1102570-08AMS Units: µg/L Analysis Date: 2/22/2011 10:43 PM

Client ID: Run ID: BTEX1_110222B SeqNo: 2287150 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Benzene	19.81	1.0	20	0	99	77-126	0			
Toluene	20.25	1.0	20	0	101	80-124	0			
Surr: 4-Bromofluorobenzene	29.83	1.0	30	0	99.4	77-129	0			
Surr: Trifluorotoluene	27.37	1.0	30	0	91.2	75-130	0			

MSD Sample ID: 1102570-08AMSD Units: µg/L Analysis Date: 2/22/2011 11:00 PM

Client ID: Run ID: BTEX1_110222B SeqNo: 2287151 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Benzene	19.21	1.0	20	0	96.1	77-126	19.81	3.05	20	
Toluene	18.94	1.0	20	0	94.7	80-124	20.25	6.7	20	
Surr: 4-Bromofluorobenzene	28.06	1.0	30	0	93.5	77-129	29.83	6.1	20	
Surr: Trifluorotoluene	25.54	1.0	30	0	85.1	75-130	27.37	6.94	20	

The following samples were analyzed in this batch:

1102567-01A

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: 50233 Instrument ID ICPMS03 Method: SW6020

MBLK Sample ID: MBLKW1-022211-50233 Units: mg/L Analysis Date: 2/23/2011 03:19 PM

Client ID: Run ID: ICPMS03_110223A SeqNo: 2287661 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Aluminum	ND	0.010								
Arsenic	ND	0.0050								
Barium	ND	0.0050								
Boron	0.002003	0.050								J
Cadmium	ND	0.0020								
Chromium	ND	0.0050								
Copper	0.0006319	0.0050								J
Lead	ND	0.0050								
Manganese	ND	0.0050								
Nickel	ND	0.0050								
Selenium	ND	0.0050								
Silver	ND	0.0050								
Zinc	ND	0.0050								

LCS Sample ID: MLCSW1-022211-50233 Units: mg/L Analysis Date: 2/22/2011 07:47 PM

Client ID: Run ID: ICPMS03_110222A SeqNo: 2286400 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Aluminum	0.09564	0.010	0.1	0	95.6	80-120	0			
Arsenic	0.04816	0.0050	0.05	0	96.3	80-120	0			
Barium	0.04909	0.0050	0.05	0	98.2	80-120	0			
Boron	0.4969	0.050	0.5	0	99.4	80-120	0			
Cadmium	0.04853	0.0020	0.05	0	97.1	80-120	0			
Chromium	0.04624	0.0050	0.05	0	92.5	80-120	0			
Copper	0.0499	0.0050	0.05	0	99.8	80-120	0			
Lead	0.04826	0.0050	0.05	0	96.5	80-120	0			
Manganese	0.04783	0.0050	0.05	0	95.7	80-120	0			
Nickel	0.04797	0.0050	0.05	0	95.9	80-120	0			
Selenium	0.04709	0.0050	0.05	0	94.2	80-120	0			
Silver	0.05009	0.0050	0.05	0	100	80-120	0			
Zinc	0.05446	0.0050	0.05	0	109	80-120	0			

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: 50233 Instrument ID ICPMS03 Method: SW6020

MS Sample ID: 1102565-32DMS Units: mg/L Analysis Date: 2/22/2011 08:07 PM

Client ID: Run ID: ICPMS03_110222A SeqNo: 2286404 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Aluminum	0.08959	0.010	0.1	-0.0008673	90.5	80-120	0			
Arsenic	0.04543	0.0050	0.05	0.0001729	90.5	80-120	0			
Barium	0.04709	0.0050	0.05	0.0003325	93.5	80-120	0			
Boron	0.4589	0.050	0.5	0.02956	85.9	80-120	0			
Cadmium	0.04692	0.0020	0.05	0.0000247	93.8	80-120	0			
Chromium	0.04487	0.0050	0.05	0.00058	88.6	80-120	0			
Copper	0.04699	0.0050	0.05	0.002482	89	80-120	0			
Lead	0.04634	0.0050	0.05	0.0003254	92	80-120	0			
Manganese	0.04502	0.0050	0.05	0.0004708	89.1	80-120	0			
Nickel	0.04673	0.0050	0.05	0.0003634	92.7	80-120	0			
Selenium	0.04672	0.0050	0.05	0.00008858	93.3	80-120	0			
Silver	0.04809	0.0050	0.05	-0.00005712	96.3	80-120	0			
Zinc	0.04912	0.0050	0.05	0.007562	83.1	80-120	0			

MSD Sample ID: 1102565-32DMSD Units: mg/L Analysis Date: 2/22/2011 08:12 PM

Client ID: Run ID: ICPMS03_110222A SeqNo: 2286405 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Aluminum	0.09226	0.010	0.1	-0.0008673	93.1	80-120	0.08959	2.94	15	
Arsenic	0.04525	0.0050	0.05	0.0001729	90.2	80-120	0.04543	0.397	15	
Barium	0.04598	0.0050	0.05	0.0003325	91.3	80-120	0.04709	2.39	15	
Boron	0.4773	0.050	0.5	0.02956	89.5	80-120	0.4589	3.93	15	
Cadmium	0.04569	0.0020	0.05	0.0000247	91.3	80-120	0.04692	2.66	15	
Chromium	0.04439	0.0050	0.05	0.00058	87.6	80-120	0.04487	1.08	15	
Copper	0.04645	0.0050	0.05	0.002482	87.9	80-120	0.04699	1.16	15	
Lead	0.04574	0.0050	0.05	0.0003254	90.8	80-120	0.04634	1.3	15	
Manganese	0.04491	0.0050	0.05	0.0004708	88.9	80-120	0.04502	0.245	15	
Nickel	0.04724	0.0050	0.05	0.0003634	93.8	80-120	0.04673	1.09	15	
Selenium	0.04309	0.0050	0.05	0.00008858	86	80-120	0.04672	8.08	15	
Silver	0.04779	0.0050	0.05	-0.00005712	95.7	80-120	0.04809	0.626	15	
Zinc	0.05374	0.0050	0.05	0.007562	92.4	80-120	0.04912	8.98	15	

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: 50233 Instrument ID ICPMS03 Method: SW6020

DUP Sample ID: 1102565-32DDUP Units: mg/L Analysis Date: 2/22/2011 07:57 PM

Client ID: Run ID: ICPMS03_110222A SeqNo: 2286402 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Aluminum	ND	0.010	0	0	0	0-0	-0.0008673	0	25	
Arsenic	ND	0.0050	0	0	0	0-0	0.0001729	0	25	
Barium	ND	0.0050	0	0	0	0-0	0.0003325	0	25	
Boron	0.0245	0.050	0	0	0	0-0	0.02956	0	25	J
Cadmium	ND	0.0020	0	0	0	0-0	0.0000247	0	25	
Chromium	ND	0.0050	0	0	0	0-0	0.00058	0	25	
Copper	ND	0.0050	0	0	0	0-0	0.002482	0	25	
Lead	ND	0.0050	0	0	0	0-0	0.0003254	0	25	
Manganese	ND	0.0050	0	0	0	0-0	0.0004708	0	25	
Nickel	ND	0.0050	0	0	0	0-0	0.0003634	0	25	
Selenium	ND	0.0050	0	0	0	0-0	0.00008858	0	25	
Silver	ND	0.0050	0	0	0	0-0	-0.00005712	0	25	
Zinc	0.003943	0.0050	0	0	0	0-0	0.007562	0	25	J

The following samples were analyzed in this batch:

1102567-01E

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: 50240 Instrument ID Mercury Method: SW7470

MBLK Sample ID: GBLKW2-022211-50240 Units: mg/L Analysis Date: 2/23/2011 12:48 PM

Client ID: Run ID: MERCURY_110223A SeqNo: 2287585 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Mercury	ND	0.00020								

LCS Sample ID: GLCSW2-022211-50240 Units: mg/L Analysis Date: 2/23/2011 12:50 PM

Client ID: Run ID: MERCURY_110223A SeqNo: 2287586 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Mercury	0.00488	0.00020	0.005	0	97.6	85-115	0			

MS Sample ID: 1102546-01AMS Units: mg/L Analysis Date: 2/23/2011 12:58 PM

Client ID: Run ID: MERCURY_110223A SeqNo: 2287589 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Mercury	0.00476	0.00020	0.005	-0.000015	95.5	85-115	0			

MSD Sample ID: 1102546-01AMSD Units: mg/L Analysis Date: 2/23/2011 01:00 PM

Client ID: Run ID: MERCURY_110223A SeqNo: 2287590 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Mercury	0.00474	0.00020	0.005	-0.000015	95.1	85-115	0.00476	0.421	20	

DUP Sample ID: 1102546-01ADUP Units: mg/L Analysis Date: 2/23/2011 12:56 PM

Client ID: Run ID: MERCURY_110223A SeqNo: 2287588 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Mercury	ND	0.00020	0	0	0	0-0	-0.000015	0	20	

The following samples were analyzed in this batch:

