



McNabb Partners, LLC
Hobbs • Carlsbad • Midland
575.397.0050
www.mcnabbpartnersllc.com

February 5, 2025

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

RE: Deferral Request
Incident ID: nAPP2415825281
Ogden State #005A
Lat/Long: 32.153771, -104.260853
Project ID: 20160312-murchison-ogdenState5A

NMOCD:

McNabb Partners submits this deferral request on behalf of Murchison Oil and Gas, LLC. This document describes site assessment, soil sample analysis and deferral request for Ogden State #005A (Site).

This report includes remediation action and confirmation sampling activities conducted at the Ogden State #005A production site. The remediation of impacts outside of the lined containment was completed in accordance with the remediation work plan submitted to NMOCD and approved on 10/07/2024 for the remediation. After conducting geophysical Karst survey by a method of electric conductivity and a certified civil engineer evaluation of the Site, the remediation was completed within a lined tank battery containment excluding a 5-foot deferral zone around heavy production equipment (3 steel 500 bbls oil tanks, 2 fiberglass 500 bbls water tanks, 1 bbl fiberglass gun barrel tank and a separator on a concrete pad).

- Communications with NMOCD regarding workplan approval, geophysical Kast survey, civil engineers memorandum and all sampling notifications and are included in Appendix A through D.

1. Remediation Activities and Confirmation Sampling

Closure Criteria for the site according to Table I in 19.29.12.12 NMAC is listed below:

High Karst Potential	Chloride (mg/kg)	GRO+DRO (mg/kg)	TPH Ext. (mg/kg)	Benzene (mg/kg)	BTEX (mg/kg)
NMOCD Closure Criteria	600	--	100	10	50

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The confirmation soil samples (5-point composite) were collected from areas not greater than 200 square feet (or less) from the excavation bases and sidewalls and analyzed for TPH, BTEX and chloride by a certified laboratory.

Remediation outside of the tank battery containment:

16 confirmation samples were collected from the base of the excavation at 1 foot below ground surface (ft bgs), (i.e., BS-01 through BS-16) and 4 confirmation samples were collected from the walls of the excavation (i.e., WS-01 through WS-04). Analytical results indicate that side wall confirmation samples BS-03 and BS-08 exceed NMOCD closure criteria for chloride concentrations listed in Table I (19.15.29 NMAC).

Following the receipt of analytical data, the respective areas BS-03 and BS-08 were excavated to a depth of 1.5 ft bgs to ensure all impacted soils were removed. On October 31, 2024, after the completion of the excavation, composite base samples BS-03 and BS-08 were recollected at a new depth, along with 12 new confirmation base samples (i.e., BS-17 through BS-24 at 1 ft bgs, and BS-25 through BS-28 at 10.5 ft bgs). 12 confirmation samples were collected from the walls of the excavation (i.e., WS-05 through WS-08 at depth of 0-1 ft bgs, and WS-09 through WS-16 at a depth of 0-10.5 ft bgs). All samples were analyzed for TPH, BTEX and chloride by a certified laboratory. Analytical results indicate that all samples met concentrations listed in Table I (19.15.29 NMAC).

Remediation within a lined tank battery containment:

The remediation within a lined tank battery containment, was conducted in agreement with NMOCD requests for a geophysical Karst review and subsequent recommendation from a certified civil engineer. On November 24th, 2024, Southwest Geophysical Consulting conducted a geophysical Karst review by a method of electrical resistivity imaging and determined that no Karst features were found within a 200-ft of an area of concern. Upon receipt of geophysical Karst review, Pettigrew Associates (civil engineers certified in a state of New Mexico) collected the samples from surfaces of existing excavations at that time to determine a soil type and stability and assessed the future area of an excavation. As a result, they recommended protecting existing structures in place and that no excavation occurs within 5 feet of load bearing structures (storage tanks and a separator on a concrete pad)

On January 17th, 2025, 30 base confirmation samples (i.e., BS-29 through BS-58) were collected from the base of the excavation at depths from 1 ft bgs to 10 ft bgs. 12 side wall confirmation samples (i.e., WS-17 through WS-28) were collected from the outside walls of the excavation. Analytical results from the laboratory indicated that several confirmation samples (i.e., BS-31, BS-34, BS-42, BS-44 through BS-49, and WS-18) exceeded the closure criteria for TPH and/or chloride concentrations. On January 22nd, 2025, the excavation was expanded vertically and horizontally, and new confirmation samples (i.e., BS-31, BS-34, BS-42, BS-44 through BS-49, BS-59, WS-18A, and WS-29) were collected from every 200 sq ft of the new excavation surfaces and side walls.



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Analytical results indicate that all base and side wall confirmation sample meet the most stringent closure criteria for sites located in area of high Karst potential, therefore all impacted soil was removed from the tank battery containment, excluding a 5-foot deferral area.

Deferral of the remaining contamination:

On January 17th, 2025, 6 side wall composite samples (i.e., DSW-01 through DSW-06) were collected from every 200 sq ft of the inner wall excavation surface to calculate the volume of remaining contamination under the 5-foot deferral area. All inner side wall samples exceeded the closure criteria for TPH and/or chloride concentrations.

Based on NMOCD recommendation, On January 28th, 2025, 5 vertical delineation test pit sample points (i.e., TP-1 through TP-5) were installed to accurately calculate the cubic yardage of remaining contaminants. Test pit samples were collected directly next to the inner side walls of the excavation at depths between 2 and 5 ft bgs to investigate possible contamination left in place. All vertical delineation samples met the most stringent closure criteria.

- Plat 1 shows the site map of the entire Ogden State #005A well pad.
- Plats 2A & 2B show the final excavation depths with confirmation sample locations.
- Plat 3 shows the location of all deferral and delineation sample points.
- Confirmation sample results are included in Table A Summary of Analytical.
- Vertical delineation, deferral and inner side wall sample results are included in Table B Summary of Analytical.
- All laboratory reports are included in Appendix E.
- Figures 1 through 36 show the photolog of remediation activities on site

2. Deferral Request

Deferral Requests Only	
Requesting a deferral of the remediation closure due date with approval of this submission?	Yes
Have the lateral and vertical extents of the contamination been fully delineated?	Yes
Is the remaining contamination in areas immediately under or around production equipment where remediation could cause a major facility deconstruction?	Yes
What is the remaining surface area (in sq ft) that will still need to be remediated if deferral is granted?	2900
What is the remaining volume (in cubic yards) what still needs to be remediated if the deferral is granted?	373
Enter the facility ID on which this deferral should be granted	
Enter the well API on which this deferral should be granted	30-015-37264
Contamination does not cause an imminent risk to human health, the environment or groundwater.	Yes



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Overall, 11,490 square feet of contaminated soil surface has been remediated both around and inside the tank battery containment. 1,502 cubic yards of contaminated soil has been hauled off for a proper disposal at R360 Red Bluff Landfill near Orla, TX. All waste manifests will be sent to NMOCD as a separate email due to a file size upload limitations.

McNabb Partners on behalf of Murchison Oil and Gas, LLC respectfully ask NMOCD for deferral of remediation within 5 feet of load bearing structures (i.e., 3 steel 500 bbls oil tanks, 2 fiberglass 500 bbls water tanks, 1 bbl fiberglass gun barrel tank, and a separator on a concrete pad). The contamination is fully delineated in sample points TP-1 through TP-5 at depths between 2 and 5 ft bgs and does not cause an imminent risk to human health, the environment, or ground water. The remaining affected soil is confined to the space directly beneath the production equipment, where remediation would cause significant deconstruction of the facility.

The remaining soil impacts represented by inner side wall samples DSW-01 through DSW-06 will be addressed during the facility decommissioning phase in accordance with 19.15.29.12 and 19.15.29.13 NMAC, once the site is no longer being used for oil and gas operations.

An action report detailing the final remediation and reclamation efforts and following confirmation sampling activities will be submitted to NMOCD upon the completion of the future work.

Please contact me with any questions.

Sincerely,

Dimitry Nikanorov
Project Manager
McNabb Partners
(917) 497-6890



Copy: Murchison Oil and Gas, LLC
3R Operating, LLC
State Land Office



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Figure 1. View of the excavation.



Figure 2. View of the excavation.



Figure 3. BS-03 - 1.5 ft area of the excavation.



Figure 4. BS-08 - 1.5 ft area of the excavation.



Figure 5. View of the excavation.



Figure 6. View of the excavation.



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Figure 7. View of the excavation.



Figure 8. View of the excavation.



Figure 9. View of the excavation.



Figure 10. View of the excavation.



Figure 11. Excavation depth verification.



Figure 12. Excavation depth verification.



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Figure 13. 5-foot buffer zone verification.



Figure 14. 5-foot buffer zone verification.

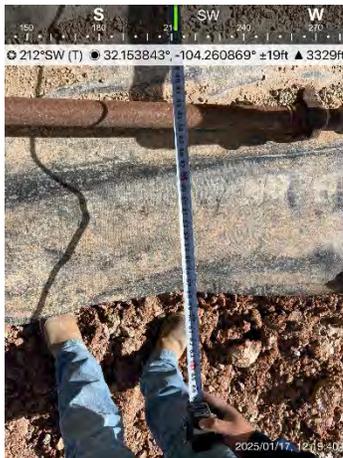


Figure 15. 5-foot buffer zone verification.



Figure 16. View of the excavation.



Figure 17. View of the excavation.

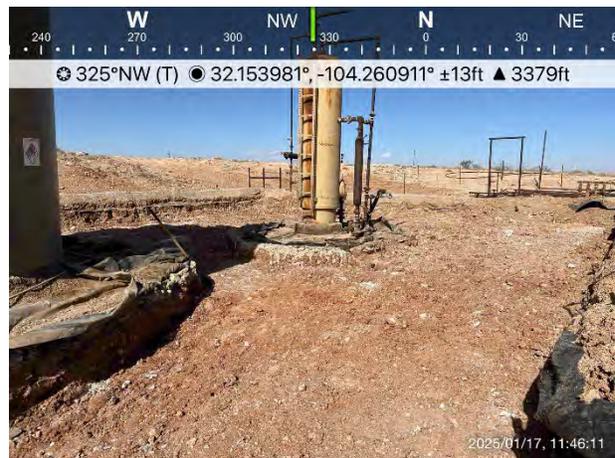


Figure 18. View of the excavation.



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Figure 19. View of the excavation.

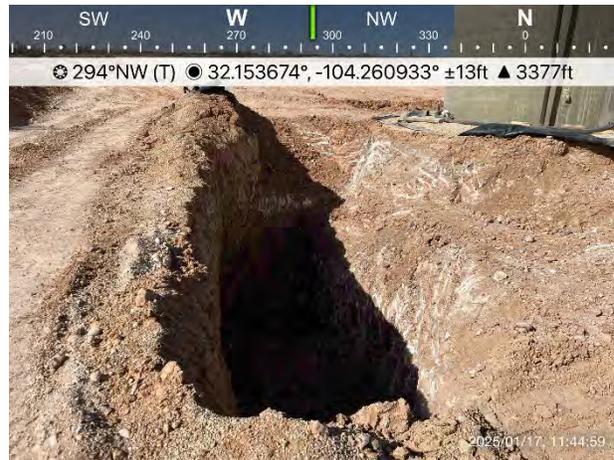


Figure 20. View of the excavation.



Figure 21. View of the excavation.



Figure 22. View of the excavation.



Figure 23. View of the excavation.



Figure 24. View of the excavation.



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Figure 25. View of the excavation.



Figure 26. View of the excavation.



Figure 27. View of the excavation.



Figure 28. View of the excavation.

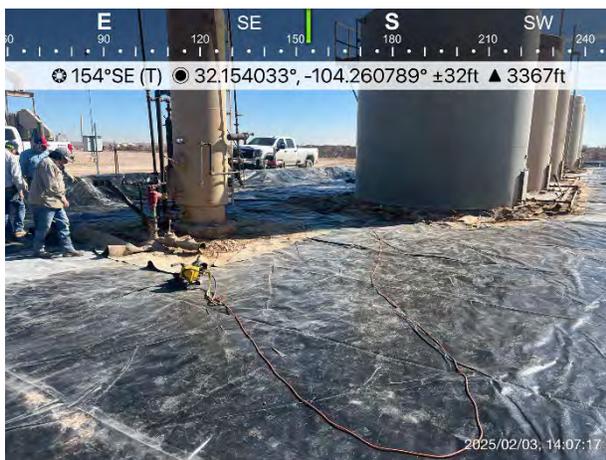


Figure 29. View of the excavation.



Figure 30. View of the excavation.



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Figure 31. CS-02 partially within 5-foot buffer.



Figure 32. CS-06 entirely within 5-foot buffer.

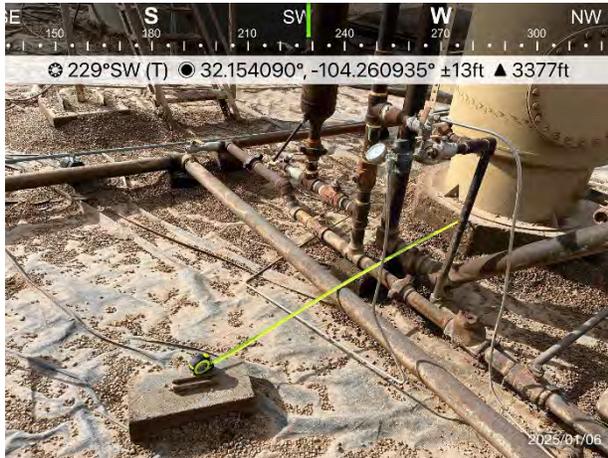


Figure 33. 5-foot buffer around a separator.



Figure 34. Surface pipeline outside of 5-foot buffer (removed).



Fig. 35. Liner repaired at the 5-foot buffer mark.

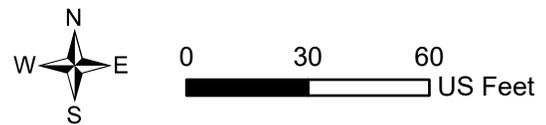
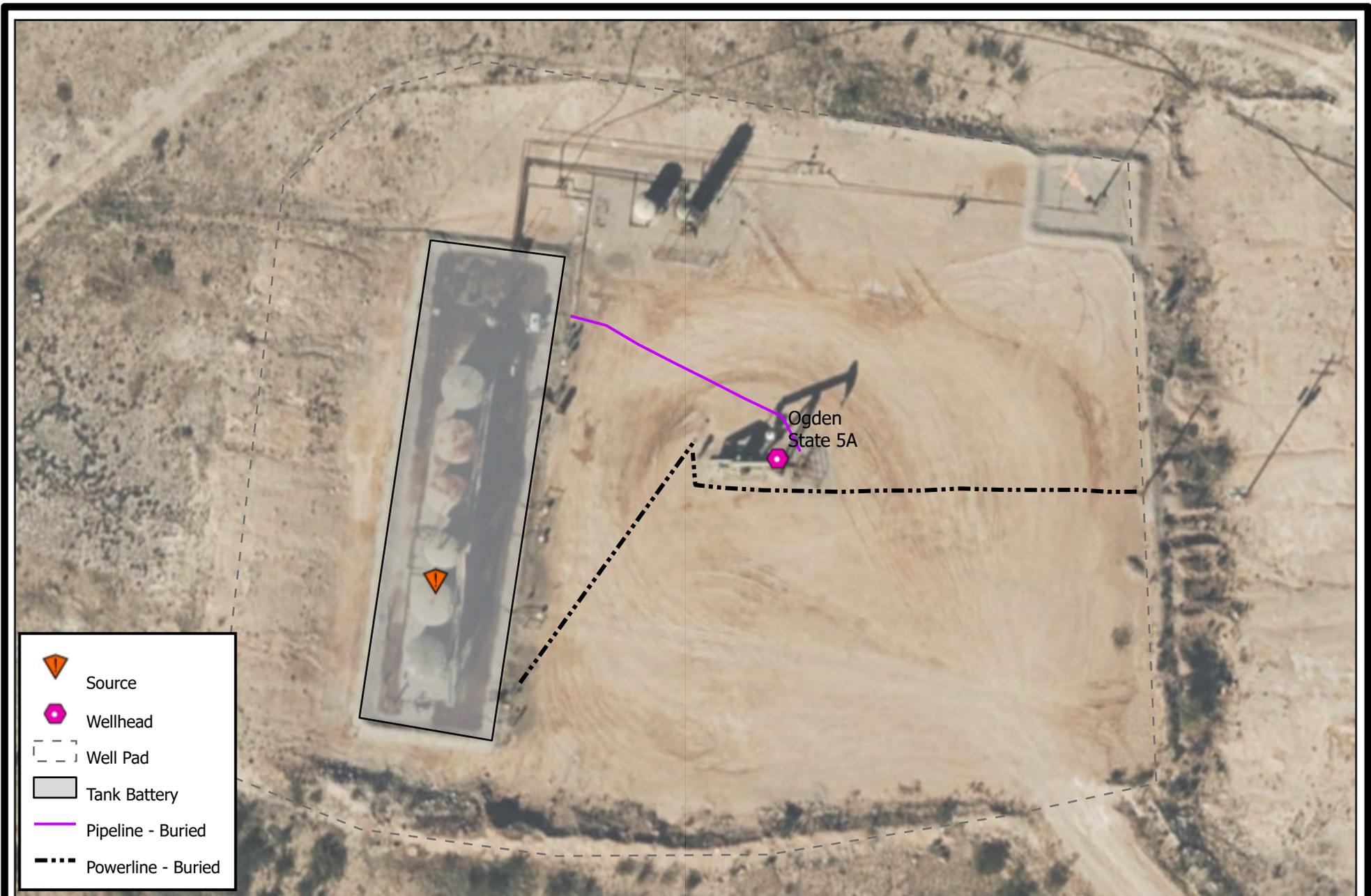


Fig. 36. West of the battery before all lines outside of 5-foot buffer were removed.