1102567-01E

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: 50164 Instrument ID WetChem Method: SM5210 B

MBLK Sample ID: WBLKW1-021911-50164 Units: mg/L Analysis Date: 2/24/2011 02:00 PM

Client ID: Run ID: WETCHEM_110224L SeqNo: 2289629 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Biochemical Oxygen Demand	ND	2.0								

LCS Sample ID: WLC SW1-021911-50164 Units: mg/L Analysis Date: 2/24/2011 02:00 PM

Client ID: Run ID: WETCHEM_110224L SeqNo: 2289630 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Biochemical Oxygen Demand	196.5	2.0	198	0	99.2	85-115	0			

LCSD Sample ID: WLCSDW1-021911-50164 Units: mg/L Analysis Date: 2/24/2011 02:00 PM

Client ID: Run ID: WETCHEM_110224L SeqNo: 2289633 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Biochemical Oxygen Demand	192.5	2.0	198	0	97.2	85-115	196.5	2.06	20	

DUP Sample ID: 1102567-01GDUP Units: mg/L Analysis Date: 2/24/2011 02:00 PM

Client ID: Lovington Waste Water Run ID: WETCHEM_110224L SeqNo: 2289632 Prep Date: 2/19/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Biochemical Oxygen Demand	33.96	2.0	0	0	0	0-0	34.77	2.36	20	

The following samples were analyzed in this batch: 1102567-01G

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105687 Instrument ID ICS3K2 Method: E300

MBLK Sample ID: WBLKW1-022111-R105687 Units: mg/L Analysis Date: 2/21/2011 07:19 PM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285549 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	ND	0.50								
Surr: Selenate (surr)	5.003	0.10	5	0	100	85-115	0			

LCS Sample ID: WLCSW1-022111-R105687 Units: mg/L Analysis Date: 2/21/2011 07:41 PM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285550 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	20.08	0.50	20	0	100	90-110	0			
Surr: Selenate (surr)	5.172	0.10	5	0	103	85-115	0			

LCSD Sample ID: WLCSW1-022111-R105687 Units: mg/L Analysis Date: 2/21/2011 08:03 PM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285551 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	19.97	0.50	20	0	99.8	90-110	20.08	0.554	20	
Surr: Selenate (surr)	5.145	0.10	5	0	103	85-115	5.172	0.523	20	

MS Sample ID: 1102538-02CMS Units: mg/L Analysis Date: 2/22/2011 02:55 AM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285577 Prep Date: DF: 100

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	1655	50	1000	694.3	96.1	80-120	0			
Surr: Selenate (surr)	503	10	500	0	101	85-115	0			

MS Sample ID: 1102538-08CMS Units: mg/L Analysis Date: 2/22/2011 06:10 AM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285602 Prep Date: DF: 100

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	1663	50	1000	645.8	102	80-120	0			
Surr: Selenate (surr)	500.7	10	500	0	100	85-115	0			

MS Sample ID: 1102538-09CMS Units: mg/L Analysis Date: 2/22/2011 08:20 AM

Client ID: Run ID: ICS3K2_110221A SeqNo: 2285612 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	14.81	0.50	10	4.715	101	80-120	0			
Surr: Selenate (surr)	4.962	0.10	5	0	99.2	85-115	0			

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105687 Instrument ID: ICS3K2 Method: E300

MSD	Sample ID: 1102538-02CMSD					Units: mg/L	Analysis Date: 2/22/2011 04:00 AM			
Client ID:	Run ID: ICS3K2_110221A				SeqNo: 2285584	Prep Date:		DF: 100		
Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	1647	50	1000	694.3	95.3	80-120	1655	0.451	20	
Surr: Selenate (surr)	501.4	10	500	0	100	85-115	503	0.307	20	

MSD	Sample ID: 1102538-08CMSD					Units: mg/L		Analysis Date: 2/22/2011 06:54 AM		
Client ID:	Run ID: ICS3K2_110221A				SeqNo: 2285608		Prep Date:		DF: 100	
Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	1666	50	1000	645.8	102	80-120	1663	0.19	20	
Surr: Selenate (surr)	503.4	10	500	0	101	85-115	500.7	0.53	20	

MSD	Sample ID: 1102538-09CMSD					Units: mg/L		Analysis Date: 2/22/2011 08:42 AM		
Client ID:	Run ID: ICS3K2_110221A				SeqNo: 2285613		Prep Date:		DF: 1	
Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Chloride	14.89	0.50	10	4.715	102	80-120	14.81	0.552	20	
Surr: Selenate (surr)	5.001	0.10	5	0	100	85-115	4.962	0.783	20	

The following samples were analyzed in this batch:

1102567-01F

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105701 Instrument ID ICS3K2 Method: E300

MBLK Sample ID: WBLKW1-021911-R105701 Units: mg/L Analysis Date: 2/19/2011 01:32 PM

Client ID: Run ID: ICS3K2_110218C SeqNo: 2285862 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Fluoride	ND	0.10								
Surr: Selenate (surr)	5.254	0.10	5	0	105	85-115	0			

LCS Sample ID: WLCSW1-021911-R105701 Units: mg/L Analysis Date: 2/19/2011 07:18 PM

Client ID: Run ID: ICS3K2_110218C SeqNo: 2285863 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Fluoride	3.684	0.10	4	0	92.1	90-110	0			
Surr: Selenate (surr)	5.087	0.10	5	0	102	85-115	0			

LCSD Sample ID: WLCSDW1-021911-R105701 Units: mg/L Analysis Date: 2/19/2011 07:40 PM

Client ID: Run ID: ICS3K2_110218C SeqNo: 2285864 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Fluoride	3.697	0.10	4	0	92.4	90-110	3.684	0.352	20	
Surr: Selenate (surr)	5.167	0.10	5	0	103	85-115	5.087	1.56	20	

MS Sample ID: 1102567-01FAMS Units: mg/L Analysis Date: 2/19/2011 08:23 PM

Client ID: Lovington Waste Water Run ID: ICS3K2_110218C SeqNo: 2285866 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Fluoride	3.332	0.10	2	1.571	88	80-120	0			
Surr: Selenate (surr)	4.913	0.10	5	0	98.3	85-115	0			

MSD Sample ID: 1102567-01FMSD Units: mg/L Analysis Date: 2/19/2011 08:45 PM

Client ID: Lovington Waste Water Run ID: ICS3K2_110218C SeqNo: 2285867 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Fluoride	3.343	0.10	2	1.571	88.6	80-120	3.332	0.33	20	
Surr: Selenate (surr)	4.968	0.10	5	0	99.4	85-115	4.913	1.11	20	

The following samples were analyzed in this batch:

1102567-01F

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105744 Instrument ID UV-2450 Method: M4500CN E&G

MBLK Sample ID: WBLKW_022211-R105744 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222A SeqNo: 2287034 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Cyanide	ND	0.020								
Cyanide, Amenable to Chlorination	ND	0.020								

LCS Sample ID: WLCSW_022211-R105744 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222A SeqNo: 2287035 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Cyanide	0.195	0.020	0.2	0	97.5	80-120	0			

LCSD Sample ID: WLCSDW_022211-R105744 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222A SeqNo: 2287039 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Cyanide	0.189	0.020	0.2	0	94.5	80-120	0.195	3.12	20	

MS Sample ID: 1102567-01DMS Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Lovington Waste Water Run ID: UV-2450_110222A SeqNo: 2287043 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Cyanide	0.188	0.020	0.2	0	94	80-120	0			

The following samples were analyzed in this batch:

1102567-01D

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105752 Instrument ID UV-2450 Method: E420.1

MBLK Sample ID: WBLKW_022211-R105752 Units: mg/L Analysis Date: 2/22/2011 10:00 AM

Client ID: Run ID: UV-2450_110222C SeqNo: 2287161 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Phenolics, Total Recoverable	ND	0.050								

LCS Sample ID: WLCSW_022211-R105752 Units: mg/L Analysis Date: 2/22/2011 10:00 AM

Client ID: Run ID: UV-2450_110222C SeqNo: 2287162 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Phenolics, Total Recoverable	0.479	0.050	0.5	0	95.8	80-120	0			

LCSD Sample ID: WLCSDW-022211-R105752 Units: mg/L Analysis Date: 2/22/2011 10:00 AM

Client ID: Run ID: UV-2450_110222C SeqNo: 2287172 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Phenolics, Total Recoverable	0.48	0.050	0.5	0	96	80-120	0.479	0.209	20	

MS Sample ID: 1102567-01CMS Units: mg/L Analysis Date: 2/22/2011 10:00 AM

Client ID: Lovington Waste Water Run ID: UV-2450_110222C SeqNo: 2287180 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Phenolics, Total Recoverable	0.457	0.050	0.5	0	91.4	80-120	0			

The following samples were analyzed in this batch:

1102567-01C

Client: Navajo Refining Company
Work Order: 1102567
Project: Water

QC BATCH REPORT

Batch ID: R105771 Instrument ID UV-2450 Method: SM4500 NH3-B-F

MBLK Sample ID: WBLKW-022211-R105771 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222E SeqNo: 2287454 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Ammonia (as N)	ND	0.025								