Plats



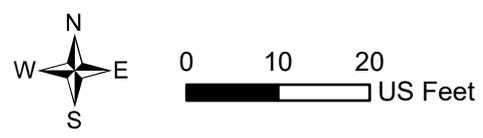
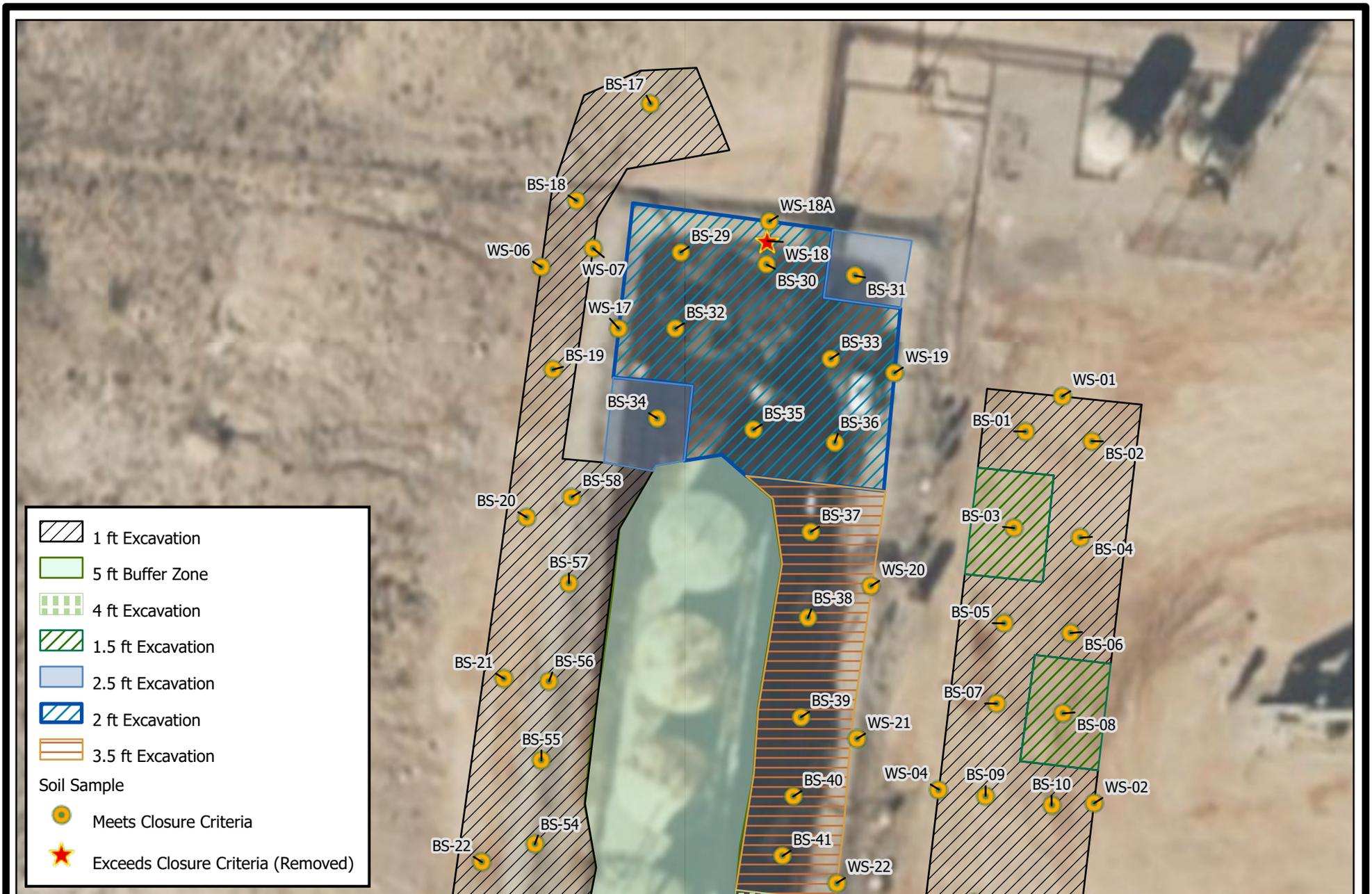
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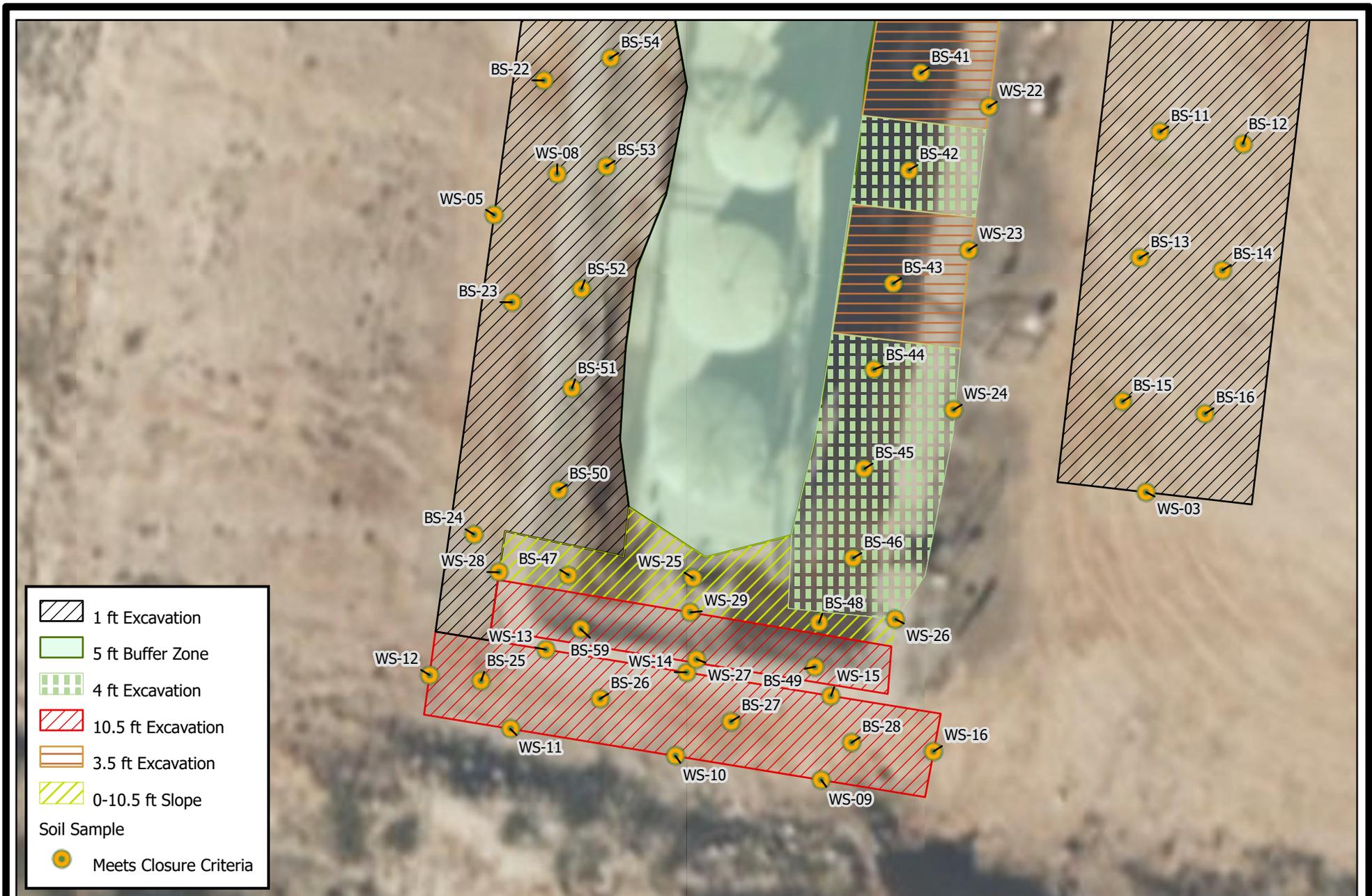
Site Map Ogden State #5A
Incident #: nAPP2415825281 Prj. ID: 20160312-murchison-ogdenState5A

Plat 1
11/04/2024



Confirmation Sample Locations
 Ogden State #5A
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Plat 2A
 01/24/2025



1 ft Excavation
 5 ft Buffer Zone
 4 ft Excavation
 10.5 ft Excavation
 3.5 ft Excavation
 0-10.5 ft Slope
 Soil Sample
 Meets Closure Criteria

0 10 20 US Feet

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Confirmation Sample Locations
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Plat 2B
 01/24/2025



Delineation and Deferral Sample Locations Ogden State #5A
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Plat 3
02/04/2025

Tables



Table A. Analytical Summary
Ogden State #005A

Sample ID	Date	Depth (Feet)	Chloride (mg/kg)	GRO (mg/kg)	DRO (mg/kg)	GRO+DRO (mg/kg)	MRO (mg/kg)	TPH Ext. (mg/kg)	Benzene (mg/kg)	BTEX (mg/kg)	Lab	Lab #
											(Hall/Cardinal)	
NMOCD Closure Criteria			600	--	--	--	--	100	10	50		
Excavation Base Confirmation Samples												
BS-01	10/23/2024	1	416	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-01
BS-02	10/23/2024	1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-02
BS-03	10/23/2024	1	1140	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-03
BS-03	10/31/2024	1.5	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-01
BS-04	10/23/2024	1	432	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-04
BS-05	10/23/2024	1	464	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-05
BS-06	10/23/2024	1	176	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-06
BS-07	10/23/2024	1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-07
BS-08	10/23/2024	1	640	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-08
BS-08	10/31/2024	1.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-02
BS-09	10/23/2024	1	544	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-09
BS-10	10/23/2024	1	320	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-10
BS-11	10/23/2024	1	448	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-11
BS-12	10/23/2024	1	400	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-12
BS-13	10/23/2024	1	320	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-13
BS-14	10/23/2024	1	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-14
BS-15	10/23/2024	1	144	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-15
BS-16	10/23/2024	1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-16
BS-17	10/31/2024	1	144	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-03
BS-18	10/31/2024	1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-04
BS-19	10/31/2024	1	80	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-05
BS-20	10/31/2024	1	128	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-06
BS-21	10/31/2024	1	64	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-07
BS-22	10/31/2024	1	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-08
BS-23	10/31/2024	1	96	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-09
BS-24	10/31/2024	1	64	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-10
BS-25	10/31/2024	10.5	192	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-11
BS-26	10/31/2024	10.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-12
BS-27	10/31/2024	10.5	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-13
BS-28	10/31/2024	10.5	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-14
BS-29	1/17/2025	2	384	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-01
BS-30	1/17/2025	2	368	<10.0	22.9	22.9	<10.0	22.9	<0.050	<0.300	Cardinal	H250296-02
BS-31	1/17/2025	2	768	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-03
BS-31	1/22/2025	2.5	192	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-04
BS-32	1/17/2025	2	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-04
BS-33	1/17/2025	2	416	<10.0	28.3	28.3	<10.0	28.3	<0.050	<0.300	Cardinal	H250296-05
BS-34	1/17/2025	2	320	<10.0	78.0	78.0	23.3	101.3	<0.050	<0.300	Cardinal	H250296-06
BS-34	1/22/2025	2.5	224	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-05
BS-35	1/17/2025	2	368	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-07
BS-36	1/17/2025	2	352	<10.0	13.0	13.0	<10.0	13.0	<0.050	<0.300	Cardinal	H250296-08

Table A. Analytical Summary
Ogden State #005A

Sample ID	Date	Depth (Feet)	Chloride (mg/kg)	GRO (mg/kg)	DRO (mg/kg)	GRO+DRO (mg/kg)	MRO (mg/kg)	TPH Ext. (mg/kg)	Benzene (mg/kg)	BTEX (mg/kg)	Lab	Lab #
											(Hall/Cardinal)	
NMOCD Closure Criteria			600	--	--	--	--	100	10	50		
BS-37	1/17/2025	3.5	544	<10.0	20.3	20.3	<10.0	20.3	<0.050	<0.300	Cardinal	H250296-09
BS-38	1/17/2025	3.5	544	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-10
BS-39	1/17/2025	3.5	368	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-11
BS-40	1/17/2025	3.5	432	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-12
BS-41	1/17/2025	3.5	288	<10.0	10.8	10.8	<10.0	10.8	<0.050	<0.300	Cardinal	H250296-13
BS-42	1/17/2025	3.5	192	<10.0	120.0	120.0	28.6	148.6	<0.050	<0.300	Cardinal	H250296-14
BS-42	1/22/2025	4	288	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-06
BS-43	1/17/2025	3.5	336	<10.0	22.5	22.5	<10.0	22.5	<0.050	<0.300	Cardinal	H250296-15
BS-44	1/17/2025	3.5	320	<10.0	90.1	90.1	22.0	112.1	<0.050	<0.300	Cardinal	H250296-16
BS-42	1/22/2025	4	368	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-07
BS-45	1/17/2025	3.5	640	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-17
BS-45	1/22/2025	4	304	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-08
BS-46	1/17/2025	3.5	640	<10.0	12.0	12.0	<10.0	12.0	<0.050	<0.300	Cardinal	H250296-18
BS-46	1/22/2025	4	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-09
BS-47	1/17/2025	5	832	<10.0	14.6	14.6	<10.0	14.6	<0.050	<0.300	Cardinal	H250296-19
BS-47	1/22/2025	5.5	336	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-10
BS-48	1/17/2025	10	720	<10.0	19.7	19.7	<10.0	19.7	<0.050	<0.300	Cardinal	H250296-20
BS-48	1/22/2025	10.5	320	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-11
BS-49	1/17/2025	8	768	<10.0	20.3	20.3	<10.0	20.3	<0.050	<0.300	Cardinal	H250296-21
BS-49	1/22/2025	8.5	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-12
BS-50	1/17/2025	1	288	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-22
BS-51	1/17/2025	1	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-23
BS-52	1/17/2025	1	336	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-24
BS-53	1/17/2025	1	208	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-25
BS-54	1/17/2025	1	320	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-26
BS-55	1/17/2025	1	320	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-27
BS-56	1/17/2025	1	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-28
BS-57	1/17/2025	1	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-29
BS-58	1/17/2025	1	176	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-30
BS-59	1/22/2025	10.5	256	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-13
Excavation Side Wall Confirmation Samples												
WS-01	10/23/2024	0-1	176	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-17
WS-02	10/23/2024	0-1	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-18
WS-03	10/23/2024	0-1	176	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-19
WS-04	10/23/2024	0-1	224	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246465-20
WS-05	10/31/2024	0-1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-15
WS-06	10/31/2024	0-1	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-16
WS-07	10/31/2024	0-1	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-17
WS-08	10/31/2024	0-1	352	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-18
WS-09	10/31/2024	0-10.5	96	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-19
WS-10	10/31/2024	0-10.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-20

Table A. Analytical Summary
Ogden State #005A

Sample ID	Date	Depth (Feet)	Chloride (mg/kg)	GRO (mg/kg)	DRO (mg/kg)	GRO+DRO (mg/kg)	MRO (mg/kg)	TPH Ext. (mg/kg)	Benzene (mg/kg)	BTEX (mg/kg)	Lab	Lab #
											(Hall/Cardinal)	
NMOCD Closure Criteria			600	--	--	--	--	100	10	50		
WS-11	10/31/2024	0-10.5	208	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-21
WS-12	10/31/2024	0-10.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-22
WS-13	10/31/2024	0-10.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-23
WS-14	10/31/2024	0-10.5	224	<10.0	29.3	29.3	15.2	44.5	<0.050	<0.300	Cardinal	H246673-24
WS-15	10/31/2024	0-10.5	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-25
WS-16	10/31/2024	0-10.5	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-26
WS-17	1/17/2025	0-2	416	<10.0	63.8	63.8	12.8	76.6	<0.050	<0.300	Cardinal	H250296-31
WS-18	1/17/2025	0-2	432	<10.0	137.0	137.0	47.5	184.5	<0.050	<0.300	Cardinal	H250296-32
WS-18A	1/22/2025	0-2.5	208	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-01
WS-19	1/17/2025	0-2	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-33
WS-20	1/17/2025	0-3.5	224	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-34
WS-21	1/17/2025	0-3.5	288	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-35
WS-22	1/17/2025	0-3.5	272	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-36
WS-23	1/17/2025	0-3.5	432	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-37
WS-24	1/17/2025	0-3.5	448	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-38
WS-25	1/17/2025	5-10	480	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-39
WS-26	1/17/2025	0-10	368	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-40
WS-27	1/17/2025	0-10	304	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-41
WS-28	1/17/2025	0-10	256	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250296-42
WS-29	1/22/2025	0-5.5	256	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-02
WS-29	1/22/2025	5.5-10.5	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250392-03
Legend:												
Sample exceeds NMOCD Closure Criteria												
Sample point has been excavated												

Table B. Analytical Summary
Ogden State #005A

Sample ID	Date	Depth (Feet)	Chloride (mg/kg)	GRO (mg/kg)	DRO (mg/kg)	GRO+DRO (mg/kg)	MRO (mg/kg)	TPH Ext. (mg/kg)	Benzene (mg/kg)	BTEX (mg/kg)	Lab (Hall/Cardinal)	Lab #
NMOCD Closure Criteria			600	--	--	--	--	100	10	50		
Initial Vertical Delineation Samples												
CS-01	8/23/2024	0.5	528	96.6	1650	1746.6	396	2142.6	<0.050	1.41	Cardinal	H245183-01
CS-01	8/23/2024	1	256	<10.0	49.7	49.7	12.4	62.1	<0.050	<0.300	Cardinal	H245183-02
CS-01	8/23/2024	1.5	256	<10.0	27.9	27.9	<10.0	27.9	<0.050	<0.300	Cardinal	H245183-03
CS-02	8/23/2024	0.5	112	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H245183-04
CS-02	8/23/2024	2	528	<10.0	10	<20.0	<10.0	10	<0.050	<0.300	Cardinal	H245183-05
CS-03	8/23/2024	0.5	896	<10.0	54.3	54.3	19.4	73.7	<0.050	<0.300	Cardinal	H245183-06
CS-03	8/23/2024	1	672	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H245183-07
CS-03	8/23/2024	1.5	480	<10.0	13.8	13.8	<10.0	13.8	<0.050	<0.300	Cardinal	H245183-08
CS-04	8/23/2024	0.5	352	12.1	444	456.1	121	577.1	<0.050	<0.300	Cardinal	H245183-09
CS-04	8/23/2024	1	240	<10.0	67.9	67.9	<10.0	67.9	<0.050	<0.300	Cardinal	H245183-10
CS-05	8/23/2024	0.5	1070	21.9	1150	1171.3	279	1450.3	<0.050	0.289	Cardinal	H245183-11
CS-05	8/23/2024	2	688	<10.0	42.5	42.5	<10.0	42.5	<0.050	<0.300	Cardinal	H245183-12
DS-02	10/31/2024	3	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-28
CS-06	8/23/2024	0.5	288	27.5	377	404.5	89	493.5	<0.050	1.55	Cardinal	H245183-13
CS-06	8/23/2024	1	128	46.4	977	1023.4	295	1318.4	<0.050	1.03	Cardinal	H245183-14
DS-01	10/31/2024	2.5	144	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246673-27
DS-03	11/12/2024	0.5	16	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246926-01
DS-03	11/12/2024	1	80	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246926-02
DS-03	11/12/2024	2	128	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H246926-03
Test Pit Deferral Samples												
TP-1	1/28/2025	2	160	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250487-01
TP-2	1/28/2025	2	240	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250487-02
TP-3	1/28/2025	5	192	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250487-03
TP-4	1/28/2025	4	304	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250487-04
TP-5	1/28/2025	3	176	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250487-05
Inner Side Walls from 5-ft Buffer Defferal Area												
DSW-01	1/17/2025	0-2	704	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250295-01
DSW-02	1/17/2025	0-3.5	768	<10.0	505	505	232	737	<0.050	<0.300	Cardinal	H250295-02
DSW-03	1/17/2025	0-3.5	976	<10.0	<10.0	<20.0	<10.0	<30.0	<0.050	<0.300	Cardinal	H250295-03
DSW-04	1/17/2025	0-5	928	<10.0	204	204	92.3	296.3	<0.050	<0.300	Cardinal	H250295-04
DSW-05	1/17/2025	0-1	1150	<10.0	810	810	263	1073	<0.050	<0.300	Cardinal	H250295-05
DSW-06	1/17/2025	0-1	2440	<10.0	1520	1520	127	1647	<0.050	<0.300	Cardinal	H250295-06
Legend:												
Sample exceeds NMOCD Closure Criteria												

Appendix A

Communications



McNabb Partners, LLC
Hobbs • Carlsbad • Midland



RE: [EXTERNAL] nAPP2415825281 Ogden State 5A - Backfilling and Sampling Confirmation

From Hall, Brittany, EMNRD <Brittany.Hall@emnrn.nm.gov>

Date Fri 1/24/2025 1:27 PM

To Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

2 attachments (1 MB)

Ogden State 5A Plat 2B.pdf; Ogden State 5A Plat 2A.pdf;

Dimitry,

If the bases and side walls meet closure criteria and the contamination at depths deeper than your excavations (if there was any) that was discovered during delineation activities have been addressed, grab samples at depth are not required.

Surface area and cubic yardage of impacted soils that remain will in place when the deferral is requested are required. I would suggest that inner sidewall samples be collected along the 5' buffer area (see red highlighted area on map. Additional inner walls may be present at the site but I am unable to identify where the separator is on the map) around the tanks/separator to help define how much soil is being left in place when requesting the deferral. Additional vertical delineation may need to be performed to calculate the cubic yardage, but I believe one of the boreholes that was vertically delineated the soils right up against the tanks should have been undisturbed.

Please let me know if you require any additional information or need anything else.

Thank you,

Brittany Hall • Environmental Specialist
Environmental Bureau Projects Group
EMNRD - Oil Conservation Division
1000 Rio Brazos Road | Aztec, NM 87110
505.517.5333 | Brittany.Hall@emnrn.nm.gov
<http://www.emnrn.nm.gov/ocd/>

Effective 12/1/2024: OCD has updated guidance on karst potential occurrence zones. This notice can be found at: <https://www.emnrn.nm.gov/ocd/ocd-announcements-and-notifications/> under "2024 OCD ANNOUNCEMENTS AND NOTIFICATIONS".

The Digital C-141 guidance documents can be found at <https://www.emnrn.nm.gov/ocd/ocd-announcements-and-notifications/> or <https://www.emnrn.nm.gov/ocd/ocd-forms/>.

From: Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

Sent: Friday, January 24, 2025 1:06 PM

To: Hall, Brittany, EMNRD <Brittany.Hall@emnrn.nm.gov>

Subject: [EXTERNAL] nAPP2415825281 Ogden State 5A - Backfilling and Sampling Confirmation

CAUTION: This email originated outside of our organization. Exercise caution prior to clicking on links or opening attachments.

Hello Brittany,

We completed the remediation at Ogden State 5a, except for the 5-foot buffer zone around the storage tanks and separator per the engineer's memorandum. All 200 sq ft composite confirmation samples show the contamination is removed to the most stringent criteria.

Murchison wanted me to double check if we should be backfilling all the areas. As we are backfilling it now, I'd like to confirm if we are clear to backfill the new 1-foot excavation west of the containment (i.e., BS-50 to BS-58). Could you let me know if grab samples at depth are required, or if composite samples from the 1-foot excavation will be sufficient? That way we can either backfill it or leave it open and have test pit grab samples at depth.

I am attaching two sample maps and a data table for your reference. Apologies for any confusion in the map because of different depths and sample clutter, I may edit it for the final submittal.

Thank you,

Dimitry Nikanorov

Project Manager

McNabb Partners

c: (917) 497-6890

A red stylized signature logo consisting of the letters 'MP' in a bold, cursive-like font.



RE: [EXTERNAL] Ogden State 5A nAPP2415825281 - Civil Engineer Memorandum and Geophysical/Karst Review

From Hall, Brittany, EMNRD <Brittany.Hall@emnrd.nm.gov>

Date Fri 1/3/2025 1:12 PM

To Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

Cc Smith, Cory, EMNRD <cory.smith@emnrd.nm.gov>; Romero, Rosa, EMNRD <RosaM.Romero@emnrd.nm.gov>; Bratcher, Michael, EMNRD <mike.bratcher@emnrd.nm.gov>; Powell, Brandon, EMNRD <Brandon.Powell@emnrd.nm.gov>; Cindy Cottrell <ccottrell@jdmii.com>; Greg Boans <gboans@jdmii.com>

Dimitry,

The Ogden State 5A Excavation Memorandum authored by Pettigrew & Associates PA and the MCNP-001-20241126 Murchison Ogden State 5A Release Karst Report indicate that the soils of the Ogden State #005A (30-015-37264) can readily dissolve and/or erode due to water flow. Due to this, OCD will not change the Table I closure criteria from the most stringent (depth to groundwater is less than 50 feet) to the least stringent closure criteria (depth to groundwater is greater than 100 feet). The release must be remediated to the most stringent closure criteria (100 mg/kg TPH, 600 mg/kg chloride, 50 mg/kg BTEX, and 10 mg/kg benzene).

OCD will consider approving a deferral for all contamination within five (5) feet of the tanks/load bearing structures. Prior to requesting a deferral, the following conditions must be met:

- o The liner within the containment of the battery must be fully repaired. No holes, tears, or weakened spots can be present.
- o OCD is requiring photos, including a tape measurement, of all areas that are requested for deferral to be included in the next submittal. Photos must clearly show how close the breaches in the liner were/are located to the tanks.
- o OCD will not allow deferrals for areas within the recommended 3 feet buffer of any pipeline that can be taken out of service to perform remediation activities, this includes surface pipelines. Photos, including a tape measurement, of all areas located within 3 feet of pipelines that can be taken out of service during remediation activities must be included. The photos must include before remediation and after remediation.
- o Include how far each point that is requested for deferral is located from tanks, lines, and other load bearing equipment. For example, CS-01 is located how many feet away from the tanks/pipelines/other structures?
- o Any potential buyer of the site must be made aware of contamination that will be deferred until plugging and abandonment of the well or decommissioning of the battery, whichever comes first. The potential buyer must agree to take the liability if a change of ownership is to occur. Proof that any potential buyer has been made aware of and their acceptance of liability must be included in the next submittal.
- o All the abovementioned conditions must be met prior to submission and documented in the next submittal.

All attachments included in this email must be included in the next submittal. PDF attachments included in this email are:

- o Civil Engineer Lab Report Summary
- o Ogden State 5A Excavation Recommendations
- o Soil Sample Location Summary

- o MCNP-001-20241126 Murchison Ogden State 5A Release Karst Report
- o Ogden State 5A – Depth to Ground Water Memo

Please do not hesitate to contact me if you have any questions or require additional information. Include a copy of this correspondence in the next submittal.

Thank you,

Brittany Hall • Environmental Specialist
Environmental Bureau Projects Group
EMNRD - Oil Conservation Division
1000 Rio Brazos Road | Aztec, NM 87110
505.517.5333 | Brittany.Hall@emnrd.nm.gov
<http://www.emnrd.nm.gov/ocd/>

Effective 12/1/2024: OCD has updated guidance on karst potential occurrence zones. This notice can be found at: <https://www.emnrd.nm.gov/ocd/ocd-announcements-and-notifications/> under “2024 OCD ANNOUNCEMENTS AND NOTIFICATIONS”.

The Digital C-141 guidance documents can be found at <https://www.emnrd.nm.gov/ocd/ocd-announcements-and-notifications/> or <https://www.emnrd.nm.gov/ocd/ocd-forms/>.

From: Dmitry Nikanorov <Dimitry@mcnabbpartners.com>

Sent: Tuesday, December 31, 2024 8:19 AM

To: Hall, Brittany, EMNRD <Brittany.Hall@emnrd.nm.gov>

Subject: [EXTERNAL] Ogden State 5A nAPP2415825281 - Civil Engineer Memorandum and Geophysical/Karst Review

CAUTION: This email originated outside of our organization. Exercise caution prior to clicking on links or opening attachments.

Hi Brittany,

On behalf of Murchison Oil & Gas, I am forwarding you the various documents related to this incident. Could you please have them added on NMOCD file?

Please see the attached documents with a stamped civil engineer report prepared by Pettigrew & Associates, and a geophysical/Karst report prepared by Southwest Geophysical Consulting. Also, lab reports and a map of soil sample locations collected by Pettigrew & Associates field techs are attached as well.

We have an information of a borehole completed approximately 900 ft west of the release, extending to 105 ft down with no groundwater encountered at any point. The lithology log is attached. That information was provided to me by Murchison from the previous consultant they have had.

Based on that information and no Karst features present, can we have a closure criteria for this incident changed to the least stringent?

Following your approval, we will start remediation of contaminants to the least stringent criteria within the tank battery following the civil engineer recommendation, in the shortest time possible.

Thank you,

Dimitry Nikanorov

Project Manager

McNabb Partners

c: (917) 497-6890





RE: [EXTERNAL] nAPP2415825281 - Sampling notification variance

From Hall, Brittany, EMNRD <Brittany.Hall@emnrd.nm.gov>

Date Tue 1/21/2025 12:00 PM

To Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

Cc Cindy Cottrell <ccottrell@jdmii.com>

Dimitry,

The C-141N (application ID: 42277) states that samples will be collected tomorrow (Tuesday, January 22, 2025). If this is accurate, the variance from 19.15.29 D. (1)(a) NMAC, which states “The responsible party must verbally notify the appropriate division district office two business days prior to conducting final sampling. If the division district office does not respond to the notice within the two business days, the responsible party may proceed with final sampling. The responsible party may request a variance from this requirement upon a showing of good cause as determined by the division.”, is approved.

Please be advised that ALL future variance requests must comply with 19.15.29.14 A. (1 and 2) NMAC which states “A responsible party may file a written request for a variance from any requirement of 19.15.29 NMAC with the appropriate division district office. The variance request must include: **(1)** a detailed statement explaining the need for a variance; and **(2)** a detailed written demonstration that the variance will provide equal or better protection of fresh water, public health and the environment.”

If sampling is to occur on Thursday at 8AM as your email states, please resubmit a corrected C-141N and a variance request complaint with 19.15.29.14 A. (1 and 2) NMAC.

Please include a copy of this email correspondence with the next submittal.

Thank you,

Brittany Hall • Environmental Specialist
Environmental Bureau Projects Group
EMNRD - Oil Conservation Division
1000 Rio Brazos Road | Aztec, NM 87110
505.517.5333 | Brittany.Hall@emnrd.nm.gov
<http://www.emnrd.nm.gov/ocd/>

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The Digital C-141 guidance documents can be found at <https://www.emnrd.nm.gov/ocd/ocd-announcements-and-notifications/> or <https://www.emnrd.nm.gov/ocd/ocd-forms/>.

From: Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

Sent: Tuesday, January 21, 2025 11:11 AM

To: Hall, Brittany, EMNRD <Brittany.Hall@emnrd.nm.gov>

Subject: [EXTERNAL] nAPP2415825281 - Sampling notification variance

CAUTION: This email originated outside of our organization. Exercise caution prior to clicking on links or opening attachments.

Hello Brittany,

I have just submitted a notification for the final sampling event on Ogden State 5A for this Thursday on 08:00am. Since that is earlier than 48 hours from now, I would like to request a variance. Please let me know if that is acceptable, I will let the SLO know as well.

Thank you,

Dimitry Nikanorov

Project Manager

McNabb Partners

c: (917) 497-6890





Ogden 5A Remediation Plan Approval

From Cindy Cottrell <ccottrell@jdmii.com>

Date Mon 10/7/2024 2:52 PM

To Dimitry Nikanorov <Dimitry@mcnabbpartners.com>; Greg Boans <gboans@jdmii.com>; Rusty Cooper <rcooper@jdmii.com>; Luke Pumphrey <lpumphrey@jdmii.com>

Cc Daniel Dominguez <ddominguez@hungry-horse.com>; Brad Grandstaff <bgrandstaff@3ROperating.com>

Ogden 5A Remediation Plan approved by OCD. Sending this to SLO and will forward their approval when we receive it.

From: OCDOnline@state.nm.us <OCDOnline@state.nm.us>

Sent: Monday, October 7, 2024 3:46 PM

To: Cindy Cottrell <ccottrell@jdmii.com>

Subject: The Oil Conservation Division (OCD) has approved the application, Application ID: 387344

To whom it may concern (c/o Cindy Cottrell for Murchison Oil and Gas, LLC),

The OCD has approved the submitted *Application for administrative approval of a release notification and corrective action* (C-141), for incident ID (n#) nAPP2415825281, with the following conditions:

- **Remediation plan conditionally approved.**
- **Excavation closure/final samples must meet the most stringent closure criteria (600 mg/kg chloride, 100 mg/kg TPH, 50 mg/kg BTEX, and 10 mg/kg benzene). The horizontal and vertical extents must be extended past the proposed remediation extents (horizontally and vertically) until the most stringent closure criteria are met.**
- **OCD assumes that H-3 (0.5') (H244989-10), H-3 (2') (H244989-11), and H-3 (4') (H244989-12) are mislabeled on the map and should read "H-4 (0.5') (H244989-10), H-4 (2') (H244989-11), and H-4 (4') (H244989-12)". If this is incorrect and H-4 (0.5') (H244989-10), H-4 (2') (H244989-11), and H-4 (4') (H244989-12) were not included on the map, the contamination at H-4 (0.5') (H244989-10) must be addressed during remediation activities.**
- **Be advised that OCD will not approved a "closure/deferral report" as specified in the report. A remediation closure request will not be approved if any contamination is left in place. A deferral will not be approved if the contamination is not fully delineated. Please review the Digital C-141 submission Dec 1, 2023 Guidance document posted on the EMRND Website prior to submitting any C-141s. The guidance documents can be found at <https://www.emnrd.nm.gov/ocd/ocd-announcements-and-notifications/> or <https://www.emnrd.nm.gov/ocd/ocd-forms/>.**
- **Base and side wall confirmation samples must collected as five (5) point composite samples representative an area not larger than 200 square feet.**
- **Sampling Notification pursuant to 19.15.29.12.D.(1).(a) NMAC must be completed prior to the collection of confirmation/final sampling.**
- **Additional liner removal may be warranted if the extent of the contamination under the liner cannot be visualized/delineated.**

- **Include waste manifests in the next report.**
- **Submit a complete and accurate report through the OCD Permitting website by 12/7/2024.**

The signed C-141 can be found in the OCD Online: Imaging under the incident ID (n#).

If you have any questions regarding this application, please contact me.

Thank you,
Brittany Hall
Projects Environmental Specialist - A
505-517-5333
Brittany.Hall@emnrd.nm.gov

New Mexico Energy, Minerals and Natural Resources Department
1220 South St. Francis Drive
Santa Fe, NM 87505



RE: (Approved Remediation Plan) Murchison - Ogden 5A (nAPP2415825281) 3/12/2016 - Approved with Conditions

From Knight, Tami C. <tknight@nmslo.gov>
Date Mon 10/7/2024 3:48 PM
To Cindy Cottrell <ccottrell@jdmii.com>
Cc Greg Boans <gboans@jdmii.com>; Daniel Dominguez <ddominguez@hungry-horse.com>; 'Hall, Brittany, EMNRD' <Brittany.Hall@emnrn.nm.gov>; Bisbey-Kuehn, Elizabeth A. <ebisbeykuehn@nmslo.gov>; Griffin, Becky R. <bgriffin@nmslo.gov>; David, Deon W. <ddavid@nmslo.gov>; Dimitry Nikanorov <Dimitry@mcnabbpartners.com>

Cindy

Documentation of proposed remediation for the subject incident was received from your office on October 3, 2024. The NMSLO Environmental Compliance Office (ECO) has reviewed the plan, and based on the information provided in the document received from your office, ECO has approved the remediation plan with the following conditions:

1. NMOCD supports NMOCD's conditions of approval.
2. For all workplans and reports an applicability statement for compliance with the Cultural Properties Protection Rule is required and a statement for working in a biologically sensitive area. Should remediation extend into areas previously undisturbed, compliance with the CPP Rule is required. Please continue to mention that biological survey was completed with no findings as the project progresses. We need to see that all aspects of working on State Trust Land are considered each step of the way.

Please confirm that you understand and agree to the conditions of approval. Submit the remediation plan to eco@nmslo.gov.

Lessee and/or their contractor are responsible for ensuring the project manager and field personnel performing the work follow the approved work plan.



Environmental Compliance Office
Surface Resources Division
eco@nmslo.gov
nmstatelands.org

.....



CONFIDENTIALITY NOTICE - This e-mail transmission, including all documents, files, or previous e-mail messages attached hereto, may contain confidential and/or legally privileged information. If you are not the intended recipient, or a person responsible for delivering it to the intended recipient, you are hereby notified that you must

not read this transmission and that any disclosure, copying, printing, distribution, or use of any of the information contained in and/or attached to this transmission is STRICTLY PROHIBITED. If you have received this transmission in error, please immediately notify the sender and delete the original transmission and its attachments without reading or saving in any manner. Thank you.

From: Cindy Cottrell <ccottrell@jdmii.com>
Sent: Monday, October 7, 2024 2:57 PM
To: SLO Spills <spills@nmslo.gov>
Cc: Knight, Tami C. <tknight@nmslo.gov>; Greg Boans <gboans@jdmii.com>; Daniel Dominguez <ddominguez@hungry-horse.com>
Subject: [EXTERNAL] (Approved Remediation Plan) Murchison - Ogden 5A (nAPP2415825281) 3/12/2016

Hello,

The OCD has approved the referenced remediation plan. We will await your approval of the plan before proceeding.

Thank you,

Cindy

From: OCDOnline@state.nm.us <OCDOnline@state.nm.us>
Sent: Monday, October 7, 2024 3:46 PM
To: Cindy Cottrell <ccottrell@jdmii.com>
Subject: The Oil Conservation Division (OCD) has approved the application, Application ID: 387344

To whom it may concern (c/o Cindy Cottrell for Murchison Oil and Gas, LLC),

The OCD has approved the submitted *Application for administrative approval of a release notification and corrective action* (C-141), for incident ID (n#) nAPP2415825281, with the following conditions:

- **Remediation plan conditionally approved.**
- **Excavation closure/final samples must meet the most stringent closure criteria (600 mg/kg chloride, 100 mg/kg TPH, 50 mg/kg BTEX, and 10 mg/kg benzene). The horizontal and vertical extents must be extended past the proposed remediation extents (horizontally and vertically) until the most stringent closure criteria are met.**
- **OCD assumes that H-3 (0.5') (H244989-10), H-3 (2') (H244989-11), and H-3 (4') (H244989-12) are mislabeled on the map and should read "H-4 (0.5') (H244989-10), H-4 (2') (H244989-11), and H-4 (4') (H244989-12)". If this is incorrect and H-4 (0.5') (H244989-10), H-4 (2') (H244989-11), and H-4 (4') (H244989-12) were not included on the map, the contamination at H-4 (0.5') (H244989-10) must be addressed during remediation activities.**
- **Be advised that OCD will not approved a "closure/deferral report" as specified in the report. A remediation closure request will not be approved if any contamination is left in place. A deferral will not be approved if the contamination is not fully delineated. Please review the Digital C-141 submission Dec 1, 2023 Guidance document posted on the EMRND Website prior to submitting any C-141s. The guidance documents can be found at <https://www.emnrd.nm.gov/ocd/ocd-announcements-and-notifications/> or <https://www.emnrd.nm.gov/ocd/ocd-forms/>.**
- **Base and side wall confirmation samples must collected as five (5) point composite samples representative an area not larger than 200 square feet.**

- **Sampling Notification pursuant to 19.15.29.12.D.(1).(a) NMAC must be completed prior to the collection of confirmation/final sampling.**
- **Additional liner removal may be warranted if the extent of the contamination under the liner cannot be visualized/delineated.**
- **Include waste manifests in the next report.**
- **Submit a complete and accurate report through the OCD Permitting website by 12/7/2024.**

The signed C-141 can be found in the OCD Online: Imaging under the incident ID (n#).

If you have any questions regarding this application, please contact me.