LCS Sample ID: WLCSW-022211-R105771 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222E SeqNo: 2287455 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Ammonia (as N)	0.189	0.025	0.2	0	94.5	80-120	0			

LCSD Sample ID: WLCSDW-022211-R105771 Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222E SeqNo: 2287459 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Ammonia (as N)	0.183	0.025	0.2	0	91.5	80-120	0.189	3.23	20	

MS Sample ID: 1102535-01AMS Units: mg/L Analysis Date: 2/22/2011 03:00 PM

Client ID: Run ID: UV-2450_110222E SeqNo: 2287460 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Ammonia (as N)	0.356	0.025	0.2	0.172	92	80-120	0			

The following samples were analyzed in this batch:

1102567-01H

Client: Navajo Refining Company
Work Order: 1102567
Project: Water

QC BATCH REPORT

Batch ID: R105780 Instrument ID: Balance1 Method: M2540D

MBLK Sample ID: BLANK-R105780 Units: mg/L Analysis Date: 2/22/2011 05:00 PM

Client ID: Run ID: BALANCE1_110222G SeqNo: 2287675 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Suspended Solids (Residue, Non-Fi	ND	2.0								

LCS Sample ID: LCS-R105780 Units: mg/L Analysis Date: 2/22/2011 05:00 PM

Client ID: Run ID: BALANCE1_110222G SeqNo: 2287676 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Suspended Solids (Residue, Non-Fi	79.33	2.0	100	0	79.3	78-120	0			

DUP Sample ID: 1102485-01BDUP Units: mg/L Analysis Date: 2/22/2011 05:00 PM

Client ID: Run ID: BALANCE1_110222G SeqNo: 2287666 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Suspended Solids (Residue, Non-Fi	12.67	2.0	0	0	0	0-0	11.33	11.1	20	

The following samples were analyzed in this batch:

1102567-01F

Client: Navajo Refining Company
 Work Order: 1102567
 Project: Water

QC BATCH REPORT

Batch ID: R105815 Instrument ID WetChem Method: M4500 NH3 D

MBLK Sample ID: WBLKW1-022311-R105815 Units: mg/L Analysis Date: 2/23/2011 09:00 AM

Client ID: Run ID: WETCHEM_110223I SeqNo: 2288719 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Total Kjeldahl	ND	1.0								

LCS Sample ID: WLCSW1-022311-R105815 Units: mg/L Analysis Date: 2/23/2011 09:00 AM

Client ID: Run ID: WETCHEM_110223I SeqNo: 2288720 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Total Kjeldahl	20.8	1.0	20	0	104	80-120	0			

LCSD Sample ID: WLCSDW1-022311-R105815 Units: mg/L Analysis Date: 2/23/2011 09:00 AM

Client ID: Run ID: WETCHEM_110223I SeqNo: 2288732 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Total Kjeldahl	21.8	1.0	20	0	109	80-120	20.8	4.69	20	

MS Sample ID: 1102610-01FMS Units: mg/L Analysis Date: 2/23/2011 09:00 AM

Client ID: Run ID: WETCHEM_110223I SeqNo: 2288727 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Total Kjeldahl	21	1.0	20	0.56	102	75-125	0			

DUP Sample ID: 1102610-01FDUP Units: mg/L Analysis Date: 2/23/2011 09:00 AM

Client ID: Run ID: WETCHEM_110223I SeqNo: 2288726 Prep Date: DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Nitrogen, Total Kjeldahl	0.622	1.0	0	0	0	0-0	0.56	0	20	J

The following samples were analyzed in this batch:

1102567-01H

ALS Environmental

Date: 28-Feb-11

Client: Navajo Refining Company
Project: Water
WorkOrder: 1102567

**QUALIFIERS,
ACRONYMS, UNITS**

<u>Qualifier</u>	<u>Description</u>
*	Value exceeds Regulatory Limit
a	Not accredited
B	Analyte detected in the associated Method Blank above the Reporting Limit
E	Value above quantitation range
H	Analyzed outside of Holding Time
J	Analyte detected below quantitation limit
M	Manually integrated, see raw data for justification
n	Not offered for accreditation
ND	Not Detected at the Reporting Limit
O	Sample amount is > 4 times amount spiked
P	Dual Column results percent difference > 40%
R	RPD above laboratory control limit
S	Spike Recovery outside laboratory control limits
U	Analyzed but not detected above the MDL

<u>Acronym</u>	<u>Description</u>
DCS	Detectability Check Study
DUP	Method Duplicate
LCS	Laboratory Control Sample
LCSD	Laboratory Control Sample Duplicate
MBLK	Method Blank
MDL	Method Detection Limit
MQL	Method Quantitation Limit
MS	Matrix Spike
MSD	Matrix Spike Duplicate
PDS	Post Digestion Spike
PQL	Practical Quantitation Limit
SD	Serial Dilution
SDL	Sample Detection Limit
TRRP	Texas Risk Reduction Program

<u>Units Reported</u>	<u>Description</u>
mg/L	Milligrams per Liter



☐ **ALS Laboratory Group**
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Chain of Custody Form

Page ____ of ____

☐ **ALS Laboratory Group**
3352 128th Ave.
Holland, MI 49424-9263
Tel: +1 616 399 6070
Fax: +1 616 399 6185

Customer Information		Project Information		Parameter/Method Request for Analysis													
Purchase Order:		Project Name:	XXXXXXXXXX	A	VOC (2000) Solvent												
Work Order:		Project Number:		B	2000 (2000) TOL												
Company Name:	Navajo Refining Company	Bill To Company:	Navajo Refining Company	C	Total Metals (2000) BORAS												
Send Report To:	Darrell Moore	Invoice Attn:	Darrell Moore	D	2000 (2000)												
Address:	P.O. Box 159	Address:	P.O. Box 159	E	2000 (2000)												
				F	2000 (2000)												
City/State/Zip:	Artesia, NM 88211	City/State/Zip:	Artesia, NM 88211	G	Total Caside												
Phone:	(505) 748-3311	Phone:	(505) 748-3311	H													
Fax:	(505) 746-5421	Fax:	(505) 746-5421	I													
e-Mail Address:		e-Mail Address:		J													
No.	Sample Description	Date	Time	Matrix	Pres.	# Bottles	A	B	C	D	E	F	G	H	I	J	Hold
1	Livingston Waste Water	2/18/11	12:15	Water		15											
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
Sampler(s) Please Print & Sign:		Shipment Method		Required Turnaround Time: (Check Box)				Other				Results Due Date:					
Darrell Moore		Fed Ex		<input checked="" type="checkbox"/> Std 10 WK Days <input type="checkbox"/> 5 WK Days <input checked="" type="checkbox"/> 2 WK Days <input type="checkbox"/> 24 Hour				ALSAP									
Relinquished by:	Date:	Time:	Received by:	Notes: 10 Day TAT. Cc Dave Boyer.													
Darrell Moore	2/18/11	14:00															
Relinquished by:	Date:	Time:	Received by (Laboratory):	Cooler ID	Cooler Temp.	QC Package: (Check One Box Below)											
						<input checked="" type="checkbox"/> Level I Std QC <input type="checkbox"/> TRRP Checklist											
Logged by (Laboratory):	Date:	Time:	Checked by (Laboratory):			<input type="checkbox"/> Level II Std QC/Raw Data <input type="checkbox"/> TRRP Level IV											
						<input type="checkbox"/> Level IV SW346/CLP											
Preservative Key:	<input type="checkbox"/> Other / EDD																
1-HCl 2-HNO ₃ 3-H ₂ SO ₄ 4-NaOH 5-Na ₂ S ₂ O ₃ 6-NaHSO ₃ 7-Other 8-4°C 9-5035																	

Note: 1. Any changes must be made in writing once samples and COC Form have been submitted to ALS Laboratory Group.
2. Unless otherwise agreed in a formal contract, services provided by ALS Laboratory Group are expressly limited to the terms and conditions stated on the reverse.
3. The Chain of Custody is a legal document. All information must be completed accurately.

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Sample Receipt Checklist

Client Name: NAVAJO REFINING

Date/Time Received: 19-Feb-11 09:20

Work Order: 1102567

Received by: RNG

Checklist completed by Raymond N. Gordon
eSignature

19-Feb-11
Date

Reviewed by:

eSignature

Date

Matrices: Water

Carrier name: FedEx

Shipping container/cooler in good condition?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on sample bottles?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Chain of custody present?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody signed when relinquished and received?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody agrees with sample labels?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Samples in proper container/bottle?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sample containers intact?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
All samples received within holding time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Container/Temp Blank temperature in compliance?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Temperature(s)/Thermometer(s):	<u>2.0c</u> <u>002</u>		
Cooler(s)/Kit(s):	<u>2380</u>		
Water - VOA vials have zero headspace?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	No VOA vials submitted <input type="checkbox"/>
Water - pH acceptable upon receipt?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
pH adjusted?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
pH adjusted by:	<u>RNG</u>		
Login Notes:	<u>Preserved containers for Phenolics, TKN, Ammonia, Nitrogen, and Cyanide analysis.</u>		

Client Contacted:

Date Contacted:

Person Contacted:

Contacted By:

Regarding:

Comments:

CorrectiveAction:

W.O. # 1102567

At this portion can be removed for recipient's records.

de 2/13/11 FedEx Tracking Number 865910938415


ndor's LAUREN TRACY Phone 214 396-8821

Company REDAID REFINING CO (LPA)

Address 7406 S MAIN ST

City LOVINGTON State NM ZIP 86040

our Internal Billing Reference

 ALS Environmental 10450 Stancliff Rd., Suite 210 Houston, Texas 77099 Tel. +1 281 530 5656 Fax. +1 281 530 5387	CUS
	Date: <u>2/13/11</u>
	Name: <u>Navajo</u>
	Company: <u>Dave</u>

TODY SEAL	Seal Broken By:
Time: <u>12:30</u>	<u>RVB</u>
Name: <u>Refining Co</u>	Date: <u>2/19/11</u>
<u>Il Moore</u>	

Client: ALS Environmental**Project:** 1102567**Work Order:** 1102461**Work Order Sample Summary**

<u>Lab Samp ID</u>	<u>Client Sample ID</u>	<u>Matrix</u>	<u>Tag Number</u>	<u>Collection Date</u>	<u>Date Received</u>	<u>Hold</u>
1102461-01	1102567-01J	Water		2/18/2011 12:15	2/22/2011 09:45	<input type="checkbox"/>

Client: ALS Environmental
Project: 1102567
WorkOrder: 1102461

**QUALIFIERS,
ACRONYMS, UNITS**

<u>Qualifier</u>	<u>Description</u>
*	Value exceeds Regulatory Limit
a	Not accredited
B	Analyte detected in the associated Method Blank above the Reporting Limit
E	Value above quantitation range
H	Analyzed outside of Holding Time
J	Analyte detected below quantitation limit
n	Not offered for accreditation
ND	Not Detected at the Reporting Limit
O	Sample amount is > 4 times amount spiked
P	Dual Column results percent difference > 40%
R	RPD above laboratory control limit
S	Spike Recovery outside laboratory control limits
U	Analyzed but not detected above the MDL

<u>Acronym</u>	<u>Description</u>
DUP	Method Duplicate
LCS	Laboratory Control Sample
LCSD	Laboratory Control Sample Duplicate
MBLK	Method Blank
MDL	Method Detection Limit
MQL	Method Quantitation Limit
MS	Matrix Spike
MSD	Matrix Spike Duplicate
PDS	Post Digestion Spike
PQL	Practical Quantitation Limit
SD	Serial Dilution
TDL	Target Detection Limit

<u>Units Reported</u>	<u>Description</u>
µg/L	Micrograms per Liter

ALS Group USA, Corp

Date: 23-Feb-11

Client: ALS Environmental

Project: 1102567

Work Order: 1102461

Case Narrative

Sample received past recommended hold time.

ALS Group USA, Corp

Date: 23-Feb-11

Client: ALS Environmental
Project: 1102567
Sample ID: 1102567-01J
Collection Date: 2/18/2011 12:15 PM

Work Order: 1102461
Lab ID: 1102461-01
Matrix: WATER

Analyses	Result	Qual	Report Limit	Units	Dilution Factor	Date Analyzed
CARBONYL COMPOUNDS BY HPLC			SW8315A			
Formaldehyde	ND		100	µg/L	1	2/23/2011 02:28 PM

Note: See Qualifiers page for a list of qualifiers and their definitions.

Client: ALS Environmental

Work Order: 1102461

Project: 1102567

QC BATCH REPORT

Batch ID: 32001 Instrument ID HPLC2 Method: SW8315A

MBLK Sample ID: HBLKW1-32001-32001 Units: µg/L Analysis Date: 2/22/2011 11:02 AM

Client ID: Run ID: HPLC2_110222A SeqNo: 1562941 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Formaldehyde	ND	100								

LCS Sample ID: HLCSW1-32001-32001 Units: µg/L Analysis Date: 2/22/2011 11:02 AM

Client ID: Run ID: HPLC2_110222A SeqNo: 1562943 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Formaldehyde	443.8	100	500	0	88.8	50-150	0			

LCSD Sample ID: HLCSDW1-32001-32001 Units: µg/L Analysis Date: 2/22/2011 11:02 AM

Client ID: Run ID: HPLC2_110222A SeqNo: 1562942 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Formaldehyde	469.8	100	500	0	94	50-150	443.8	5.7	50	

MS Sample ID: 1102439-01A MS Units: µg/L Analysis Date: 2/22/2011 11:02 AM

Client ID: Run ID: HPLC2_110222A SeqNo: 1562938 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Formaldehyde	472.3	100	500	0	94.5	50-150	0			H

MSD Sample ID: 1102439-01A MSD Units: µg/L Analysis Date: 2/22/2011 11:02 AM

Client ID: Run ID: HPLC2_110222A SeqNo: 1562939 Prep Date: 2/22/2011 DF: 1

Analyte	Result	PQL	SPK Val	SPK Ref Value	%REC	Control Limit	RPD Ref Value	%RPD	RPD Limit	Qual
Formaldehyde	457.4	100	500	0	91.5	50-150	472.3	3.21	50	H

The following samples were analyzed in this batch:

1102461-01A



Subcontractor:
ALS Laboratory Group
3352 128th Ave.
Holland, MI 49424

TEL: (616) 399-6070
FAX: (616) 399-6185
Acct #:

CHAIN-OF-CUSTODY RECORD

Page 1 of 1

Date: 21-Feb-11
COC ID: 10088
Due Date 23-Feb-11

1102461

Customer Information		Project Information		Parameter/Method Request for Analysis										
Purchase Order	10-2120253	Project Name	1102567	A	Miscellaneous Analysis (NA)									
Work Order		Project Number		B										
Company Name	ALS Group USA, Corp.	Bill To Company	ALS Group USA, Corp.	C										
Send Report To	JayLynn F Thibault	Inv Attn	Accounts Payable	D										
Address	10450 Stancliff Rd, Suite 210	Address	10450 Stancliff Rd, Suite 210	E										
				F										
City/State/Zip	Houston, Texas 77099-4338	City/State/Zip	Houston, Texas 77099-4338	G										
Phone	(281) 530-5656	Phone	(281) 530-5656	H										
Fax	(281) 530-5887	Fax	(281) 530-5887	I										
eMail Address	jaylynn.thibault@alsenviro.com	eMail CC	mary.knowles@alsglobal.com	J										
Sample ID		Matrix	Collection Date 24hr	Bottle	A	B	C	D	E	F	G	H	I	J
1102567-01J (Lovington Waste Water)		Water	18/Feb/2011 12:15	(2) 1LAMGNEAT	X									

Comments:

Please analyze for Formaldehyde. Report is due on 2/23/11. Send report to JayLynn Thibault, jaylynn.thibault@alsglobal.com, and CC: results to Glenda Ramos, glenda.ramos@alsglobal.com and Mary Knowles, mary.knowles@alsglobal.com

WJ

Relinquished by: <i>[Signature]</i>	Date/Time: <i>2/21/11</i>	Received by: <i>[Signature]</i>	Date/Time: <i>2/21/11 0945</i>	Cooler IDs	Report/QC Level
Relinquished by:	Date/Time:	Received by:	Date/Time:		Std

3.2' c.

ALS Group USA, Corp

Sample Receipt Checklist

Client Name: ALS - HOUSTON

Date/Time Received: 22-Feb-11 09:45

Work Order: 1102461

Received by: DS

Checklist completed by Diane Shan
eSignature

22-Feb-11
Date

Reviewed by: Bob Carey
eSignature

23-Feb-11
Date

Matrices: Water

Carrier name: FedEx

Shipping container/cooler in good condition?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Custody seals intact on sample bottles?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Chain of custody present?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody signed when relinquished and received?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody agrees with sample labels?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Samples in proper container/bottle?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sample containers intact?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
All samples received within holding time?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Container/Temp Blank temperature in compliance?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Temperature(s)/Thermometer(s):	<u>3.2 c</u>		
Cooler(s)/Kit(s):			
Water - VOA vials have zero headspace?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No VOA vials submitted <input checked="" type="checkbox"/>
Water - pH acceptable upon receipt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
pH adjusted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
pH adjusted by:			
Login Notes:			

Client Contacted:

Date Contacted:

Person Contacted:

Contacted By:

Regarding:

Comments:

CorrectiveAction:

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company: Navajo Refining Co. LLC	Contact: Aaron Strange
Address: 7406 South Main Lovington, N.M.	Telephone No. 575-748-3311
Facility Name: Lovington Plant	Facility Type: Petroleum Refinery

Surface Owner	Mineral Owner	Lease No.
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LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
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Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release: Non Haz Waste Water	Volume of Release: ~ 40 barrels	Volume Recovered: ~ 0 barrels
Source of Release: Tank 1209B	Date and Hour of Occurrence: 03/17/2011 ~ 22:55	Date and Hour of Discovery: 03/17/2011 ~ 22:55
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Left a voicemail and email with Carl Chavez with the OCD in Santa Fe, left a voicemail with the OCD Lovington Office (575-370-3186), sent an email to Michael Leighton the City Manager of Lovington, and left a voicemail with the NMED.	
By Whom? Darrell Moore and Gabriela Combs	Date and Hour: 03/17/2011 at ~ 23:47 to the OCD Santa Fe office, 03/17/2011 at ~ 23:49 to the OCD Lovington office, 03/17/2011 at ~ 23:55 to the NMED, and 03/18/2011 at ~ 07:04 to the City Manager of Lovington.	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse. NA	

If a Watercourse was Impacted, Describe Fully.* NA

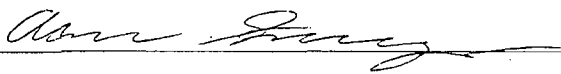
Describe Cause of Problem and Remedial Action Taken.*

On 03/17/2011 at ~ 22:55 Tank 1209B overflowed approximately 40 barrels of waste water onto the ground. The effluent pump on the tank was running, however a broken check valve caused the tank to fill up faster than it could be pumped out. The tank was pumped down to prevent further spilling and the check valve has been replaced.