Thank you,
Brittany Hall
Projects Environmental Specialist - A
505-517-5333
Brittany.Hall@emnrd.nm.gov

New Mexico Energy, Minerals and Natural Resources Department
1220 South St. Francis Drive
Santa Fe, NM 87505

Appendix B

Sampling Notifications



McNabb Partners, LLC
Hobbs • Carlsbad • Midland

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

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

QUESTIONS

Action 420764

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 420764
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Remediation Plan Approved
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
Site Name	Ogden State #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Sampling Event General Information	
<i>Please answer all the questions in this group.</i>	
What is the sampling surface area in square feet	5,000
What is the estimated number of samples that will be gathered	25
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	01/17/2025
Time sampling will commence	09:00 AM
Please provide any information necessary for observers to contact samplers	Please contact Dmitry 917-497-6890 or dimitry@mcnabbpartners.com
Please provide any information necessary for navigation to sampling site	GPS coordinates of the tank battery: 32.153928, -104.260996

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

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

CONDITIONS

Action 420764

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 420764
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

CONDITIONS

Created By	Condition	Condition Date
dnikanorov24	Failure to notify the OCD of sampling events including any changes in date/time per the requirements of 19.15.29.12.D.(1).(a) NMAC, may result in the remediation closure samples not being accepted.	1/15/2025

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

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

QUESTIONS

Action 422777

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 422777
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Remediation Plan Approved
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
Site Name	Ogden State #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Sampling Event General Information	
<i>Please answer all the questions in this group.</i>	
What is the sampling surface area in square feet	2,200
What is the estimated number of samples that will be gathered	11
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	01/22/2025
Time sampling will commence	08:00 AM
 <i>Warning: Notification can not be less than two business days prior to conducting final sampling.</i>	
Please provide any information necessary for observers to contact samplers	Please contact Dmitry 917-497-6890 or dimitry@mcnabbpartners.com
Please provide any information necessary for navigation to sampling site	GPS coordinates of the tank battery: 32.153928, -104.260996

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

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

CONDITIONS

Action 422777

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 422777
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

CONDITIONS

Created By	Condition	Condition Date
dnikanorov24	Failure to notify the OCD of sampling events including any changes in date/time per the requirements of 19.15.29.12.D.(1).(a) NMAC, may result in the remediation closure samples not being accepted.	1/21/2025

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720

District II
 811 S. First St., Artesia, NM 88210
 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

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

QUESTIONS

Action 393880

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 393880
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Remediation Plan Approved
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
Site Name	Ogden State #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Sampling Event General Information	
<i>Please answer all the questions in this group.</i>	
What is the sampling surface area in square feet	4,159
What is the estimated number of samples that will be gathered	21
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	10/23/2024
Time sampling will commence	08:00 AM
Please provide any information necessary for observers to contact samplers	Confirmation sampling in the 1 ft excavation area west of the tank battery. Please contact dimitry@mcnabbpartners or at 917-497-6890 with any questions
Please provide any information necessary for navigation to sampling site	GPS coordinates: 32.153993, -104.260854

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720

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 811 S. First St., Artesia, NM 88210
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District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

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

CONDITIONS
 Action 393880

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 393880
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

CONDITIONS

Created By	Condition	Condition Date
dnikanorov24	Failure to notify the OCD of sampling events including any changes in date/time per the requirements of 19.15.29.12.D.(1).(a) NMAC, may result in the remediation closure samples not being accepted.	10/18/2024

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720
District II
 811 S. First St., Artesia, NM 88210
 Phone:(575) 748-1283 Fax:(575) 748-9720
District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

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

QUESTIONS

Action 396117

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 396117
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Remediation Plan Approved
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
Site Name	Ogden State #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Sampling Event General Information	
<i>Please answer all the questions in this group.</i>	
What is the sampling surface area in square feet	2,200
What is the estimated number of samples that will be gathered	11
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	10/31/2024
Time sampling will commence	09:00 AM
Please provide any information necessary for observers to contact samplers	Please contact dimitry@mcnabbpartners.com or at 917-497-6890
Please provide any information necessary for navigation to sampling site	GPS coordinates: 32.153798, -104.260698

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720

District II
 811 S. First St., Artesia, NM 88210
 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

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

CONDITIONS
 Action 396117

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 396117
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

CONDITIONS

Created By	Condition	Condition Date
dnikanorov24	Failure to notify the OCD of sampling events including any changes in date/time per the requirements of 19.15.29.12.D.(1).(a) NMAC, may result in the remediation closure samples not being accepted.	10/28/2024

District I
 1625 N. French Dr., Hobbs, NM 88240
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 811 S. First St., Artesia, NM 88210
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District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

QUESTIONS

Action 400772

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 400772
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Remediation Plan Approved
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
Site Name	Ogden State #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Sampling Event General Information	
<i>Please answer all the questions in this group.</i>	
What is the sampling surface area in square feet	200
What is the estimated number of samples that will be gathered	1
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	11/12/2024
Time sampling will commence	09:00 AM
Please provide any information necessary for observers to contact samplers	Please call 917-497-6890 or email dimitry@mcnabbpartners.com
Please provide any information necessary for navigation to sampling site	1 horizontal delineation sample north of the tank battery per NMOCD request. GPS coordinates: 32.154174, -104.260961

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(575) 393-6161 Fax:(575) 393-0720

District II
 811 S. First St., Artesia, NM 88210
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State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 400772

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 400772
	Action Type: [NOTIFY] Notification Of Sampling (C-141N)

CONDITIONS

Created By	Condition	Condition Date
dnikanorov24	Failure to notify the OCD of sampling events including any changes in date/time per the requirements of 19.15.29.12.D.(1).(a) NMAC, may result in the remediation closure samples not being accepted.	11/8/2024

Appendix C

Civil Engineer Evaluation



McNabb Partners, LLC
Hobbs • Carlsbad • Midland



Memorandum

Project Name: Ogden State #5A – Site Remediation
Subject: Civil Excavation Recommendations
Location: Lat: 32° 9'13.40"N Long: 104°15'38.26"W
Date: 12/21/2024

To Whom it may concern,

On December 5, 2024, a representative of Pettigrew & Associates conducted a site visit of the existing facility to visually assess and sample the existing soil at/near the containment area. During the site visit, 5 soil samples were collected from the site at various locations. The collected samples were taken to our Lab for Sieve analysis and Atterberg limits. These results of these tests are summarized on the attached map. The full reports will be available upon request. The observed soils predominantly consisted of Gypsum which contains silty sand with inorganic clays. Larger aggregates were observed in the collected samples but are believed to be broken off of the existing soil shelf. The existing Gypsum can be eroded by concentrated water flow. However, during the visual observation there was not any apparent areas where erosion was visible.

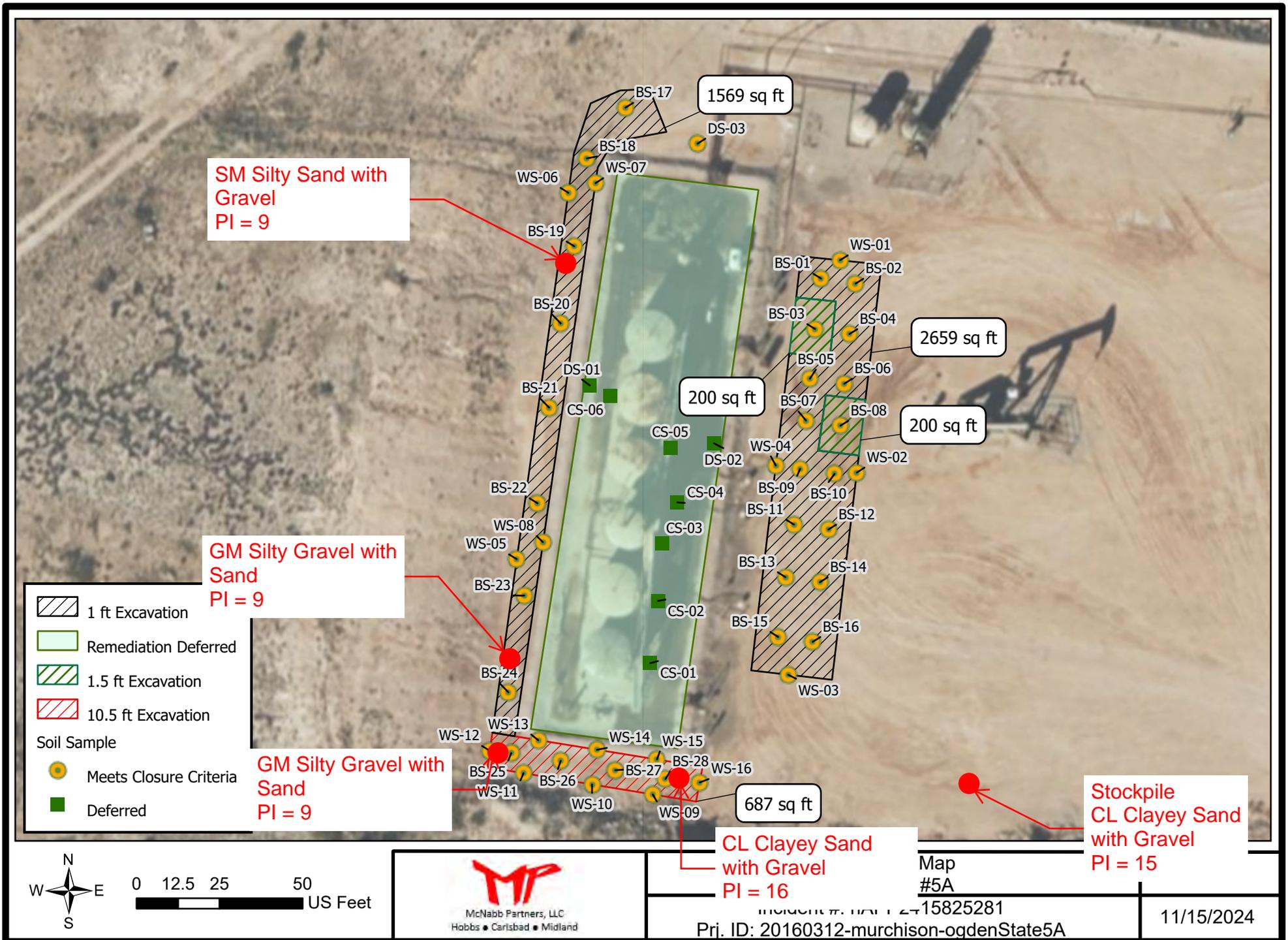
It is understood that a karst survey has been completed for the site and no karst was found to be within the project area. The Karst survey will be provided in conjunction with this letter.

Excavation Recommendations:

- For excavation within the containment area, it is recommended to protect existing structures in place and that no excavation occurs within 5 feet of load bearing structures.
- Existing pipe/conduits shall be protected in place. It may not be feasible to excavate around these areas without compromising the soil stability. Therefore it is recommended that no excavations occur within 3 feet of known underground utilities.
- Temporary excavations deeper than 1' must be sloped at 3H:1V.
- Excavations deeper than 20' will require a site specific plan to be stamped/sealed by an Engineer. Due to space limitations, shoring or benching systems may be required.
- During all earthwork operations, it is recommended to provide erosion control during construction. Due to the erosive nature of the existing Gypsum, significant rain events can have detrimental effects on the soil strength. If a significant rain event occurs during excavation operations, it is recommended to stop work and assess the site to confirm that no areas have been compromised by erosion.

12/27/2024
 David Roybal, PE #23576







LABORATORY TEST REPORT



To: Murchison Oil & Gas LLC
 7250 Dallas Parkway Suite 1400
 Plano, TX 75024

Date of Test: December 11, 2024

Sample Date: December 7, 2024

Project: Ogden State #005A
 Project Number: 2024.1246

Location: S.E. Stockpile

Field Description: #24-277

Sieve Analysis Test:

ASTM C 117 Materials Finer Than 75-µm (No.200) Sieve in Mineral Aggregates by Washing

ASTM C 136 Sieve Analysis of Fine and Coarse Aggregates

<u>Sieve Size</u>	<u>% Passing</u>	<u>Required Limits</u>
75 mm	3"	100
50 mm	2"	96
25 mm	1"	90
19.0 mm	3/4"	88
12.5 mm	1/2"	81
9.5 mm	3/8"	76
4.75 mm	#4	62
2.36 mm	#8	58
2.0 mm	#10	57
425 µm	#40	49
180 µm	#80	41
150 µm	#100	39
75 µm	#200	31.1

Liquid Limit, Plastic Limit and Plasticity Index Test:

ASTM D 4318 Liquid Limit, Plastic Limit and Plasticity Index of Soils

LL Method: A - Multipoint **Liquid Limit (LL):** 36

Preparation Method: Dry **Plastic Limit (PL):** 21

PI Method: Oven Dried **Plasticity Index (PI):** 15

Soil Classification: SC - Clayey Sand w/ Gravel

% Gravel: 38.5

% Sand: 30.4

% Fines 31.1

Copies To: G. Boans
 Dimitry
 C. Cottrell

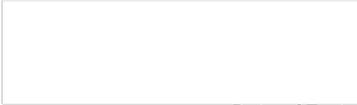
PETTIGREW & ASSOCIATES, P.A.

BY: 

David Roybal NM PE No. 23576



LABORATORY TEST REPORT



To: Murchison Oil & Gas LLC
7250 Dallas Parkway Suite 1400
Plano, TX 75024

Date of Test: December 11, 2024

Sample Date: December 7, 2024

Project: Ogden State #005A
Project Number: 2024.1246

Location: South Trench 10'5"

Field Description: #24-273

Sieve Analysis Test:

ASTM C 117 Materials Finer Than 75-µm (No.200) Sieve
in Mineral Aggregates by Washing

ASTM C 136 Sieve Analysis of Fine and Coarse
Aggregates

Sieve Size	% Passing	Required Limits
75 mm	3"	100
50 mm	2"	100
25 mm	1"	94
19.0 mm	3/4"	91
12.5 mm	1/2"	85
9.5 mm	3/8"	80
4.75 mm	#4	67
2.36 mm	#8	67
2.0 mm	#10	66
425 µm	#40	63
180 µm	#80	59
150 µm	#100	57
75 µm	#200	46.9

Liquid Limit, Plastic Limit and Plasticity Index Test:

ASTM D 4318 Liquid Limit, Plastic Limit and Plasticity Index
of Soils

LL Method: A - Multipoint **Liquid Limit (LL):** 36

Preparation Method: Dry **Plastic Limit (PL):** 20

PI Method: Oven Dried **Plasticity Index (PI):** 16

Soil Classification: SC - Clayey Sand w/ Gravel

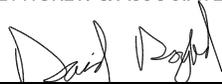
% Gravel: 32.8

% Sand: 20.3

% Fines 46.9

Copies To: G. Boans
Dimitry
C. Cottrell

PETTIGREW & ASSOCIATES, P.A.

BY: 
David Roybal NM PE No. 23576



LABORATORY TEST REPORT



To: Murchison Oil & Gas LLC
 7250 Dallas Parkway Suite 1400
 Plano, TX 75024

Date of Test: December 11, 2024

Sample Date: December 7, 2024

Project: Ogden State #005A
 Project Number: 2024.1246

Location: Middle of West Side 1'5"

Field Description: #24-274

Sieve Analysis Test:

ASTM C 117 Materials Finer Than 75-µm (No.200) Sieve in Mineral Aggregates by Washing

ASTM C 136 Sieve Analysis of Fine and Coarse Aggregates

Sieve Size	% Passing	Required Limits
75 mm	3"	100
50 mm	2"	99
25 mm	1"	88
19.0 mm	3/4"	83
12.5 mm	1/2"	73
9.5 mm	3/8"	66
4.75 mm	#4	51
2.36 mm	#8	46
2.0 mm	#10	45
425 µm	#40	36
180 µm	#80	32
150 µm	#100	31
75 µm	#200	26.4

Liquid Limit, Plastic Limit and Plasticity Index Test:

ASTM D 4318 Liquid Limit, Plastic Limit and Plasticity Index of Soils

LL Method: A - Multipoint **Liquid Limit (LL):** 39

Preparation Method: Dry **Plastic Limit (PL):** 30

PI Method: Oven Dried **Plasticity Index (PI):** 9

Soil Classification: SM - Silty Sand w/ Gravel

% Gravel: 48.9

% Sand: 24.7

% Fines 26.4

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BY: 
 David Roybal NM PE No. 23576



LABORATORY TEST REPORT



To: Murchison Oil & Gas LLC
 7250 Dallas Parkway Suite 1400
 Plano, TX 75024

Date of Test: December 11, 2024

Sample Date: December 7, 2024

Project: Ogden State #005A
 Project Number: 2024.1246

Location: S.W. Middle of West Side 1'5"

Field Description: #24-275

Sieve Analysis Test:

ASTM C 117 Materials Finer Than 75-µm (No.200) Sieve in Mineral Aggregates by Washing

ASTM C 136 Sieve Analysis of Fine and Coarse Aggregates

Sieve Size	% Passing	Required Limits
75 mm	3"	92
50 mm	2"	83
25 mm	1"	69
19.0 mm	3/4"	64
12.5 mm	1/2"	57
9.5 mm	3/8"	52
4.75 mm	#4	41
2.36 mm	#8	38
2.0 mm	#10	37
425 µm	#40	31
180 µm	#80	27
150 µm	#100	26
75 µm	#200	21.8

Liquid Limit, Plastic Limit and Plasticity Index Test:

ASTM D 4318 Liquid Limit, Plastic Limit and Plasticity Index of Soils

LL Method: A - Multipoint **Liquid Limit (LL):** 36

Preparation Method: Dry **Plastic Limit (PL):** 27

PI Method: Oven Dried **Plasticity Index (PI):** 9

Soil Classification: GM - Silty Gravel w/ Sand

% Gravel: 59.1

% Sand: 19.1

% Fines 21.8

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 C. Cottrell

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BY: David Roybal
David Roybal NM PE No. 23576



LABORATORY TEST REPORT



To: Murchison Oil & Gas LLC
 7250 Dallas Parkway Suite 1400
 Plano, TX 75024

Date of Test: December 11, 2024

Sample Date: December 7, 2024

Project: Ogden State #005A
 Project Number: 2024.1246

Location: 10'5" S.W. Corner - South

Field Description: #24-276

Sieve Analysis Test:

ASTM C 117 Materials Finer Than 75-µm (No.200) Sieve
 in Mineral Aggregates by Washing

ASTM C 136 Sieve Analysis of Fine and Coarse
 Aggregates

<u>Sieve Size</u>	<u>% Passing</u>	<u>Required Limits</u>
75 mm	3"	97
50 mm	2"	94
25 mm	1"	85
19.0 mm	3/4"	79
12.5 mm	1/2"	68
9.5 mm	3/8"	60
4.75 mm	#4	42
2.36 mm	#8	36
2.0 mm	#10	35
425 µm	#40	25
180 µm	#80	20
150 µm	#100	20
75 µm	#200	16.1

Liquid Limit, Plastic Limit and Plasticity Index Test:

ASTM D 4318 Liquid Limit, Plastic Limit and Plasticity Index
 of Soils

LL Method: A - Multipoint **Liquid Limit (LL):** 40

Preparation Method: Dry **Plastic Limit (PL):** 31

PI Method: Oven Dried **Plasticity Index (PI):** 15

Soil Classification: GM - Silty Gravel w/ Sand

% Gravel: 58.4

% Sand: 25.5

% Fines 16.1

Copies To: G. Boans
 Dimitry
 C. Cottrell

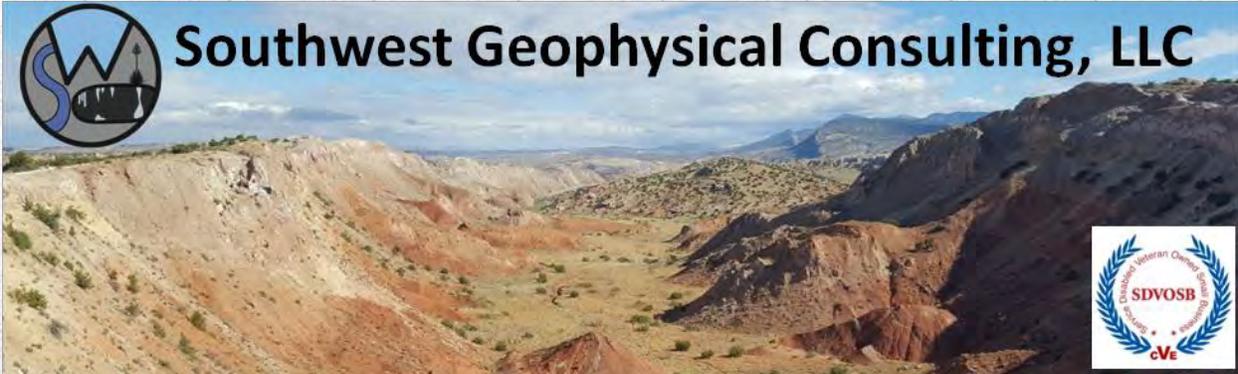
PETTIGREW & ASSOCIATES, P.A.

BY: 
David Roybal NM PE No. 23576

Appendix D

Geophysical and Karst Survey





Environmental Karst Study Report Murchison Ogden State 5A Release Eddy County, New Mexico

**Prepared For:
McNabb Partners LLC
5014 W Carlsbad Hwy
Hobbs, NM 88240**

- Positive within 200 feet of spill delineation boundary**
- Negative within 200 feet of spill delineation boundary**
- Karst Monitor Recommended**

December 24, 2024

MCNP-001-20241126

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Southwest Geophysical Consulting, LLC
5117 Fairfax Dr. NW
Albuquerque, NM 87114
(505) 585-2550
www.swgeophys.com

Prepared by:

Garrett Jorgensen Olague
Senior Field Geologist
garrett@swgeophys.com

Reviewed by:

David Decker, PhD, PG, CPG
CEO, Principal Geologist
dave@swgeophys.com

Prepared for:

McNabb Partners LLC
5014 W Carlsbad Hwy
Hobbs, NM 88240

Greg Boans
(575) 397-0050
gboans@jdmii.com

MMXXIV

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1.0 INTRODUCTION

This report was commissioned by McNabb Partners LLC (hereinafter referred to as "the client"), on November 26, 2024, for the purpose of conducting an environmental karst study within an area encompassing the Murchison Ogden State 5A Release site (hereinafter termed "MO5A") centered at N 32.153907° W 104.260991°

1.1 Goals of this Study

The goals of this study are to conduct a surface karst inventory and provide the client with the location and description of any surface karst features located within 61 meters (200 feet) of the spill delineation boundary as defined by 19.15.29.12 NMAC and to determine whether stable ground exists within the spill boundary of the Murchison Ogden State 5A Release using electrical resistivity imaging as defined by 19.15.2 NMAC Definitions^[1,2].