Describe Area Affected and Cleanup Action Taken.*

The area affected was at Tank 1209B at the wastewater separator and flowed past monitor well #6 and to the south. The vacuum truck for the plant was brought to the spill however the water had absorbed into the ground, therefore no water was recovered. There are no sign of the spill on the ground; no oily staining or wet areas. Safety and Environmental Solutions will delineate the spill and collected soil samples for analysis.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	<u>OIL CONSERVATION DIVISION</u>		
Printed Name: Aaron Strange	Approved by District Supervisor:		
Title: Sr. Environmental Technician	Approval Date:	Expiration Date:	
E-mail Address: aaron.strange@hollycorp.com	Conditions of Approval:		Attached <input type="checkbox"/>
Date: 04/01/2011	Phone: 575-703-5057		

Combs, Robert

From: Moore, Darrell
Sent: Friday, March 18, 2011 9:54 AM
To: Chavez, Carl J, EMNRD; mleighton@lovington.org
Cc: Lackey, Johnny; Strange, Aaron
Subject: RE: Waste Water Spill at lovington
 Carl

The spill was from a waste water tank just before it is released to the city. So, no.....not from the API.

From: Chavez, Carl J, EMNRD [mailto:CarlJ.Chavez@state.nm.us]
Sent: Friday, March 18, 2011 8:05 AM
To: Moore, Darrell; mleighton@lovington.org
Cc: Lackey, Johnny; Strange, Aaron
Subject: RE: Waste Water Spill at lovington

Darrell:

Is this hazardous waste as the release was from the API Separator? Thx.

Carl J. Chavez, CHMM
 New Mexico Energy, Minerals & Natural Resources Dept.
 Oil Conservation Division, Environmental Bureau
 1220 South St. Francis Dr., Santa Fe, New Mexico 87505
 Office: (505) 476-3490
 Fax: (505) 476-3462
 E-mail: CarlJ.Chavez@state.nm.us
 Website: <http://www.emnrd.state.nm.us/ocd/index.htm>
 "Why not Prevent Pollution; Minimize Waste; Reduce the Cost of Operations; & Move Forward with the Rest of the Nation?" To see how, go to "Pollution Prevention & Waste Minimization" at:
<http://www.emnrd.state.nm.us/ocd/environmental.htm#environmental>)

From: Moore, Darrell [mailto:Darrell.Moore@hollycorp.com]
Sent: Friday, March 18, 2011 8:04 AM
To: mleighton@lovington.org; Chavez, Carl J, EMNRD
Cc: Lackey, Johnny; Strange, Aaron
Subject: Waste Water Spill at lovington

Carl and Mike

Last night, at about 11:45 pm, our Lovington plant notified us that a spill of waste water of about 40 bbls was discovered around Tk 1209B. Phone notification was made last night to Santa Fe OCD and Hobbs OCD. A C-141 will be filled out and forwarded to OCD and the City of Lovington.

Darrell Moore
 Environmental Manager for Water and Waste
 Navajo Refining Company, LLC
 Phone Number 575-746-5281
 Cell Number 575-703-5058
 Fax Number 575-746-5451

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4/10/2012

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Combs, Robert

From: David Boyer [dgboyer@sesi-nm.com]

Sent: Thursday, April 12, 2012 11:41 AM

To: Combs, Robert

Subject: Wastewater table, Lea Refinery

Attached.

The following constituents exceed WQCC standards: Benzene, chloride and TDS.
Other WQCC constituents are below WQCC standards.
The following non-WQCC constituents were minimal: TPH, Oil and Grease

Due to warm, dry windy conditions, spill liquids were not recoverable.

Conclusion:

Due to the above analyses and environmental conditions at the time of the spill, no drilling was performed. When the area was examined for possible drilling locations, no sign of the spill was visible. Benzene in the release would have quickly volatilized. Though chloride is the other constituent that exceeds a WQCC standard, depth to groundwater exceeds 100 feet at this location and there are three nearby monitor wells (MW-6 adjacent to the spill, and MW-9 and MW-10 downgradient) that are routinely sampled. Sampling of all three wells subsequent to the wastewater releases show that chloride concentrations in these wells are below groundwater standards.

David G. Boyer, P.G.
Hydrogeologist
Safety and Environmental Solutions, Inc.
P.O. Box 1613
703 E. Clinton
Hobbs, NM 88241
office: 575-397-0510
fax: 575-393-4388
cell: 575-390-7067
email: dgboyer@sesi-nm.com

Wastewater samples from Lea Refinery

Constituent	Date	Result (mg/L)	WQCC standard
			(mg/L)
Benzene	01/31/11	0.068	0.010
"	02/18/11	2.4	0.010
Toluene	01/31/11	0.088	0.75
"	02/18/11	0.12	0.75
Ethybenzene	01/31/11	0.035	0.75
"	02/18/11	0.064	0.75
Total Xylenes	01/31/11	0.058	0.62
"	02/18/11	0.10	0.62
MTBE	02/18/11	<0.0050	- -
TPH (Diesel range)	02/18/12	2.4	- -
TPH (Gasoline range)	02/18/11	1.25	- -
Metals			
Aluminum	02/18/11	0.0162	5.0
Arsenic	01/31/11	0.0780	0.1
"	02/18/11	0.0845	0.1
Barium	01/31/11	0.148	1.0
"	02/18/11	0.212	1.0
Boron	02/18/11	0.557	0.8
Cadmium	01/31/11	<0.00200	0.01
"	02/18/11	<0.00200	0.01
Calcium	01/31/11	223	- -
Chromium	01/31/11	0.00903	0.05
"	02/18/11	0.0212	0.05
Copper	02/18/11	<0.00500	1.0
Lead	01/31/11	<0.00500	0.05
Magnesium	01/31/11	38.0	- -
Manganese	02/18/11	0.0684	0.2
Mercury	02/18/11	<0.000200	0.002
Molybdenum	02/18/12	0.00987	1.0
Nickel	02/18/11	<0.00500	0.2
Potassium	01/31/11	17.0	- -
Selenium	01/31/11	0.0243	0.05
"	02/18/11	0.0178	0.05
Silver	01/31/11	<0.00500	0.05
"	02/18/11	<0.00500	0.05
Sodium	01/31/11	854	- -
Zinc	02/18/11	0.0429	10.0

Total Dissolved Solids	01/31/11	3,530	1,000
Anions			
Chloride	02/18/11	1,670	250
Fluoride	02/18/11	1.57	1.6
Sulfide	01/31/11	10.2	--
Cyanide	02/18/11	<0.0200	0.2
Nitrogen			
Nitrate/Nitrite (as N)	01/31/11	1.75	10.0
Ammonia (as N)	01/31/11	0.243	--
"	02/18/11	2.90	--
Nitrogen, Total Kjeldahl	01/31/11	11.3	--
"	02/18/11	14.5	--
Nitrogen, organic	02/18/11	11.6	--
Others			
BOD	02/18/11	34.8	--
Phenolics	02/18/11	<0.0500	--
Oil and Grease	01/31/11	8.62	--
Total Suspended Solids	02/18/11	6.67	--

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company: Navajo Refining Co. LLC	Contact: Aaron Strange	
Address: 7406 South Main Lovington, N.M.	Telephone No. 575-748-3311	
Facility Name: Lovington Plant	Facility Type: Petroleum Refinery	
Surface Owner	Mineral Owner	Lease No.