1.2 Summary of Findings

- **No surface karst features exist within the 200-foot (61-meter) zone surrounding the spill delineation boundary.**
- **No anomalies consistent with air- or water-filled voids were found within the MO5A resistivity survey area, indicating the zone beneath the geophysical survey is not subject to collapse.**
- **Well-layered stratigraphy is interpreted to exist beneath the area where the geophysical survey was conducted indicating stable ground.**

1.3 Affected Environment

The MO5A project site is located in evaporite karst terrain, a landform that is characterized by underground drainage through solutionally enlarged conduits. Evaporite karst terrain may contain sinkholes, sinking streams, caves, and springs. Sinkholes leading to underground drainages and voids are common. These karst features, as well as occasional fissures and discontinuities in the bedrock, provide the primary sources for rapid recharge of the groundwater aquifers of the region. Additionally, karst may develop by hypogene processes involving dissolution by upwelling fluids from depth independent of recharge from the overlying or immediately adjacent surface. Hypogene karst systems may not be connected to the surface and can remain undiscovered unless encountered during drilling or excavation.

Karst features are delicate resources that are often of geological, hydrological, biological, and archeological importance, and should be protected. The four primary concerns in these types of terrain are environmental issues, worker safety, equipment damage, and infrastructure integrity.

The Bureau of Land Management (BLM) categorizes all areas within the Carlsbad Field Office (CFO) zone of responsibility as having either low, medium, high, or critical cave potential based on geology, occurrence of known caves, density of karst features, and potential impacts to freshwater aquifers^[3]. These designations are also recognized by the New Mexico State Land Office (NMSLO). This project occurs within a **HIGH** karst occurrence zone^[4] (**Figure 1**).

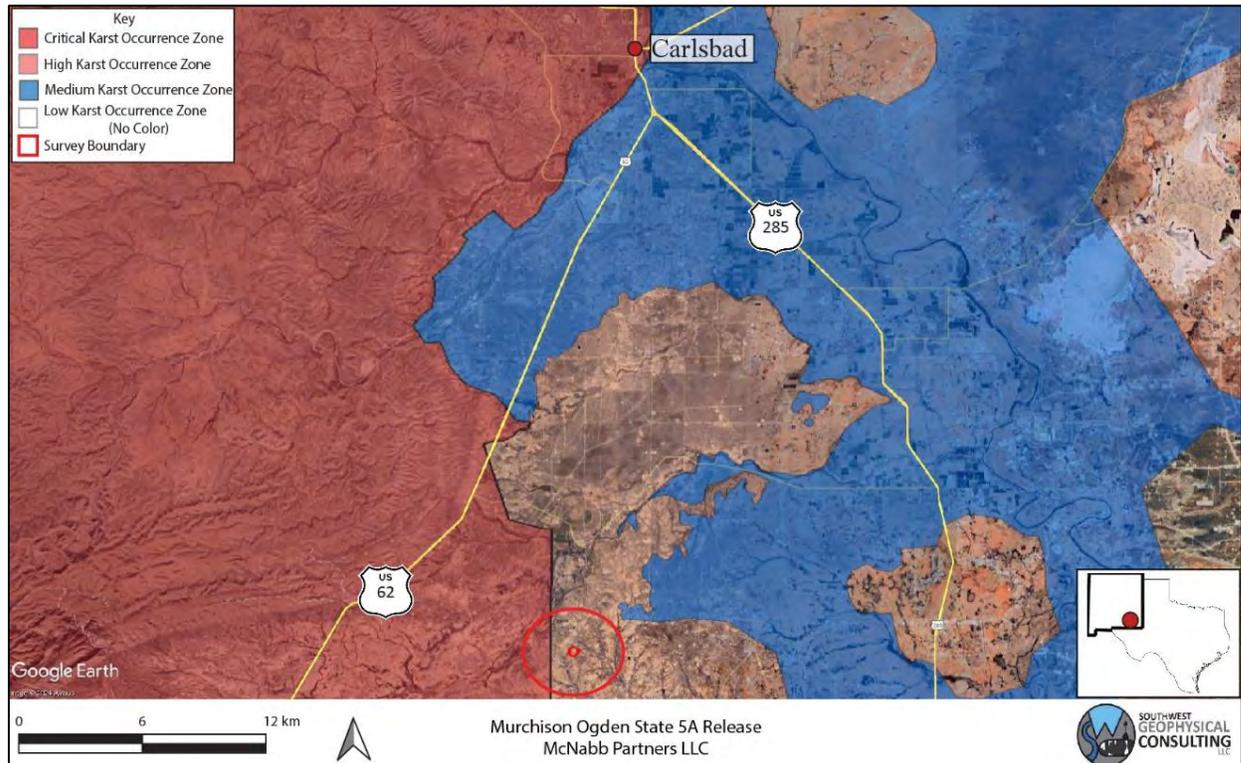


Figure 1: Karst occurrence zone overview. Background image credit: Google Earth. Image date: August 21, 2024. Image datum: WGS-84.

A high karst occurrence zone is defined as an area in known soluble rock types that contains a high frequency of significant caves and karst features such as sinkholes, bedrock fractures that provide rapid recharge of karst aquifers, and springs that provide riparian habitat^[3].

Each location within a CKOZ or HKOZ must be assessed on an individual basis to determine the existence of surface karst features and the possibility of sub-surface karst development.

1.4 Limitations of Report

This report should be read in full. No responsibility is accepted for the use of any part of this report in any other context or for any other purpose or by third parties. This report does not purport to give legal advice. Legal advice can only be given by qualified legal practitioners.

This report has been prepared for the use of McNabb Partners LLC in accordance with generally accepted consulting practices. Every effort has been made to ensure the information in this report is accurate as of the time of its writing. This report has not been prepared for use by parties other than the client, their contracting party, and their respective consulting advisors. It may not contain sufficient information for the purposes of other parties or for other uses.

This report was prepared upon completion of the associated fieldwork using a standard template prepared by Southwest Geophysical Consulting and is based on information collected prior to fieldwork, conditions encountered on site, and data collected during the fieldwork and reviewed at the time of preparation. Southwest Geophysical Consulting disclaims responsibility for any changes that might have occurred at the site after this time. The interpreted results, locations, and depths noted in this report (if applicable) should be taken as an interpretation only and no decision should be based solely on this information. Physical verification of aerial imagery analysis results in the field should be conducted prior to using this information for remediation planning. Physical verification of geophysical results using geotechnical methods should be conducted.

To the best of our knowledge, information contained in this report is accurate at the date of issue. Due to the nature of karst terrain the information in this report shall not be used beyond three years past the date of the field work provided in section **2.3.1 Surface Karst Inventory**. Large weather events can shorten this time period as areas subject to karst development can rapidly form new features subsequent to these events.

2.0 LOCATION AND DESCRIPTION OF STUDY AREA

2.1 Description of Site

The site is located 29.5 kilometers (18.3 miles) south of Carlsbad, New Mexico, south of the Black River, west of John D Forehand Road, and north of Prickly Pear Road. The study area is located within the SE ¼ section of section 2 of NM T25S R26E^[5] (**Figure 1** and **Figure 2**). The region has flat to rolling terrain with karstification occurring in the gypsite soils and underlying gypsum and dolomite bedrock^[6] (see section **2.2 Local Geology Summary** for further information). The climate in this area of southeast New Mexico is semi-arid with an average annual precipitation of approximately 13 inches, of which about two-thirds falls as rain during summer thunderstorms from June to October. Summers are hot and sunny while winters are generally mild, with an average maximum temperature of 96°F in July and an average minimum temperature of 28°F in January^[7]. This area is within the Chihuahuan Desert Thornscrub as defined by the Southwestern Regional ReGAP Vegetation map^[8] and the vegetation consists mostly of areas of blue grama, nine-awned pappus grass, burro grass and low scrub including yucca. The entire survey site is located within a BLM-CFO designated HKOZ^[4] (**Figure 1**), and within NMSLO managed land^[9] (**Figure 2**).

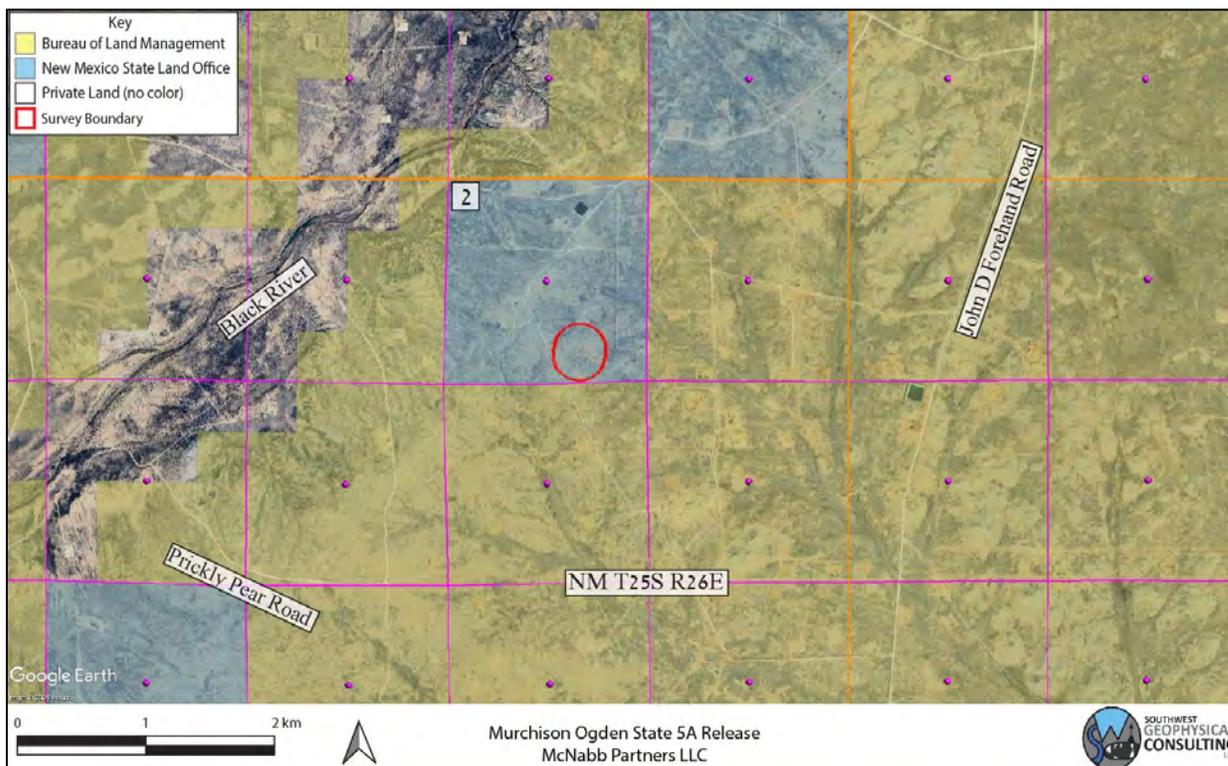


Figure 2: Land ownership and PLSS overview. Background image credit: Google Earth. Image date: January 27, 2023. Image datum: WGS-84.

2.2 Local Geology Summary

The site for the MO5A survey is located at an elevation of 1,029 meters (3,245 feet), \pm 4 meters (13.1 feet), and is located within a region entirely underlain by the Permian Salado (Psl) and Castile (Pc) Formations. The area is mantled by thin gypsiferous soils (gypsite) and Quaternary alluvium (Qal)^[10] up to 5 meters in depth (**Figure 3**).

The Salado Formation (Psl) is a layer of extremely soluble halite which can readily dissolve to create caves, sinkholes, and other karst features; however, due to its extremely soluble nature, only non-soluble silt and sand remain from the dissolution of this layer at the surface^[11].

The Castile Formation is mostly organic-rich calcite interlayered with a white to light grey anhydrite and dolomite, with occasional lenses of halite. Near the surface the Castile is heavily brecciated, allowing meteoric waters to quickly dissolve the anhydrite forming caves and other karst features^[12].

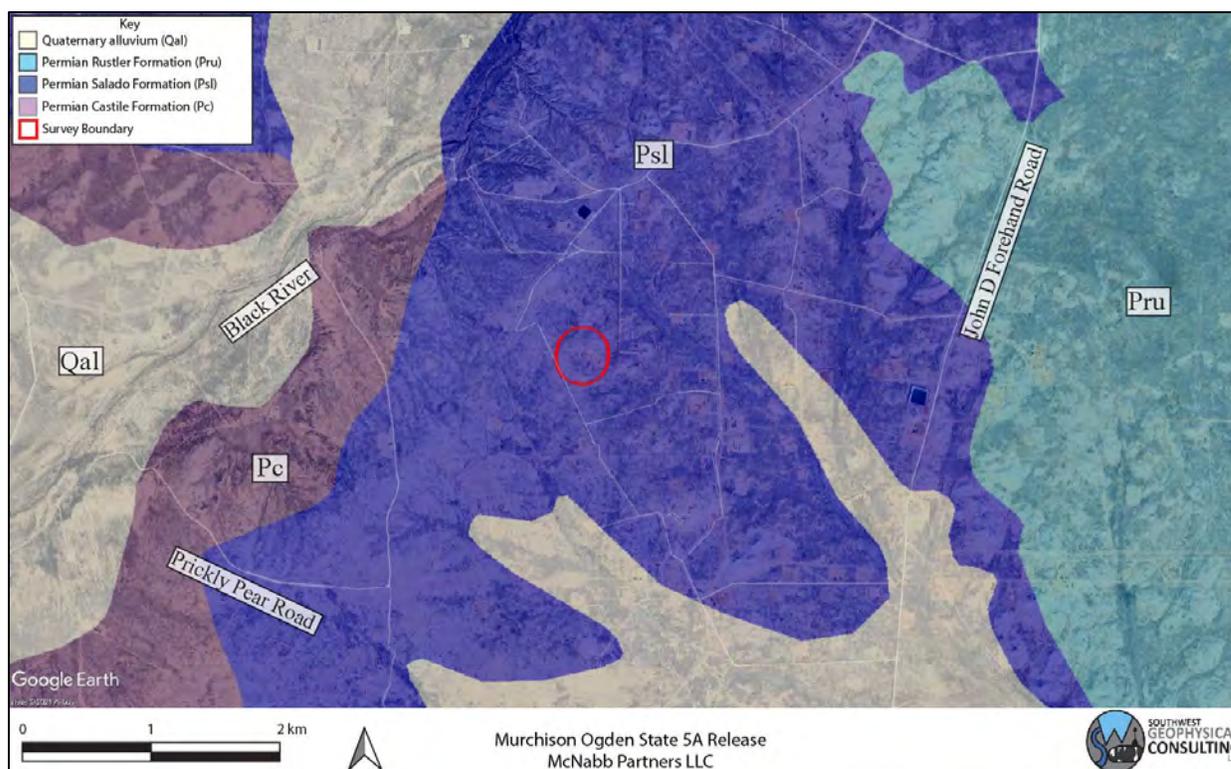


Figure 3: Geology overview. Geology map credit: The Digital Geologic Map of New Mexico in ARC/INFO Format. Background image credit: Google Earth. Image date: January 27, 2023. Image datum: WGS-84.

The survey area is covered by the easily accessible Geologic Map of New Mexico (2003) at 1:500,000 scale^[10] and the Digital Geologic Map of New Mexico in ARC/INFO Format^[13].

2.3 Description of Survey

2.3.1 Surface Karst Inventory

Southwest Geophysical Consulting, in partnership with SWCA Environmental Consultants, provides aerial karst surveys using drones that are flown by qualified, FAA licensed drone pilots and that meet the stringent Bureau of Land Management – Carlsbad Field Office requirements for both pedestrian and aerial karst surveys.

Aerial karst surveys are conducted at low elevation following a preplanned raster pattern flightpath designed for the purpose of generating at least 75% imagery overlap. The collected high-resolution, georeferenced imagery is stitched together to develop orthomosaic imagery which is further developed into a digital elevation model (DEM); the DEM is then processed into a local relief model (LRM) (**Figure 4**). This LRM is color coded to enhance differences in elevation of as little as five centimeters. The orthoimagery, DEM, and LRM are uploaded to a server where they are analyzed by a highly qualified karst geologist. Finally, the data is reviewed by a senior karst geologist for quality assurance and downloaded into a table for inclusion in a written report^[14].

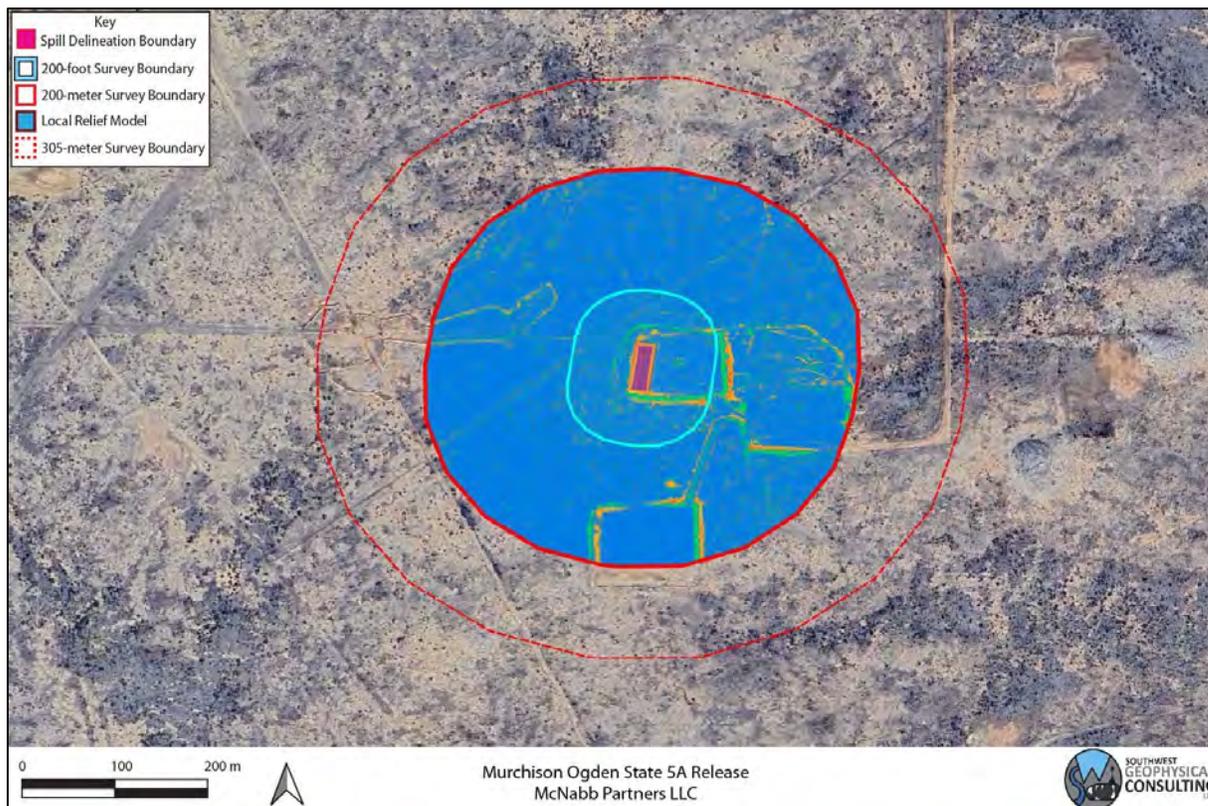


Figure 4: Surface survey overview. Background image credit: Google Earth. Image date: January 27, 2023. Datum: WGS-84.

Resolution of the orthoimagery is clear enough that features as small as 10 centimeters can be positively identified in most circumstances. Occasionally there are ambiguous features identified during an aerial survey that will need to be checked in the field if they are impacted by the proposed remediation efforts. Specifically, it is difficult to tell the difference between solution tubes, abandoned uncased well bores, and some burrows in drone imagery.