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
-------------	---------	----------	-------	---------------	------------------	---------------	----------------	--------

Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release: Crude oil	Volume of Release: ~ 5 barrels	Volume Recovered: ~ 0 barrels
Source of Release: Sump at the Hobbs manifold (crude inlet).	Date and Hour of Occurrence: 03/18/2011 ~ 23:45	Date and Hour of Discovery: 03/18/2011 ~ 23:45
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Left a voicemail with Carl Chavez with the OCD in Santa Fe, spoke to El Gonzales with the OCD Lovington Office (575-370-3186) and left a voicemail with Jeff Lecking (575-393-6161 ext. 113)	
By Whom? Gabriela Combs	Date and Hour: 03/19/2011 at ~00:01 to the OCD Santa Fe office, and 03/19/2011 at ~ 00:52 to the OCD Lovington office.	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse. NA	

If a Watercourse was Impacted, Describe Fully.* NA

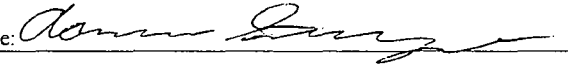
Describe Cause of Problem and Remedial Action Taken.*

On 03/18/2011 at ~ 23:45 the sump at the Hobbs manifold (crude inlet) ran over onto the ground. The pump did not turn on until an operator shook the level post at the sump. It then started to pump and stopped the spill.

Describe Area Affected and Cleanup Action Taken.*

The area affected was at the crude oil sump at the Hobbs manifold (crude inlet). Approximately Five barrels of crude ran over the sump and onto the ground. A vacuum truck was called out but the spill had already soaked into the ground. Safety and Environmental Solutions will delineate the spill and collected soil samples for analysis.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	<u>OIL CONSERVATION DIVISION</u>		
Printed Name: Aaron Strange	Approved by District Supervisor:		
Title: Sr. Environmental Technician	Approval Date:	Expiration Date:	
E-mail Address: aaron.strange@hollycorp.com	Conditions of Approval:		Attached <input type="checkbox"/>
Date: 04/1/2011	Phone: 575-703-5057		

NON-HAZARDOUS

ASTE MANIFEST

44268

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5871
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)			
Drilling Fluids	_____	Tank Bottoms	_____
Completion Fluids	_____	Gas Plant Waste	_____
Contaminated Soil	<input checked="" type="checkbox"/>	Other Materials	_____
Exempt Fluids _____			
C117 No. _____			
Pit No. _____			
DESCRIPTION / NOTES			
<u>10 barrels</u>			
<u>contaminated soil</u>			
<u>Box 20-3</u>			

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]
Signature of Generator's Authorized Agent

5-19-2011
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address 4647 W Hwy 180
City/State Snyder TX

Telephone No. _____

479
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

5-19-2011
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

5/19/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

64272

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD350010357

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>Contaminated soil</u>		
<u>Box 20-2</u>		

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]
Signature of Generator's Authorized Agent

5-19-01
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address 410-47 W Hwy 150
City/State Shiprock, NM

Telephone No. _____
429
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

5-19-01
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

5-19-01
Date and Time Received

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised August 1, 2011

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company Navajo Lea Refining Co	Contact Darrell Moore	
Address 7401 South Main Lovington NM 88260	Telephone No. 575-746-5281	
Facility Name	Facility Type Petroleum Refinery	
Surface Owner	Mineral Owner	Lease No.

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
-------------	---------	----------	-------	---------------	------------------	---------------	----------------	--------

Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release Crude Bottoms (Asphalt, vacuum gas oil)	Volume of Release est. 350 bbls	Volume Recovered 280 bbls
Source of Release Tk 1215	Date and Hour of Occurrence 8/1/11 1 am	Date and Hour of Discovery 8/1/11 1 am
Was Immediate Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Required	If YES, To Whom? Carl Chavez by email	
By Whom? Darrell Moore	Date and Hour 8/1/11 7:35 am	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	

If a Watercourse was Impacted, Describe Fully.*


Describe Cause of Problem and Remedial Action Taken.*

At 1 am on August 1, 2011, during routine rounds, an operator at the Lovington facility noticed a small pool of hydrocarbon on the south side of Tk 1215 estimated at 3 bbls.. He notified environmental and it was determined that the tank may have a hole in the floor. We then started emptying the tank into Tk 1214. The tank, which is a 20,000 bbl tank, was about ¾ full. By 7 am the leak had spread to almost all the way around the tank. We think that the heat of the day was making the product, which is an asphalt and vacuum gas oil mixture, more mobile. We did not immediately report the spill because we thought at the time it was a small 3 bbl leak from a pinhole in the floor of the tank.

Describe Area Affected and Cleanup Action Taken.*

The area affected is inside the dike that contains Tk 1214 and Tk 1215. The spill has almost entirely encircled Tk 1215 and then run southeast inside the dike and pooled up southeast of Tk 1215. Two vacuum trucks were called and began vacuuming up the spilled material. In addition we immediately started emptying Tk 1215 into Tk 1214. We also built small dikes to contain the spilled material into smaller areas. Tk 1215 should be empty by noon on August 2, 2011. We will then finish the vacuuming operation and begin picking up contaminated soil and placing into roll-off bins. Once we have picked up contaminated soil we will do drilling and sampling to insure cleanup.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 		OIL CONSERVATION DIVISION	
Printed Name: Darrell Moore		Approved by District Supervisor:	
Title: Environmental Manager for Water and Waste	Approval Date:	Expiration Date:	
E-mail Address: Darrell.moore@hollyfrontier.com	Conditions of Approval:	Attached <input type="checkbox"/>	
Date: 8/2/11	Phone: 575-746-5281		

NON-HAZARDOUS WASTE MANIFEST

75205

PART I: Generator Navajo Refining - Lea Plant
 Address 7406 S. Main
 City/State Lovington, N.M. 88260

(575) 396-5821
 Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. WMD360010367

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yds of contaminated soil</u>		
<u>Bn 20535</u>		

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]
 Signature of Generator's Authorized Agent

 Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
 Address _____
 City/State _____

 Telephone No.

424
 Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
 Signature of Transporter's Agent

8-1-11
 Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079
 Telephone No.

www.crihobbs.com
 E-mail

CERTIFICATION:

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

[Signature]
 Signature of Facility Agent

8/1/11
 Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

44276

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms <u>✓</u>	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box 20521</u>		

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.

Karin Cundett
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

424
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Brooker
Signature of Transporter's Agent

8-1-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Julie J. J. J.
Signature of Facility Agent

8/1/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

44282

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms <u>✓</u>	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yards Tank Bottom material
contaminated sludge

Box
30529

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.

Karin C. Smith
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Chris Baker
Signature of Transporter's Agent

Date and Time Received 8-2-11

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Barbara E. Ryan
Signature of Facility Agent

Date and Time Received 8/2/11

NON-HAZARDOUS WASTE MANIFEST

70210

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt + concrete</u>		
<u>Box # 2523</u>		

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]
Signature of Generator's Authorized Agent

8-5-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address 4647 W Hwy 150
City/State Springer, TX

Telephone No. _____
424
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

8-5-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

8-5-11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

44281

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

575 796-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)			
Drilling Fluids	_____	Tank Bottoms	<u>_____</u>
Completion Fluids	_____	Gas Plant Waste	_____
Contaminated Soil	<u>_____</u>	Other Materials	_____
Exempt Fluids _____			
C117 No. _____			
Pit No. _____			
DESCRIPTION / NOTES			
<u>12 yards Tank Bottoms</u>			
<u>Contaminated Soil + concrete</u>			
<u>10 x 12 ft</u>			

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.

Lorin C. Smith
Signature of Generator's Authorized Agent

9-5-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address 4647 W. Hwy 150
City/State Albuquerque, NM

Telephone No. _____

434
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-5-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

8/5/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

70217

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>Drilling Fluids</u>		
<u>Box 20521</u>		

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.

Kevin C. Lott
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

424-4591
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Kevin C. Lott
Signature of Transporter's Agent

8-8-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

8/8/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

78218

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards in manifest location</u>		
<u>Box 20529</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

4241 4091
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

8-8-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

8/6/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

70219

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 393-5821

Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMDS50010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

Truck No. 4421 7000

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

Date and Time Received _____

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

Date and Time Received _____

NON-HAZARDOUS WASTE MANIFEST

76227

PART I: Generator Navajo Refining - Lea Plant
 Address 7406 S. Main
 City/State Lovington, NM 88260

(575) 396-5821
 Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. WMD350010367

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
 Signature of Generator's Authorized Agent

 Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
 Address _____
 City/State _____

 Telephone No.
435/450A
 Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
 Signature of Transporter's Agent

05/16/11
 Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079
 Telephone No.
www.crihobbs.com
 E-mail

CERTIFICATION:

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

[Signature]
 Signature of Facility Agent

05/16/11
 Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

75228

PART I: Generator Hovajo Refining - Gas Plant
Address 7800 S. Main
City/State Lovington, N.M. 88260

(575) 393-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. WMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____
Contaminated Soil <u>18</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>18 yards Contaminated Soil</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

78229

PART I: Generator Savage Refining - Lee Plant
 Address 7405 S. Main
 City/State Lovington, NM 88260

(575) 393-5821
 Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

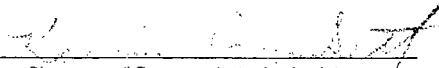
Permit No. NM360010367

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<p style="font-size: 1.2em; font-family: cursive;">12 yards contaminated soil</p>		

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

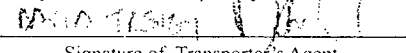
PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
 Address _____
 City/State _____

Telephone No. _____
433/444
 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

8/10/11
 Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079

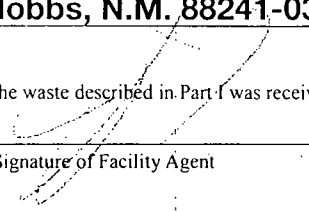
Telephone No.

www.crihobbs.com

E-mail

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

NON-HAZARDOUS WASTE MANIFEST

70225

PART I: Generator Navajo Refining - Lea Plant
Address 7405 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. MM1360010357

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yard contaminated dirt</u>		
<u>Don't know</u>		

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]
Signature of Generator's Authorized Agent

9-5-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

Truck No. _____

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-5-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9-5-11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

70241

PART I: Generator Cavale Refining - Gas Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 393-1079
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. 20360510367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>12 yards</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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]
Signature of Generator's Authorized Agent

9/14/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/14/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/14/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

70223

PART I: Generator Navajo Refining - Lee Plant
 Address 7406 S. Main
 City/State Lovington, NM 88260

(575) 396-5821
 Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
 Signature of Generator's Authorized Agent

 Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
 Address _____
 City/State _____

 Telephone No.

704 Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
 Signature of Transporter's Agent

9 Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

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

NON-HAZARDOUS WASTE MANIFEST

76246

PART I: Generator Navajo Refining - Lea Plant
 Address 7406 S. Main
 City/State Lovington, NM 88260

(575) 396-0821
 Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

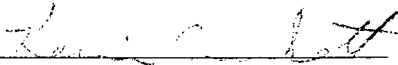
Permit No. WDS36010307

Property Name Lovington
 (Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)					
Drilling Fluids	_____	Tank Bottoms	_____	Exempt Fluids	_____
Completion Fluids	_____	Gas Plant Waste	_____	C117 No.	_____
Contaminated Soil	<u>✓</u>	Other Materials	_____	Pit No.	_____
DESCRIPTION / NOTES					
<div style="font-family: cursive; font-size: 1.2em;">12 yards contaminated dirt</div>					

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

9-14-11
 Date and Time of Shipment

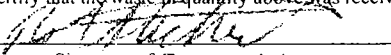
PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
 Address _____
 City/State _____

325-578-5421
 Telephone No.
421
 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

9-14-11
 Date and Time Received

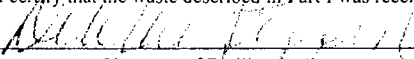
PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
 Address P.O. Box 388
 City/State Hobbs, N.M. 88241-0388

(575) 393-1079
 Telephone No.
www.crihobbs.com
 E-mail

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

11/11/11
 Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76245

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box 2523</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-410
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

Date and Time Received 9-14-11

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

Date and Time Received 9/14/11

NON-HAZARDOUS WASTE MANIFEST

70209

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. ND300010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box AWS-RT9</u>		

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.

Ramin Caudill
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

434-4104
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Brooker
Signature of Transporter's Agent

9-14-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Debbie Green
Signature of Facility Agent

9/14/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76242

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <input checked="" type="checkbox"/>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box 20-2</u>		

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.

Lamin C. Smith
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

434-4109
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Proctor
Signature of Transporter's Agent

9-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Shirley L. Papp
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76239

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Kenneth Carlett
Signature of Generator's Authorized Agent

9-15-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Bo Sticker
Signature of Transporter's Agent

9-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

William Peppin
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76226

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, N.M. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box 2569</u>		

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.

Karin C. Smith
Signature of Generator's Authorized Agent

9-15-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-4100
Truck No.

CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Brooker
Signature of Transporter's Agent

9-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com
E-mail

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

Alvin Leppin
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76240

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank, Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials <u>✓</u>	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil and crude bottom drums</u>		

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.

Louis C. Smith
Signature of Generator's Authorized Agent

9-15-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76243

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88250

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. ND3600107

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		
<u>Box 30521</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

434-4100
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76237

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
Signature of Generator's Authorized Agent

9/15/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/15/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

78233

PART I: Generator Navajo Refining Co - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u> </u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box 20-2</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

404-4108
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-16-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail _____

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/16/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76235

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. WMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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]
Signature of Generator's Authorized Agent

9-16-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421

Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-16-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/15/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76236

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. ND36010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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.

Lamin Curbish
Signature of Generator's Authorized Agent

9-19-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.

421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-19-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/19/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76246

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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.

Karin C. Smith
Signature of Generator's Authorized Agent

9-19-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-19-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/19/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76248

PART I: Generator Newjo Refining - Tea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM3001037

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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]
Signature of Generator's Authorized Agent

9-19-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-19-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/19/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76253

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88250

(575) 396-5321
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010357

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yds CONTAMINATED SOIL

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]
Signature of Generator's Authorized Agent

9-20-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421

Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-20-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/20/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76252

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yds. CONTAMINATED SOIL</u>		

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]
Signature of Generator's Authorized Agent

9-20-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/20/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/20/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76251

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)			
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____	
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____	
Contaminated Soil <u>/</u>	Other Materials _____	Pit No. _____	
DESCRIPTION / NOTES			
<u>12 yds CONTAMINATED SOIL</u>			

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.

K. C. Roth
Signature of Generator's Authorized Agent

9-20-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-20-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/20/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76270

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yards contaminated soilBox 20535

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-410A
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Broder
Signature of Transporter's Agent

9-21-11

Date and Time Received _____

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

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 _____

NON-HAZARDOUS WASTE MANIFEST

76271

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yards contaminated soilBox 20529

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-410A
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Brooker
Signature of Transporter's Agent

9-21-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Debbie Lepper
Signature of Facility Agent

9/21/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76250

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. ND360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yards contaminated dirt

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.

Karin S. Smith
Signature of Generator's Authorized Agent

9-21-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/21/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

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

NON-HAZARDOUS WASTE MANIFEST

76234

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box # 25537</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-410A
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

Date and Time Received 9-21-11

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

Date and Time Received 9/21/11

NON-HAZARDOUS WASTE MANIFEST

76254

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)

Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____

DESCRIPTION / NOTES

12 yds CONTAMINATED SOIL

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]
Signature of Generator's Authorized Agent9-21-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421

Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent9-21-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent9/21/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76262

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
Signature of Generator's Authorized Agent

9/21/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/21/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/21/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76257

PART I: Generator NAVAJO REFINING - LEA PLANT
Address 7406 S. Main
City/State LOVINGTON, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM369010367

Property Name LOVINGTON
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
Signature of Generator's Authorized Agent

9/23/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name FLUID TRANSPORT
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/23/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76255

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box 25537</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

434-410A
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-23-11

Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/23/11

Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76258

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank, Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)			
Drilling Fluids	_____	Tank Bottoms	_____
Completion Fluids	_____	Gas Plant Waste	_____
Contaminated Soil	<u>✓</u>	Other Materials	_____
Exempt Fluids _____			
C117 No. _____			
Pit No. _____			
DESCRIPTION / NOTES			
<u>12 yards contaminated soil</u>			

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.

Karin C. Smith
Signature of Generator's Authorized Agent

9/22/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/22/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76259

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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]
Signature of Generator's Authorized Agent

9/22/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421

Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/22/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76256

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM. 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____ Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU. FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. <u>1</u>
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box 30527</u>		

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]
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

424-4101
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-28-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/28/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76264

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank, Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CI17 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box 20535</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

434-4107
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Proctor
Signature of Transporter's Agent

Date and Time Received _____

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Debbie Leppan
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76269

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 395-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Box # 20529</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

Date and Time of Shipment _____

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No. _____

424-4101
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Brooker
Signature of Transporter's Agent

9-22-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Robert Eppin
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76260

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Karin C. Smith
Signature of Generator's Authorized Agent

9-22-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-22-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/22/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76247

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NWD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <input checked="" type="checkbox"/>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated dirt</u>		

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.

Kenneth C. Lett
Signature of Generator's Authorized Agent

9/26/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.

421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/26/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/26/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76263

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Kevin C. Lett
Signature of Generator's Authorized Agent

9/26/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/26/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/26/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76275

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	CH17 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

9/27/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/27/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/27/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76278

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821

Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM36010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste <input checked="" type="checkbox"/>	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated materials</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

9-27-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421

Telephone No.

421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-27-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/27/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76291

PART I: Generator NAVAJO REFINING - LEA PLANT
Address 7406 S. MAIN
City/State LOVINGTON, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NM360000367

Property Name LOVINGTON
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste <u>✓</u>	C117 No. _____
Contaminated Soil _____	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated material</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

9-27-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name FLUID TRANSPORT
Address _____
City/State _____

325-573-5421
Telephone No.
#421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-27-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.

www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/27/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76265

PART I: Generator Navajo Refining & Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Eloy T. Hernandez
Signature of Generator's Authorized Agent

9-27-11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9-27-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/27/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76274

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. NMD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		

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.