The imagery for this study was collected via aerial survey by Pat Lagodney of SWCA and Garrett Jorgensen Olague of Southwest Geophysical Consulting between October 1, 2023, and December 20, 2024. Surface karst features may have developed after these dates and will not be noted in this report. Imagery analysis was completed by Garrett Jorgensen Olague of Southwest Geophysical Consulting on December 23, 2024.

Prior to conducting the aerial karst survey, a surface karst desk study was performed by Southwest Geophysical Consulting within 305 meters (1,000 feet) of the spill delineation boundary. The study was performed using satellite and aerial imagery from Google Earth Pro dated January 27, 2023 (please note features less than one meter in diameter are generally not visible using this method); the Southwest Geophysical Cave and Karst Database dated November 22, 2024^[15]; the Black River Village, NM, 1:24,000 quad, 1979, USGS topographic map; and the latest lidar imagery from CalTopo.com. Please note that we use older topographic maps because newer maps have had caves removed from them. These searches and queries returned no results within the survey boundary.

2.3.2 Geophysical Survey

For this survey, an Advanced Geosciences Inc. (AGI) SuperSting™ Wifi R8 with a multi-electrode switchbox, a 42-electrode array of 40-centimeter-long electrodes, and a tablet controller were used to image the subsurface. This survey consisted of two resistivity lines in a dipole-dipole configuration; MO5A01 is laid out west to east and MO5A02 is laid out south to north. Both lines consisted of 42 electrodes at 5-meter spacing, resulting in 205-meter-long arrays. (**Figure 5**, **Table 1**, and **APPENDIX 8.2**). A preconfigured command file was used to run the data collection (DiDi42). This electrode configuration provided a depth of investigation of 41 meters (135 feet) and a resolution of 2.5 to 3.0 meters (8.2 to 9.8 feet) within the first 5 to 8 meters (16 to 26 feet) from the surface. A Leica GS18 GPS was used to record electrode locations and elevations.

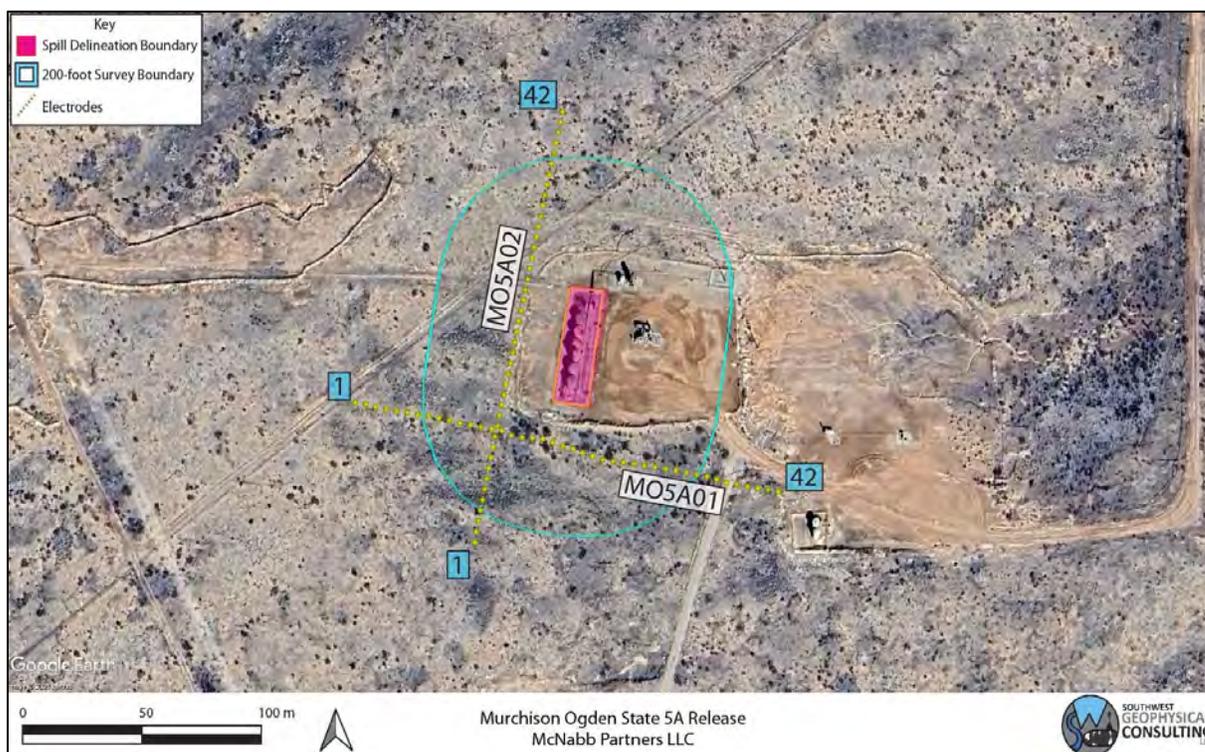


Figure 5: Geophysical survey overview. Two survey lines were conducted with 42 electrodes each at 5-meter spacing (yellow dots denoted with blue numbers). Background image credit: Google Earth. Image date: January 27, 2023. Image datum: WGS-84.

APPENDIX 8.2 provides a detailed list of each electrode number, location in latitude/longitude (decimal degree format), and elevation in meters. EarthImager™ 2D software was used to download and process the data and to provide the model used to make our interpretations (**Table 2**). The design of the survey and the orientation of each of the lines provides the information necessary to make the determination of “stable ground” at this site.

A typical starting model was used for the data processing due to the two-layer model of the geology in the area; specifically, generally high-resistivity gypsum and dolomite at the surface and low-resistivity saturated gypsum and dolomite bedrock at depth. The starting model used was “average apparent resistivity” and a default inversion setting of “surface,” with a minimum apparent resistivity set to 0.1 Ohm-meters (Ohm-m or Ω -m) and a max apparent resistivity set to 100,000 Ω -m (**Table 2**).

All field work, including setup, stow, and travel, was completed by Garrett Jorgensen Olague, Britt Bommer, and Steven Kesler on December 16, 2024.

NOTE: Due to on-going work on the pad, and the proximity of the release to the tank battery, we were limited to the location that we could set up the resistivity array.

3.0 RESULTS

3.1 Surface Karst Survey

The desk study and surface karst survey showed no existing surface karst features within the 200-foot (61-meter)^[2] or 200-meter^[4] karst survey boundaries. No springs exist within the 1,000-foot (305-meter)^[1] survey boundary.

3.2 Geophysical Survey

Electrical resistivity tomography forms images of the subsurface by causing a current to flow through the rock and soil and then measuring the resistance of these materials as the current flows through them. This measurement is taken many times and the resulting data, once processed, is used to produce a model of the subsurface (**Figure 6**). This model is produced using "non-unique" solutions, which means that there are many models and interpretations which will satisfy the data. Using experience and knowledge of the local geology, a high-confidence model can be established and used to develop an accurate understanding of what lies below the surface. This survey was conducted with the express purpose of locating subsurface voids and does not purport to find paleokarst (old, non-active karst features that have been filled in with sand and sediment) or nascent karst features below the resolution limit of the survey.

The results of this study indicate a well-layered geologic system with resistivities between 10.5 and 380 Ohm-m with occasional areas of up to 810 Ohm-m (**Figure 6**). Please keep in mind when viewing the 2D inverted resistivity sections that color maps can be widely different for each view. Always check the color map located on the right side of the image when viewing the 2D images to ensure you understand the range of resistivities presented. Distances along the top and depths along the left side are in meters. The color map along the right side is in Ohm-m. Due to the nature of the survey, shallower zones have higher resolution between electrodes than deeper zones; therefore, small features at depth will not be visible.

One area of higher-than-average resistivity exists under line MO5A02. Areas of lower-than-average resistivity (10.5 to 25.0 Ohm-m) exist both at the surface and at depth within the survey area (**Figure 6**).

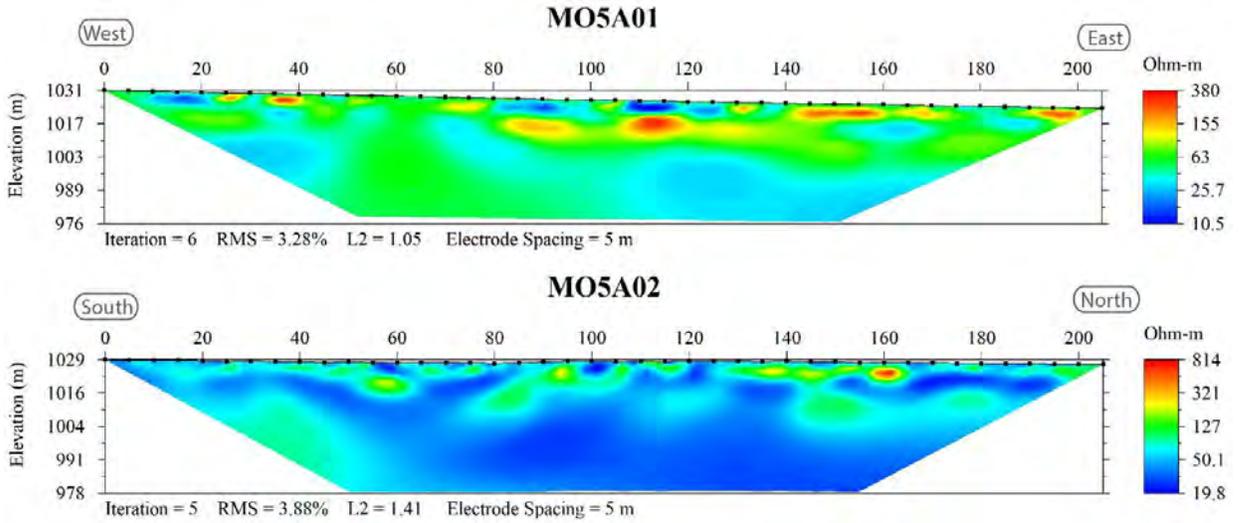


Figure 6: 2D inverted resistivity sections. Reds and oranges indicate higher resistivity values. Yellows and greens are medium resistivity values. Blues are low resistivity values. Please note that the color scale is relative, and that even the highest values in these sections are lower than what is typically seen in the region.

4.0 DISCUSSION

No surface karst features and no anomalies consistent with large (greater than 2-meter diameter) air- or water-filled subsurface voids are found within the MO5A survey area. Small solutionally enlarged voids or fractures at or near the resolution limit of the survey (1.5 – 2.0 meters) may be present. The higher-than-average resistivity area located underneath line MO5A02 is interpreted to be either a more resistant sandstone layer, possibly an old river channel, or a lens of dry halite. Other slightly higher-than-average resistivity areas less than 10 meters beneath the surface are interpreted as dry caliche or gypsite soils. Due to their low resistivity values when compared with significant subsurface voids, these features should not be a concern during remediation efforts. Areas of moderate resistivity (yellows, and greens) near the surface are interpreted as dry caliche soils and gypsum bedrock of the Castile Formation^[16] (**Figure 6** and **Figure 7**).

Low resistivity areas between 5 – 25 Ohm-m may either represent fluid from the brine release, surface to subsurface hydrologic pathways, or a layer of either clays and halite lenses or moist or saturated layers within the Castile Formation. Specifically, the vertical low-resistivity areas on line MO5A02 between electrodes 12 and 27 may represent surface recharge.

Well-layered stratigraphy that is ordered and flat-lying is seen throughout the resistivity sections. No features such as chaotic layering or concave structures are seen within either resistivity line. This indicates that the ground is stable and has not undergone extensive dissolution or karstification.

Please remember that these are interpretations made from knowledge of the local subsurface materials and experience. They remain interpretations until verified by geotechnical methods.

Within karst terrains like the project site, small air- or sediment-filled voids and/or brecciated zones and solutionally enlarged fractures that are below the resolution limit of the survey (2.5 – 3.0 meters) may exist; these may be encountered during excavation, and if so, should be evaluated by a karst specialist prior to continued work. Employing a BLM-CFO approved karst monitor on site during activities in this area should be considered.

No surface karst features are located within 200 feet (61 meters) of the MO5A spill delineation boundary^[2].

No anomalies consistent with air- or water-filled voids were found within the MO5A resistivity survey area, indicating the zone beneath the geophysical survey is not subject to collapse.

Well-layered stratigraphy is interpreted to exist beneath the area of the geophysical survey, indicating stable ground.

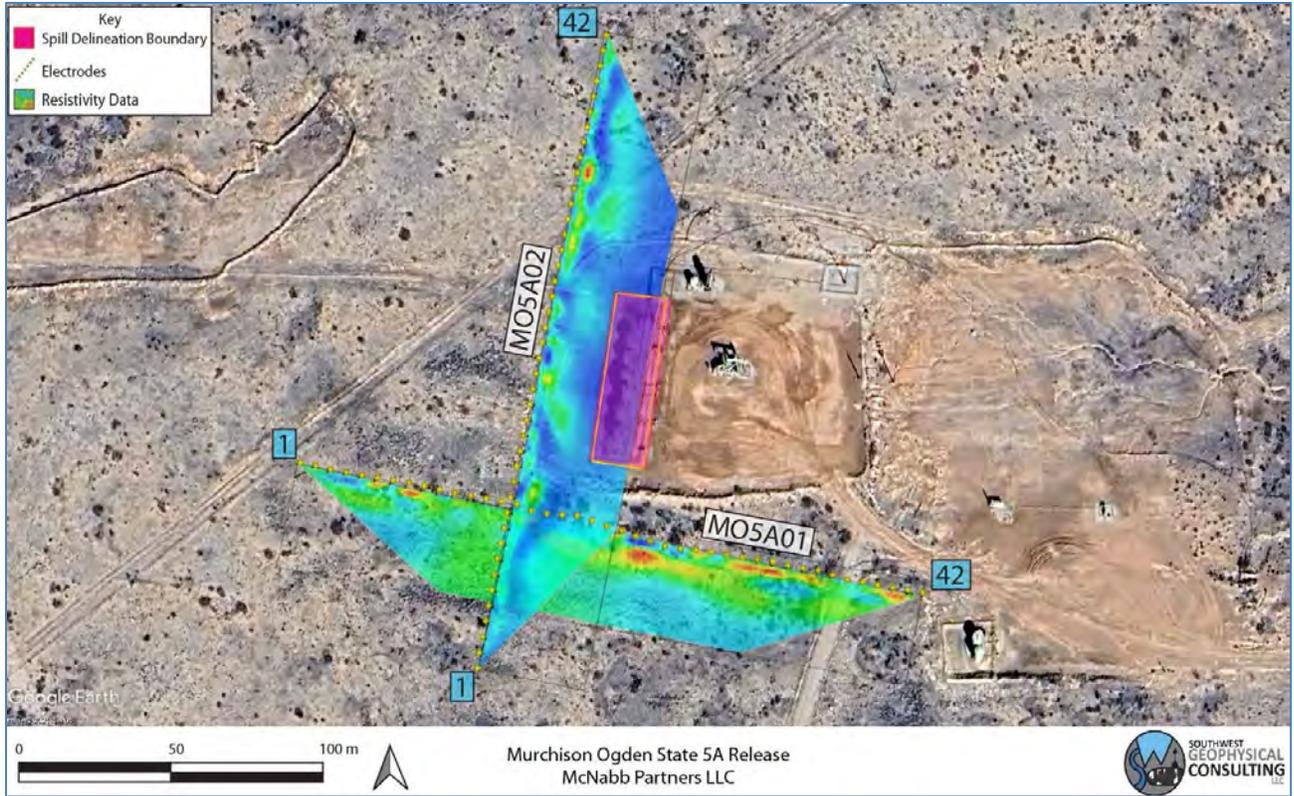


Figure 7: Data overlay. Colored trapezoids are 2D inverted resistivity lines. Background image credit: Google Earth. Image date: January 27, 2023.

5.0 SUMMARY

- **The MO5A survey contains no surface karst features within 200 feet (61 meters) of the spill delineation boundary.**
- **No shallow anomalies interpreted as large voids or related karst features that would present a danger to equipment operators are located within the survey area.**
- Intercepting a void during remediation is unlikely, but still possible. Small voids or solutionally enlarged fractures below the resolution limit of the survey may be encountered.
- **Well-layered stratigraphy is interpreted to exist beneath the area where the geophysical survey was conducted indicating stable ground.**
- When conducting any remediation activities in this area, employing a BLM-CFO approved karst monitor on site should be considered.

6.0 Disclosure Statement

High karst occurrence zones are prone to rapid karst formation and warrants careful planning and engineering to mitigate karst-forming processes that could be accelerated by removal of surface cover or the vibrations associated with heavy equipment used in the remediation process.

Mitigation measures for any karst features revealed during excavation shall be approved by the Bureau of Land Management – Carlsbad Field Office and follow the Natural Resources Conservation Service Conservation Practice Standard for Karst Sinkhole Treatment, Code 527, or the Bureau of Land Management Cave and Karst Management Handbook, H-8380-1.

Vigilance during remediation activities is paramount. If voids are encountered during excavation, contact the Bureau of Land Management Karst Division at (575) 234-5972, the New Mexico State Land Office Surface Resources Division at (505) 827-5768, or a BLM-CFO-approved karst contractor and request an on-site investigation from a karst expert if one is not already on site. A karst consultant can generally be available in Eddy County within five hours.

Approved karst monitors should have karst feature identification training, at least two years of supervised experience identifying karst features, wilderness first aid training, SRT training, confined space training, gas monitor training, and a minimum of SPAR cave rescue training through NCRC. They should have with them the proper gear and be prepared both physically and mentally to enter a collapse feature within minutes to perform a rescue if needed. Monitoring services with qualified karst monitors, as well as cave surveys and geophysical surveys, are available from Southwest Geophysical Consulting.

Under no circumstances should an untrained, inexperienced person enter a cave, pit, sinkhole, or collapse feature. All field employees of Southwest Geophysical Consulting have extensive caving experience and the ability to determine whether entry into a karst feature is safe or presents a hazard. In the event it is necessary to enter a karst feature, Southwest Geophysical Consulting can provide these services on request.

Cave and karst resource inventory reports, karst feature investigations, and geophysical reports commissioned at the request of the land manager should be submitted to:

BLM-CFO: blm_nm_karst@blm.gov

Cave and karst resource inventory reports for the NMSLO should be submitted to the respective project manager.

7.0 REFERENCES

- 1 Decker, D. & Jorgensen, G. L. *Environmental Karst Surveys White Paper* (Southwest Geophysical Consulting, LLC, 2024).
- 2 Division, O. C. *Title 19, Chapter 15, Part 29* (Oil Conservation Division, 2018).
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- 16 Hill, C. A. *Geology of the Delaware Basin, Guadalupe, Apache and Glass Mountains, New Mexico and West Texas*. Vol. 96-39 (Permian Basin Section - SEPM, 1996).