Eloy Hernandez
Signature of Generator's Authorized Agent

9/28/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

[Signature]
Signature of Transporter's Agent

9/28/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

[Signature]
Signature of Facility Agent

9/28/11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76282

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGINATION OF WASTE:

Operations Center _____

Permit No. NM360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)		
Drilling Fluids _____	Tank Bottoms _____	Exempt Fluids _____
Completion Fluids _____	Gas Plant Waste _____	C117 No. _____
Contaminated Soil <u>✓</u>	Other Materials _____	Pit No. _____
DESCRIPTION / NOTES		
<u>12 yards contaminated soil</u>		
<u>Orange Navajo box</u>		

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.

Kevin Crummett
Signature of Generator's Authorized Agent

Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

Telephone No.

424 - 4104
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Steve Braker
Signature of Transporter's Agent

11-15-11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079

Telephone No.

www.crihobbs.com

E-mail

CERTIFICATION:

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

Jessica Peann
Signature of Facility Agent

11-15-11
Date and Time Received

NON-HAZARDOUS WASTE MANIFEST

76283

PART I: Generator Navajo Refining - Lea Plant
Address 7406 S. Main
City/State Lovington, NM 88260

(575) 396-5821
Telephone No.

ORIGIN OF WASTE:

Operations Center _____

Permit No. MD360010367

Property Name Lovington
(Well, Tank Battery, Plant, Facility)

WASTE IDENTIFICATION AND AMOUNT (BARRELS, YARDS, TONS, CU.FT., LBS., UNITS, ETC.)					
Drilling Fluids	_____	Tank Bottoms	_____	Exempt Fluids	_____
Completion Fluids	_____	Gas Plant Waste	_____	C117 No.	_____
Contaminated Soil	<input checked="" type="checkbox"/>	Other Materials	_____	Pit No.	_____
DESCRIPTION / NOTES					
<u>12 yards contaminated soil wood</u>					

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.

Kerim C. Smith
Signature of Generator's Authorized Agent

11/15/11
Date and Time of Shipment

PART II: TRANSPORTER: (To be completed in full by Transporter)

Name Fluid Transport
Address _____
City/State _____

325-573-5421
Telephone No.
421
Truck No.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the destination below.

Bob Mitchell
Signature of Transporter's Agent

11/15/11
Date and Time Received

PART III: DISPOSAL OR RECLAMATION SITE:

Name Controlled Recovery, Inc.
Address P.O. Box 388
City/State Hobbs, N.M. 88241-0388

(575) 393-1079
Telephone No.
www.crihobbs.com
E-mail

CERTIFICATION:

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

Robert Kappin
Signature of Facility Agent

11/15/11
Date and Time Received

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

OPERATOR

☒ Initial Report ☐ Final Report

Name of Company: Navajo Refining Co. LLC	Contact: Aaron Strange
Address: 7406 South Main Lovington, N.M.	Telephone No. 575-748-3311
Facility Name: Lovington Plant	Facility Type: Petroleum Refinery

Surface Owner	Mineral Owner	Lease No.
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LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
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Latitude _____ Longitude _____

NATURE OF RELEASE

Type of Release: Waste Water (in the process of being stripped by air)	Volume of Release: ~ 15 barrels	Volume Recovered: ~ 0 barrels
Source of Release: Frac tank (temporary replacement for TK-1209B Strip Tank while it is being repaired)	Date and Hour of Occurrence: 12/10/2011 ~ 08:30	Date and Hour of Discovery: 12/10/2011 ~ 08:45
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Called Carl Chavez with the OCD in Santa Fe (505-476-3490, however there was no answer and could not leave a message. Called the OCD Lovington Office (575-393-6161 ext. 111), however the voicemail was full. Left a voicemail with the operator's answering machine at the OCD Lovington Office. Sent an email to Michael Leighton the City Manager of Lovington, and to Carl Chavez.	
By Whom? Estefani Hammond (by phone) and Aaron Strange (by email).	Date and Hour: 12/10/2011 at ~ 10:30 to the OCD Santa Fe office by phone, 12/10/2011 at ~ 10:35 to the OCD Lovington office by phone, 10/12/2011 at ~ 07:51 to the OCD Santa Fe by email, and 10/12/2011 at ~ 07:51 to the City Manager of Lovington by email.	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse. NA	

If a Watercourse was Impacted, Describe Fully.* NA


Describe Cause of Problem and Remedial Action Taken.*

At ~ 08:30 a frac tank overflowed waste water into a secondary containment which then overflowed onto the ground. A vacuum truck pulled out of the secondary containment to prevent more of the water from overflowing onto the ground, however ~15 barrels made it to the ground was not recovered. The frac tank liner inside the tank is breaking apart and plugged off P-307 suction strainer screen causing the spill. Operators are cleaning the suction screen once a week to prevent further incidents. The Frac tank is being used to temporarily replace the TK-1209B Strip Tank while it is being repaired. It was in the process of stripping the water with air at the time of the spill.

Describe Area Affected and Cleanup Action Taken.*

The area affected was at the Frac tank which is just West of Tank 1209B. Approximately 15 barrels of water was not recovered. There are no sign of the spill on the ground; no oily staining. The spill area will be excavated and place into bins for disposal.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: 	OIL CONSERVATION DIVISION		
Printed Name: Aaron Strange	Approved by District Supervisor:		
Title: Sr. Environmental Technician	Approval Date:	Expiration Date:	
E-mail Address: aaron.strange@hollycorp.com	Conditions of Approval:		Attached <input type="checkbox"/>
Date: 12/15/2011	Phone: 575-703-5057		

Combs, Robert

From: David Boyer [dgboyer@sesi-nm.com]

Sent: Thursday, April 12, 2012 11:41 AM

To: Combs, Robert

Subject: Wastewater table, Lea Refinery

Attached.

The following constituents exceed WQCC standards: Benzene, chloride and TDS.

Other WQCC constituents are below WQCC standards.

The following non-WQCC constituents were minimal: TPH, Oil and Grease

Due to warm, dry windy conditions, spill liquids were not recoverable.

Conclusion:

Due to the above analyses and environmental conditions at the time of the spill, no drilling was performed. When the area was examined for possible drilling locations, no sign of the spill was visible. Benzene in the release would have quickly volatilized. Though chloride is the other constituent that exceeds a WQCC standard, depth to groundwater exceeds 100 feet at this location and there are three nearby monitor wells (MW-6 adjacent to the spill, and MW-9 and MW-10 downgradient) that are routinely sampled. Sampling of all three wells subsequent to the wastewater releases show that chloride concentrations in these wells are below groundwater standards.

David G. Boyer, P.G.
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Hobbs, NM 88241
office: 575-397-0510
fax: 575-393-4388
cell: 575-390-7067
email: dgboyer@sesi-nm.com

Wastewater samples from Lea Refinery

Constituent	Date	Result (mg/L)	WQCC standard
			(mg/L)
Benzene	01/31/11	0.068	0.010
"	02/18/11	2.4	0.010
Toluene	01/31/11	0.088	0.75
"	02/18/11	0.12	0.75
Ethybenzene	01/31/11	0.035	0.75
"	02/18/11	0.064	0.75
Total Xylenes	01/31/11	0.058	0.62
"	02/18/11	0.10	0.62
MTBE	02/18/11	<0.0050	--
TPH (Diesel range)	02/18/12	2.4	--
TPH (Gasoline range)	02/18/11	1.25	--
Metals			
Aluminum	02/18/11	0.0162	5.0
Arsenic	01/31/11	0.0780	0.1
"	02/18/11	0.0845	0.1
Barium	01/31/11	0.148	1.0
"	02/18/11	0.212	1.0
Boron	02/18/11	0.557	0.8
Cadmium	01/31/11	<0.00200	0.01
"	02/18/11	<0.00200	0.01
Calcium	01/31/11	223	--
Chromium	01/31/11	0.00903	0.05
"	02/18/11	0.0212	0.05
Copper	02/18/11	<0.00500	1.0
Lead	01/31/11	<0.00500	0.05
Magnesium	01/31/11	38.0	--
Manganese	02/18/11	0.0684	0.2
Mercury	02/18/11	<0.000200	0.002
Molybdenum	02/18/12	0.00987	1.0
Nickel	02/18/11	<0.00500	0.2
Potassium	01/31/11	17.0	--
Selenium	01/31/11	0.0243	0.05
"	02/18/11	0.0178	0.05
Silver	01/31/11	<0.00500	0.05
"	02/18/11	<0.00500	0.05
Sodium	01/31/11	854	--
Zinc	02/18/11	0.0429	10.0

Total Dissolved Solids	01/31/11	3,530	1,000
Anions			
Chloride	02/18/11	1,670	250
Fluoride	02/18/11	1.57	1.6
Sulfide	01/31/11	10.2	--
Cyanide	02/18/11	<0.0200	0.2
Nitrogen			
Nitrate/Nitrite (as N)	01/31/11	1.75	10.0
Ammonia (as N)	01/31/11	0.243	--
"	02/18/11	2.90	--
Nitrogen, Total Kjeldahl	01/31/11	11.3	--
"	02/18/11	14.5	--
Nitrogen, organic	02/18/11	11.6	--
Others			
BOD	02/18/11	34.8	--
Phenolics	02/18/11	<0.0500	--
Oil and Grease	01/31/11	8.62	--
Total Suspended Solids	02/18/11	6.67	--