8.0 APPENDICES

8.1 Glossary of Terms

ACEC	Area of Critical Environmental Concern
AGI	Advanced Geosciences Inc.
BLM-CFO	Bureau of Land Management - Carlsbad Field Office
brecciated	Fractured rock caused by faulting or collapse.
caprock-collapse sinkhole	Collapse of roof-spanning rock into a cave or void.
cave	Natural opening at the surface large enough for a person to enter.
cover-collapse sinkhole	Collapse of roof-spanning soil or clay ground cover into a subsurface void.
ERI	Electrical Resistivity Imaging
GPS	Global Positioning System
grike	A solutionally enlarged, vertical, or sub-vertical joint or fracture.
(H)	High confidence modifier for a PKF. This is typically reserved for a feature that is definitely karst but has not been confirmed in the field.
HKOZ	High Karst Occurrence Zone
InSAR	Interferometric Synthetic Aperture Radar. A method by which radar signals from satellites are processed to determine the amount and rate of subsidence of an area as well as whether the area is actively subsiding.
karst	A landscape containing solutional features such as caves, sinkholes, swallets, and springs.
(L)	Low confidence modifier for a PKF. This is typically a feature that cannot be ruled out as karst but is most likely NOT karst related. This modifier may also be used for pseudokarst features.
LED	Locally enclosed depression. A natural depression on the surface that collects rainwater. Some contain swallets and/or caves, others do not.
(M)	Medium confidence modifier for PKF. This is an ambiguous feature that can't be positively identified as karst without a field visit (e.g., burrows, abandoned unlined wells, solution tubes, pseudokarst).
MKOZ	Medium Karst Occurrence Zone
NCRC	National Cave Rescue Commission
NKF	Non-karst feature. Used for features originally identified as PKF that have been subsequently identified in the field as non-karst related. This term may also be used for pseudokarst features.
NMSLO	New Mexico State Land Office
Ohm-m	Ohm-meter, a unit of measurement for resistivity. Sometimes abbreviated Ω -m.

paleokarst	Previously formed karst features that have been filled in by erosion and/or deposition of minerals.
Pat	Permian Artesia Group
Pc	Permian Capitan Formation
Pcs	Permian Castile Formation
Pdl	Permian Dewey Lake Formation
PKF	Possible karst feature. This term is reserved for features identified in satellite or aerial imagery that have NOT been visited in the field. Further modifiers include (H) for high confidence, (M) for medium confidence, and (L) for low confidence. These confidence levels are based on field experience.
PLSS	Public Land Survey System
Pqg	Permian Queen/Greyburg Formation
Pru	Permian Rustler Formation
pseudokarst	Karst-like features (sinkholes, conduits, voids etc.) that are not formed by dissolution. These types of features include soil piping, lava tubes, and some cover-collapse and suffosion sinkholes.
Psl	Permian Salado Formation
Psr	Permian Seven Rivers Formation
Pt	Permian Tansill Formation
Py	Permian Yates Formation
Qal	Quaternary alluvium
Qe	Quaternary eolian deposits
Qp	Quaternary piedmont deposits
Qpl	Quaternary playa lake deposits
RKF	Recognized karst feature. This term is reserved for karst features that have been physically verified in the field.
SKF	Surface Karst Feature
SPAR	Small Party Assisted Rescue
suffosion sinkhole	Raveling of soil into a pre-existing void or fracture.
swallet	A natural opening in the surface, too small for a person, that drains water to an aquifer. Some are "open," meaning a void can be seen below; some are "closed," meaning they are full of sediment.
SWG	Southwest Geophysical Consulting, LLC
UTM	Universal Transverse Mercator (projected coordinates)
(V)	Field verified modifier for a PKF. This indicates that the feature has been visited by a qualified karst professional in the field and fully identified
WGS	World Geodetic System (geographic coordinates)

8.2 Electrode Data

Please see accompanying data files in **MO5A_ERI_Points.xlsx** and **MO5A_ERI_Points.kmz** within file **MCNP-001-20241126_MO5A_Data_Files.kmz** for detailed information on each electrode location.

Table 1: Survey Line Data Table. The .kmz file contains all the points for the survey line listed in the file name. These data are available in the accompanying files **MO5A_ERI_Points.xlsx** and **MCNP-001-20241126_MO5A_Data_Files.kmz**.

File Name:	Completed By:	Date:
MO5A01.kmz	Garrett Jorgensen Olague – Senior Field Geologist Britt Bommer – Field Geologist Steven Kesler – Field Geologist	12/16/2024
MO5A02.kmz		

Raw data files (.stg files for EarthImager™ 2D) and processed data (.trn files, terrain files for surface correction in EarthImager™ 2D and .out files, the processed .stg files) are available upon request.

Table 2: Software Information and Settings

Software Name:	EarthImager™ 2D
Version:	2.4.4.649
Starting Model:	Average Apparent Resistivity
Default Inversion Settings:	Surface
Changes to Default Inversion Settings:	Max Apparent Resistivity = 100 kΩ-m Min Apparent Resistivity = 0.1 Ω-m

9.0 ATTESTATION

David D. Decker, PhD, PG, CPG

Chief Executive Officer, Principal Geologist

Southwest Geophysical Consulting, LLC

5117 Fairfax Dr. NW

Albuquerque, NM 87114

dave@swgeophys.com

(505) 585-2550

CERTIFICATE OF AUTHOR

I, David D. Decker, a Licensed Professional Geologist and a Certified Professional Geologist, do certify that:

- I am currently employed as a consulting geologist in the specialty of caves and karst with an office address of 5117 Fairfax Dr. NW, Albuquerque, NM, USA, 87114.
- I graduated with a Master of Science in Applied Physics with a specialization in Sensor Systems from the Naval Post Graduate School in Monterey, California, in 2003, and a Doctor of Philosophy in Earth and Planetary Sciences from the University of New Mexico, Albuquerque, New Mexico, in 2018.
- I am a Licensed Professional Geologist in the State of Texas, USA (PG-15242) and have been since 2021. I am a Certified Professional Geologist through the American Institute of Professional Geologists (CPG-12123) and have been since 2021.
- I have been employed as a geologist continuously since 2016. I was previously employed as a Fire Controlman, Naval Flight Officer, and Aerospace Engineering Duty Officer in the U.S. Navy and operated, maintained, and installed various sensor systems including magnetic, electromagnetic, radar, communications, and acoustic systems in various capacities from 1986 through 2010.
- I have been involved in various aspects of cave and karst studies continuously since 1985, including exploration, mapping, and scientific studies.
- I have read the definition of “qualified karst professional” set out in the ASTM Standard Practice for Preliminary Karst Terrain Assessment for Site Development (ASTM E-1527). I meet the definition of “qualified professional” for the purposes of this standard.
- I am responsible for the content, compilation, and editing of all sections of report number MCNP-001-20241126 entitled, “Environmental Karst Study Report, Murchison Ogden State 5A Release, Eddy County, New Mexico.” I or a duly authorized and qualified representative of Southwest Geophysical Consulting, LLC, have personally visited this site and/or reviewed the aerial imagery on the date or dates mentioned in section **2.3 Description of Survey**.

- I have no prior involvement nor monetary interest in the described property or project, save for my fee for conducting this investigation and providing the report.

Dated in Albuquerque, New Mexico, December 24, 2024.



David D. Decker
PhD, CPG-12123



Appendix D

Groundwater determination



McNabb Partners, LLC
Hobbs • Carlsbad • Midland

Logger:	Kristin Pope	Client:	Murchison Oil & Gas	Well ID: SB-1 (approx. 20 ft NW of pipeline tee)
Driller:	Ready Drill LLC			
Drilling Method:	CZM EK125 auger	Project Name:		
Start Date:	8/23/2023	Ogden 5A release		
End Date:	8/23/2023	Location:	Eddy County	
moderate and steady rain		32.15434, -104.26397	Sec. 2, T25S, R26E	

Depth (feet BGS)	Description	Time MST	Remarks	Lithology	Completion	Sample ID (chloride mg/kg)	Depth (feet BGS)			
0	Surface	0920	Samples collected from auger bit; all samples were dry		Borehole backfilled with cuttings	Lab Analysis	0			
2	Green-gray silty clay			SB @ 3 ft = 2600		2				
4				4						
6		0923	SB @ 6 ft = 1460	6						
8		Red clay with gray-green silt				8				
10	Red clay with 15% dark gray dolomite	0931		SB @ 10 ft = 544		10				
12						12				
14	Red & gray silt with 15% gray-white gypsum		20 ft - heavy rain delay					14		
16		0948				SB @ 16 ft = 336	16			
18	Red silt with gray & white, vitreous gypsum flakes; 20% dark gray dolomite							SB @ 20 ft = 432	18	
20		0952					20			
22							22			
24							24			
26	Gray-white gypsum/dolomitic layers with tan silt					38 ft - Heavy rain delay; bit change				26
28									28	
30		1028						SB @ 30 ft = 192	30	
32									32	
34				34						
36				36						
38				38						
40				40						
42			1110	SB @ 42.5 ft = 288				42		
44		Gray silt with dark gray-white dolomite								44
46						46				
48						48				
50						50				
52			1135	SB @ 52 ft = 208		52				
54						54				
56				56						
58				58						
60		1200	At 60 ft, calcite or gypsum crystals appear until TD	60						
62				62						
64				64						
66		1221		66						
68				68						
70				70						
72				72						
74		1240		SB @ 73 ft = 352		74				
76	Tan-light gray silt with 40% hard, gray limestone or dolostone layers or lenses		At 79 ft, becomes dusty (finer, less consolidated)					76		
78								78		
80								80		
82								82		
84								84		
86								86		
88								88		
90						1352		SB @ 73 ft = 384	90	
92								92		
94								94		
96				96						
98				98						
100				100						
102				102						
104				104						
TD 105		1447	TD = 105 ft			SB @ 73 ft = 576	TD 105			

R.T. Hicks Consultants, Ltd 901 Rio Grande Blvd NW Suite F-142 Albuquerque, NM 87104	Murchison Oil & Gas	Plate #
	Ogden 5A Release: Soil Boring Log	Sept 2023



3-ft sample: demonstration of plasticity



6-ft sample: appearance of red clay at bottom of auger



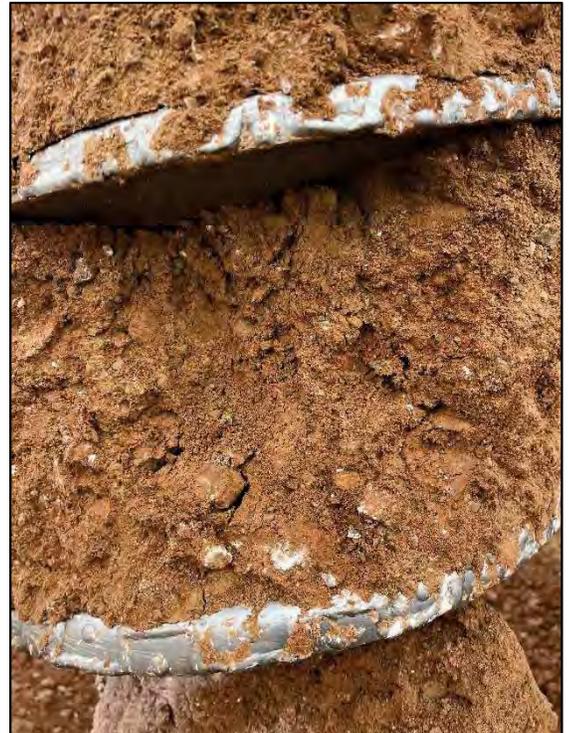
10-ft sample: auger (right), dolomite (bottom)



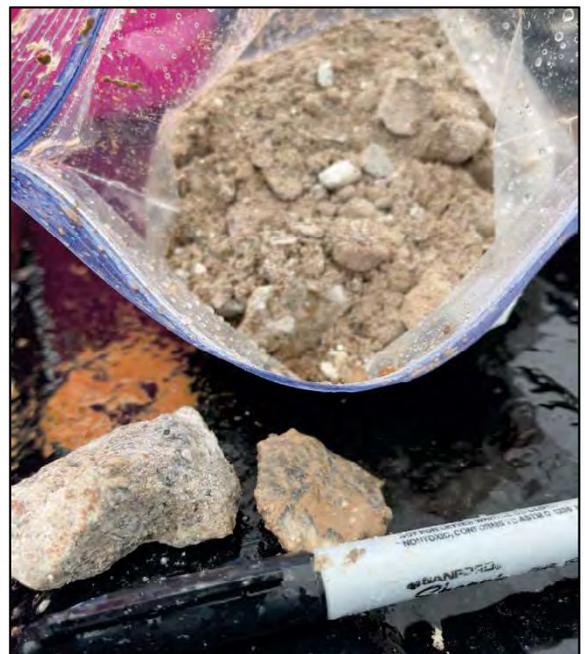


16-ft sample: Silt with gypsum or dolomite

20-ft sample: Auger (left) and vitreous gypsum shown (bottom)



30-ft sample: Dolomite or gypsum with silt





42.5 ft-sample: Silt with dolomite

52-ft sample: hard limestone or dolomite in silt (left),
auger(right)



60-ft sample



73-ft sample: auger (left), silt with limestone or dolomite (above)

90-ft sample: returns have become dusty



Hard dolomite or limestone at 95 ft



Hard dolomite at 99 ft



105-ft sample from TD (above); spin of final TOOH (left)

Appendix E

Chains of Custodies and Laboratory Reports



McNabb Partners, LLC
Hobbs • Carlsbad • Midland



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

January 29, 2025

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 01/28/25 11:31.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene".

Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/28/2025	Sampling Date:	01/28/2025
Reported:	01/29/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: TP - 1 2' (H250487-01)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/28/2025	ND	2.19	109	2.00	4.46		
Toluene*	<0.050	0.050	01/28/2025	ND	2.27	113	2.00	4.56		
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	2.30	115	2.00	5.16		
Total Xylenes*	<0.150	0.150	01/28/2025	ND	6.97	116	6.00	4.84		
Total BTEX	<0.300	0.300	01/28/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 111 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	160	16.0	01/29/2025	ND	432	108	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/28/2025	ND	199	99.3	200	0.889		
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	207	103	200	2.73		
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND						

Surrogate: 1-Chlorooctane 85.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 90.4 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/28/2025	Sampling Date:	01/28/2025
Reported:	01/29/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: TP - 2 2' (H250487-02)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/28/2025	ND	2.19	109	2.00	4.46		
Toluene*	<0.050	0.050	01/28/2025	ND	2.27	113	2.00	4.56		
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	2.30	115	2.00	5.16		
Total Xylenes*	<0.150	0.150	01/28/2025	ND	6.97	116	6.00	4.84		
Total BTEX	<0.300	0.300	01/28/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 111 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	240	16.0	01/29/2025	ND	432	108	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/28/2025	ND	199	99.3	200	0.889		
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	207	103	200	2.73		
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND						

Surrogate: 1-Chlorooctane 86.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 91.2 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/28/2025	Sampling Date:	01/28/2025
Reported:	01/29/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: TP - 3 5' (H250487-03)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/28/2025	ND	2.19	109	2.00	4.46	
Toluene*	<0.050	0.050	01/28/2025	ND	2.27	113	2.00	4.56	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	2.30	115	2.00	5.16	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	6.97	116	6.00	4.84	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 110 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	192	16.0	01/29/2025	ND	432	108	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/28/2025	ND	199	99.3	200	0.889	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	207	103	200	2.73	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 91.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 96.5 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/28/2025	Sampling Date:	01/28/2025
Reported:	01/29/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: TP - 4 4' (H250487-04)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/28/2025	ND	2.19	109	2.00	4.46	
Toluene*	<0.050	0.050	01/28/2025	ND	2.27	113	2.00	4.56	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	2.30	115	2.00	5.16	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	6.97	116	6.00	4.84	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 113 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	304	16.0	01/29/2025	ND	432	108	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/28/2025	ND	199	99.3	200	0.889	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	207	103	200	2.73	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 72.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 77.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/28/2025	Sampling Date:	01/28/2025
Reported:	01/29/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: TP - 5 3' (H250487-05)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/28/2025	ND	2.19	109	2.00	4.46	
Toluene*	<0.050	0.050	01/28/2025	ND	2.27	113	2.00	4.56	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	2.30	115	2.00	5.16	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	6.97	116	6.00	4.84	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 110 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	176	16.0	01/29/2025	ND	432	108	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/29/2025	ND	206	103	200	0.0749	
DRO >C10-C28*	<10.0	10.0	01/29/2025	ND	212	106	200	0.312	
EXT DRO >C28-C36	<10.0	10.0	01/29/2025	ND					

Surrogate: 1-Chlorooctane 109 % 48.2-134

Surrogate: 1-Chlorooctadecane 113 % 49.1-148

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Notes and Definitions

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

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: McHabb Partners Project Manager: Dinitry Nikanorov Address: 5014 W Carlsbad Hwy City: Hobbs Phone #: 917-497-6890 Project #: Project Name: Ogden State 5A Project Location: Eddy County, NM Sampler Name: Auden Escalada, Dinitry Nikanorov		P.O. #: Company: Murchison Attn: Greg Boans Address: On-File City: Fax #: Phone #: Fax #:	
FOR LAB USE ONLY		BILL TO	
Lab I.D. H250487		ANALYSIS REQUEST	
Sample I.D. TP-1 TP-2 TP-3 TP-4 TP-5		(G)RAB OR (C)OMP. # CONTAINERS GROUNDWATER WASTEWATER SOIL OIL SLUDGE OTHER : ACID/BASE: ICE / COOL OTHER :	
DATE TIME		DATE TIME	
TP-1 2' G 1 1/28/25 8:40 X X X TP-2 2' G 1 1/28/25 8:50 X X X TP-3 5' G 1 1/28/25 9:00 X X X TP-4 4' G 1 1/28/25 9:10 X X X TP-5 3' G 1 1/28/25 9:20 X X X		TPH Chloride BTEX	
Relinquished By: [Signature] Date: 1/31/25 Time:		Received By: [Signature] Date: 1/31/25 Time:	
Delivered By: (Circle One) UPS - Bus - Other:		Turnaround Time: 24HR Standard KUSH Bacteria (only) Sample Condition Cool Intact Corrected Temp. °C	
Observed Temp. °C: 41.6 Corrected Temp. °C: 41.0		Verbal Result: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Add'l Phone #: All Results are emailed. Please provide Email address:	
CHECKED BY: [Signature] (Initials)		REMARKS:	

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinalabsnm.com



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

January 23, 2025

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 01/22/25 15:14.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene".

Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 18A 0-2.5' (H250392-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/23/2025	ND	1.95	97.4	2.00	8.42	
Toluene*	<0.050	0.050	01/23/2025	ND	2.00	100	2.00	10.0	
Ethylbenzene*	<0.050	0.050	01/23/2025	ND	2.20	110	2.00	7.19	
Total Xylenes*	<0.150	0.150	01/23/2025	ND	6.71	112	6.00	6.32	
Total BTEX	<0.300	0.300	01/23/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 118 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	208	16.0	01/23/2025	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360	
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54	
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND					

Surrogate: 1-Chlorooctane 83.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 79.1 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 29 0-5.5' (H250392-02)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/23/2025	ND	1.95	97.4	2.00	8.42	
Toluene*	<0.050	0.050	01/23/2025	ND	2.00	100	2.00	10.0	
Ethylbenzene*	<0.050	0.050	01/23/2025	ND	2.20	110	2.00	7.19	
Total Xylenes*	<0.150	0.150	01/23/2025	ND	6.71	112	6.00	6.32	
Total BTEX	<0.300	0.300	01/23/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 124 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	256	16.0	01/23/2025	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360	
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54	
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND					

Surrogate: 1-Chlorooctane 84.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 81.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 29 5.5-10.5' (H250392-03)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64	
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70	
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14	
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04	
Total BTEX	<0.300	0.300	01/22/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.3 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	01/23/2025	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360	
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54	
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND					

Surrogate: 1-Chlorooctane 83.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 82.2 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 31 2.5' (H250392-04)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.1 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	192	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 88.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 86.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 34 2.5' (H250392-05)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.6 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	224	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 83.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 80.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 42 4' (H250392-06)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.6 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	288	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 79.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 78.6 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 44 4' (H250392-07)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.0 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	368	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 80.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 76.8 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 45 4' (H250392-08)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.2 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	304	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 89.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 88.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 46 4' (H250392-09)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.8 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	272	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 81.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 77.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 47 5.5' (H250392-10)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 93.6 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	336	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 80.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 77.5 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 48 10.5' (H250392-11)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.6 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	320	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 87.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 83.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 49 8.5' (H250392-12)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.7 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	240	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 82.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 76.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/22/2025	Sampling Date:	01/22/2025
Reported:	01/23/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 59 10.5' (H250392-13)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/22/2025	ND	1.89	94.7	2.00	3.64		
Toluene*	<0.050	0.050	01/22/2025	ND	2.02	101	2.00	3.70		
Ethylbenzene*	<0.050	0.050	01/22/2025	ND	1.96	98.1	2.00	4.14		
Total Xylenes*	<0.150	0.150	01/22/2025	ND	5.74	95.7	6.00	4.04		
Total BTEX	<0.300	0.300	01/22/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.7 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	256	16.0	01/23/2025	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/23/2025	ND	222	111	200	0.0360		
DRO >C10-C28*	<10.0	10.0	01/23/2025	ND	198	98.8	200	3.54		
EXT DRO >C28-C36	<10.0	10.0	01/23/2025	ND						

Surrogate: 1-Chlorooctane 74.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 72.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

- QM-07 The spike recovery was outside acceptance limits for the MS and/or MSD. The batch was accepted based on acceptable LCS recovery.
- ND Analyte NOT DETECTED at or above the reporting limit
- RPD Relative Percent Difference
- ** Samples not received at proper temperature of 6°C or below.
- *** Insufficient time to reach temperature.
- Chloride by SM4500Cl-B does not require samples be received at or below 6°C
Samples reported on an as received basis (wet) unless otherwise noted on report

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

January 20, 2025

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 01/17/25 15:29.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene".

Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 01 0-2' (H250295-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/17/2025	ND	2.06	103	2.00	6.45	
Toluene*	<0.050	0.050	01/17/2025	ND	2.06	103	2.00	4.39	
Ethylbenzene*	<0.050	0.050	01/17/2025	ND	2.29	114	2.00	1.56	
Total Xylenes*	<0.150	0.150	01/17/2025	ND	7.00	117	6.00	1.57	
Total BTEX	<0.300	0.300	01/17/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 126 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: KV					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	704	16.0	01/20/2025	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22	
DRO >C10-C28*	<10.0	10.0	01/18/2025	ND	202	101	200	5.63	
EXT DRO >C28-C36	<10.0	10.0	01/18/2025	ND					

Surrogate: 1-Chlorooctane 77.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 75.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 02 0-3.5' (H250295-02)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	01/17/2025	ND	2.06	103	2.00	6.45	
Toluene*	<0.050	0.050	01/17/2025	ND	2.06	103	2.00	4.39	
Ethylbenzene*	<0.050	0.050	01/17/2025	ND	2.29	114	2.00	1.56	
Total Xylenes*	<0.150	0.150	01/17/2025	ND	7.00	117	6.00	1.57	
Total BTEX	<0.300	0.300	01/17/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 122 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	768	16.0	01/20/2025	ND	448	112	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22	
DRO >C10-C28*	505	10.0	01/18/2025	ND	202	101	200	5.63	
EXT DRO >C28-C36	232	10.0	01/18/2025	ND					

Surrogate: 1-Chlorooctane 77.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 79.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 03 0-3.5' (H250295-03)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	6.45		
Toluene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	4.39		
Ethylbenzene*	<0.050	0.050	01/18/2025	ND	2.29	114	2.00	1.56		
Total Xylenes*	<0.150	0.150	01/18/2025	ND	7.00	117	6.00	1.57		
Total BTEX	<0.300	0.300	01/18/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 124 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	976	16.0	01/20/2025	ND	448	112	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22		
DRO >C10-C28*	<10.0	10.0	01/18/2025	ND	202	101	200	5.63		
EXT DRO >C28-C36	<10.0	10.0	01/18/2025	ND						

Surrogate: 1-Chlorooctane 75.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 73.4 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 04 0-5' (H250295-04)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	6.45		
Toluene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	4.39		
Ethylbenzene*	<0.050	0.050	01/18/2025	ND	2.29	114	2.00	1.56		
Total Xylenes*	<0.150	0.150	01/18/2025	ND	7.00	117	6.00	1.57		
Total BTEX	<0.300	0.300	01/18/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 126 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	928	16.0	01/20/2025	ND	448	112	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22		
DRO >C10-C28*	204	10.0	01/18/2025	ND	202	101	200	5.63		
EXT DRO >C28-C36	92.3	10.0	01/18/2025	ND						

Surrogate: 1-Chlorooctane 82.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 80.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 05 0-1' (H250295-05)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	6.45		
Toluene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	4.39		
Ethylbenzene*	<0.050	0.050	01/18/2025	ND	2.29	114	2.00	1.56		
Total Xylenes*	<0.150	0.150	01/18/2025	ND	7.00	117	6.00	1.57		
Total BTEX	<0.300	0.300	01/18/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 111 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	1150	16.0	01/20/2025	ND	448	112	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22		
DRO >C10-C28*	810	10.0	01/18/2025	ND	202	101	200	5.63		
EXT DRO >C28-C36	263	10.0	01/18/2025	ND						

Surrogate: 1-Chlorooctane 81.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 88.8 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	01/17/2025	Sampling Date:	01/17/2025
Reported:	01/20/2025	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DSW - 06 0-1' (H250295-06)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	6.45		
Toluene*	<0.050	0.050	01/18/2025	ND	2.06	103	2.00	4.39		
Ethylbenzene*	<0.050	0.050	01/18/2025	ND	2.29	114	2.00	1.56		
Total Xylenes*	<0.150	0.150	01/18/2025	ND	7.00	117	6.00	1.57		
Total BTEX	<0.300	0.300	01/18/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 113 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	2440	16.0	01/20/2025	ND	448	112	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	01/18/2025	ND	198	99.2	200	4.22		
DRO >C10-C28*	1520	10.0	01/18/2025	ND	202	101	200	5.63		
EXT DRO >C28-C36	127	10.0	01/18/2025	ND						

Surrogate: 1-Chlorooctane 81.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 95.5 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

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

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Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

BILL TO

ANALYSIS REQUEST

Company Name: McNabb Partners
 Project Manager: Dmitry Nikanorov
 Address: 5014 W Carlstad Hwy
 City: Hobbs State: NM Zip: 88240
 Phone #: 917-497-6890 Fax #: _____
 Project #: _____ Project Owner: _____
 Project Name: Ogdan State 5A
 Project Location: Eddy County, NM
 Sampler Name: Auden Escalada, Dmitry Nikanorov
 FOR LAB USE ONLY

P.O. #: _____ Company: Murchison
 Attn: Greg Boans
 Address: On-File
 City: _____ Fax #: _____ Zip: _____
 Phone #: _____ Fax #: _____

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
115502905	DSW-01	0-2'	C 1	X						1/17/25	12:30	X	X	X
	DSW-02	0-3.5'	C 1	X						1/17/25	12:35	X	X	X
	DSW-03	0-3.5'	C 1	X						1/17/25	12:40	X	X	X
	DSW-04	0-5'	C 1	X						1/17/25	12:45	X	X	X
	DSW-05	0-1'	C 1	X						1/17/25	12:50	X	X	X
	DSW-06	0-1'	C 1	X						1/17/25	12:55	X	X	X

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Relinquished By: _____ Date: 1/17/25 Received By: _____ Date: 1/17/25
 Type: 1529
 Time: _____

Delivered By: (Circle One) Observed Temp. °C: 13.3 Sample Condition: Cool Intact Yes No
 Corrected Temp. °C: 0.72 Correction Factor: 4.5°C

Sampler - UPS - Bus - Other: _____

Checked By: _____ (Initials)
 Turnaround Time: 24HR Standard Bacteria (only) Sample Condition: Cool Intact Yes No
 Add'l Phone #: _____

REMARKS: _____

Verbal Results: Yes No Add'l Phone #: _____
 All Results are emailed. Please provide Email address: _____

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinallabsnm.com



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

January 22, 2025

DIMITRY NIKANOROV
MC NABB SERVICES
P. O. BOX 5753
HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 01/17/25 15:29.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/ga/lab_accred_certif.html.

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

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

Cardinal Laboratories is accredited through the State of New Mexico Environment Department for:

Method SM 9223-B Total Coliform and E. coli (Colilert MMO-MUG)
Method EPA 524.2 Regulated VOCs and Total Trihalomethanes (TTHM)
Method EPA 552.2 Total Haloacetic Acids (HAA-5)

Accreditation applies to public drinking water matrices for State of Colorado and New Mexico.

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

Sincerely,

Celey D. Keene
Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
---	---	------------------------------

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
BS - 29 2'	H250296-01	Soil	17-Jan-25 09:00	17-Jan-25 15:29
BS - 30 2'	H250296-02	Soil	17-Jan-25 09:05	17-Jan-25 15:29
BS - 31 2'	H250296-03	Soil	17-Jan-25 09:10	17-Jan-25 15:29
BS - 32 2'	H250296-04	Soil	17-Jan-25 09:15	17-Jan-25 15:29
BS - 33 2'	H250296-05	Soil	17-Jan-25 09:20	17-Jan-25 15:29
BS - 34 2'	H250296-06	Soil	17-Jan-25 09:25	17-Jan-25 15:29
BS - 35 2'	H250296-07	Soil	17-Jan-25 09:30	17-Jan-25 15:29
BS - 36 2'	H250296-08	Soil	17-Jan-25 09:35	17-Jan-25 15:29
BS - 37 3.5'	H250296-09	Soil	17-Jan-25 09:40	17-Jan-25 15:29
BS - 38 3.5'	H250296-10	Soil	17-Jan-25 09:45	17-Jan-25 15:29
BS - 39 3.5'	H250296-11	Soil	17-Jan-25 09:45	17-Jan-25 15:29
BS - 40 3.5'	H250296-12	Soil	17-Jan-25 09:50	17-Jan-25 15:29
BS - 41 3.5'	H250296-13	Soil	17-Jan-25 09:55	17-Jan-25 15:29
BS - 42 3.5'	H250296-14	Soil	17-Jan-25 10:00	17-Jan-25 15:29
BS - 43 3.5'	H250296-15	Soil	17-Jan-25 10:05	17-Jan-25 15:29
BS - 44 3.5'	H250296-16	Soil	17-Jan-25 10:10	17-Jan-25 15:29
BS - 45 3.5'	H250296-17	Soil	17-Jan-25 10:15	17-Jan-25 15:29
BS - 46 3.5'	H250296-18	Soil	17-Jan-25 10:20	17-Jan-25 15:29
BS - 47 5'	H250296-19	Soil	17-Jan-25 10:25	17-Jan-25 15:29
BS - 48 10'	H250296-20	Soil	17-Jan-25 10:30	17-Jan-25 15:29
BS - 49 8'	H250296-21	Soil	17-Jan-25 10:35	17-Jan-25 15:29
BS - 50 1'	H250296-22	Soil	17-Jan-25 10:40	17-Jan-25 15:29
BS - 51 1'	H250296-23	Soil	17-Jan-25 10:45	17-Jan-25 15:29
BS - 52 1'	H250296-24	Soil	17-Jan-25 10:50	17-Jan-25 15:29
BS - 53 1'	H250296-25	Soil	17-Jan-25 10:55	17-Jan-25 15:29
BS - 54 1'	H250296-26	Soil	17-Jan-25 11:00	17-Jan-25 15:29
BS - 55 1'	H250296-27	Soil	17-Jan-25 11:05	17-Jan-25 15:29

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 56 1'	H250296-28	Soil	17-Jan-25 11:10	17-Jan-25 15:29
BS - 57 1'	H250296-29	Soil	17-Jan-25 11:15	17-Jan-25 15:29
BS - 58 1'	H250296-30	Soil	17-Jan-25 11:20	17-Jan-25 15:29
WS - 17 0-2'	H250296-31	Soil	17-Jan-25 11:30	17-Jan-25 15:29
WS - 18 0-2'	H250296-32	Soil	17-Jan-25 11:35	17-Jan-25 15:29
WS - 19 0-2'	H250296-33	Soil	17-Jan-25 11:40	17-Jan-25 15:29
WS - 20 0-3.5'	H250296-34	Soil	17-Jan-25 11:45	17-Jan-25 15:29
WS - 21 0-3.5'	H250296-35	Soil	17-Jan-25 11:50	17-Jan-25 15:29
WS - 22 0-3.5'	H250296-36	Soil	17-Jan-25 11:55	17-Jan-25 15:29
WS - 23 0-3.5'	H250296-37	Soil	17-Jan-25 12:00	17-Jan-25 15:29
WS - 24 0-3.5'	H250296-38	Soil	17-Jan-25 12:05	17-Jan-25 15:29
WS - 25 5-10'	H250296-39	Soil	17-Jan-25 12:10	17-Jan-25 15:29
WS - 26 0-10'	H250296-40	Soil	17-Jan-25 12:15	17-Jan-25 15:29
WS - 27 0-10'	H250296-41	Soil	17-Jan-25 12:20	17-Jan-25 15:29
WS - 28 0-10'	H250296-42	Soil	17-Jan-25 12:25	17-Jan-25 15:29

01/22/25 - Client changed the sample depths on -01 through -08 (see COC). This is the revised report and will replace the one sent on 01/20/25.

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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 29 2'
H250296-01 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	384		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-Cl-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011708	JH	18-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			122 %		71.5-134	5011708	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			58.6 %		48.2-134	5011776	ms	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			56.3 %		49.1-148	5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 30 2'
H250296-02 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	368		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011708	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			125 %	71.5-134		5011708	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	22.9		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			86.2 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			90.0 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 31 2'
H250296-03 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	768		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011708	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011708	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			123 %	71.5-134		5011708	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			85.0 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			84.4 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 32 2'
H250296-04 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	240		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.6 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			84.4 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			83.7 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 33 2'
H250296-05 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	416		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.2 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	28.3		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			91.1 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			92.3 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 34 2'
H250296-06 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	320		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.8 %		71.5-134	5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	78.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	23.3		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			85.2 %		48.2-134	5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			87.4 %		49.1-148	5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 35 2'
H250296-07 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	368		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.9 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			93.1 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			93.9 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 36 2'
H250296-08 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	352		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.6 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	13.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			90.4 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			91.2 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 37 3.5'
H250296-09 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	544		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.6 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	20.3		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			91.0 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			93.2 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 38 3.5'
H250296-10 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	544		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.0 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			90.5 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			91.6 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 39 3.5'
H250296-11 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	368		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.1 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			86.5 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			88.0 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 40 3.5'
H250296-12 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	432		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			95.4 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			96.1 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			95.6 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 41 3.5'
H250296-13 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	288		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.4 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	10.8		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			91.3 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			91.3 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 42 3.5'
H250296-14 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	192		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.0 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	120		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	28.6		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			88.1 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			91.7 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 43 3.5'
H250296-15 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	336		16.0	mg/kg	4	5012025	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.0 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	22.5		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			93.8 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			94.9 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 44 3.5'
H250296-16 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	320		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.8 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	90.1		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	22.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			93.9 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			98.0 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 45 3.5'
H250296-17 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	640		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.2 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			80.2 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			78.9 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 46 3.5'
H250296-18 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	640		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.6 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	12.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			81.8 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			82.7 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 47 5'
H250296-19 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	832		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			93.8 %		71.5-134	5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	14.6		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			87.1 %		48.2-134	5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			87.6 %		49.1-148	5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 48 10'
H250296-20 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	720		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			94.9 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
DRO >C10-C28*	19.7		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011776	ms	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			88.0 %	48.2-134		5011776	ms	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			88.8 %	49.1-148		5011776	ms	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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**BS - 49 8'
H250296-21 (Soil)**

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	768		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			94.4 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			75.8 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			79.0 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 50 1'
H250296-22 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	288		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.0 %	71.5-134		5011774	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			93.1 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			94.7 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 51 1'
H250296-23 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	240		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011774	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011774	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011774	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011774	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011774	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			95.3 %	71.5-134		5011774	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			73.5 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			72.3 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 52 1'
H250296-24 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	336		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			116 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			86.9 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			86.0 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 53 1'
H250296-25 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	208		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			113 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			85.0 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			85.5 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 54 1'
H250296-26 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	320		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			112 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			92.2 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			92.3 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 55 1'
H250296-27 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	320		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			114 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			88.4 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			88.4 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 56 1'
H250296-28 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	272		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			113 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			94.1 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			96.2 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 57 1'
H250296-29 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	240		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			114 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			96.2 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			98.0 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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BS - 58 1'
H250296-30 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	176		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			113 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			90.3 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			92.3 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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**WS - 17 0-2'
H250296-31 (Soil)**

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	416		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			116 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	63.8		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	12.8		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			77.4 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			80.6 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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**WS - 18 0-2'
H250296-32 (Soil)**

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	432		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			116 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	137		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	47.5		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			82.7 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			88.6 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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**WS - 19 0-2'
H250296-33 (Soil)**

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	272		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			113 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

Surrogate: 1-Chlorooctane			85.7 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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Surrogate: 1-Chlorooctadecane			87.7 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 20 0-3.5'
H250296-34 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	224		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			116 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			91.5 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			93.2 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 21 0-3.5'
H250296-35 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	288		16.0	mg/kg	4	5012015	KV	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			114 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			96.6 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			98.8 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 22 0-3.5'
H250296-36 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	272		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	17-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	17-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			112 %	71.5-134		5011775	JH	17-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			94.5 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			96.9 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 23 0-3.5'
H250296-37 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	432		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			113 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			92.8 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			95.2 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 24 0-3.5'
H250296-38 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	448		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			115 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			94.8 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			97.3 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 25 5-10'
H250296-39 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	480		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			109 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			95.4 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			97.2 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 26 0-10'
H250296-40 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	368		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			113 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011777	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			90.8 %	48.2-134		5011777	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			93.5 %	49.1-148		5011777	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 27 0-10'
H250296-41 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	304		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			113 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			82.4 %	48.2-134		5011756	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			81.9 %	49.1-148		5011756	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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WS - 28 0-10'

H250296-42 (Soil)

Analyte	Result	MDL	Reporting Limit	Units	Dilution	Batch	Analyst	Analyzed	Method	Notes
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Cardinal Laboratories

Inorganic Compounds

Chloride	256		16.0	mg/kg	4	5012020	HM	20-Jan-25	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Toluene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	5011775	JH	18-Jan-25	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	5011775	JH	18-Jan-25	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			112 %	71.5-134		5011775	JH	18-Jan-25	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	
DRO >C10-C28*	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	5011756	MS	18-Jan-25	8015B	

<i>Surrogate: 1-Chlorooctane</i>			85.4 %	48.2-134		5011756	MS	18-Jan-25	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			84.2 %	49.1-148		5011756	MS	18-Jan-25	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Inorganic Compounds - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5012015 - 1:4 DI Water

Blank (5012015-BLK1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	ND	16.0	mg/kg							
LCS (5012015-BS1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	416	16.0	mg/kg	400		104	80-120			
LCS Dup (5012015-BSD1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	432	16.0	mg/kg	400		108	80-120	3.77	20	

Batch 5012020 - 1:4 DI Water

Blank (5012020-BLK1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	ND	16.0	mg/kg							
LCS (5012020-BS1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	432	16.0	mg/kg	400		108	80-120			
LCS Dup (5012020-BSD1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	432	16.0	mg/kg	400		108	80-120	0.00	20	

Batch 5012025 - 1:4 DI Water

Blank (5012025-BLK1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	ND	16.0	mg/kg							
LCS (5012025-BS1)										
Prepared & Analyzed: 20-Jan-25										
Chloride	448	16.0	mg/kg	400		112	80-120			

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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Inorganic Compounds - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5012025 - 1:4 DI Water

LCS Dup (5012025-BSD1)

Prepared & Analyzed: 20-Jan-25

Chloride	432	16.0	mg/kg	400		108	80-120	3.64	20	
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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Volatile Organic Compounds by EPA Method 8021 - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011708 - Volatiles

Blank (5011708-BLK1)

Prepared & Analyzed: 17-Jan-25

Benzene	ND	0.050	mg/kg							
Toluene	ND	0.050	mg/kg							
Ethylbenzene	ND	0.050	mg/kg							
Total Xylenes	ND	0.150	mg/kg							
Total BTEX	ND	0.300	mg/kg							
Surrogate: 4-Bromofluorobenzene (PID)	0.0648		mg/kg	0.0500		130	71.5-134			

LCS (5011708-BS1)

Prepared & Analyzed: 17-Jan-25

Benzene	2.06	0.050	mg/kg	2.00		103	82.8-130			
Toluene	2.06	0.050	mg/kg	2.00		103	86-128			
Ethylbenzene	2.29	0.050	mg/kg	2.00		114	85.9-128			
m,p-Xylene	4.69	0.100	mg/kg	4.00		117	89-129			
o-Xylene	2.32	0.050	mg/kg	2.00		116	86.1-125			
Total Xylenes	7.00	0.150	mg/kg	6.00		117	88.2-128			
Surrogate: 4-Bromofluorobenzene (PID)	0.0551		mg/kg	0.0500		110	71.5-134			

LCS Dup (5011708-BSD1)

Prepared & Analyzed: 17-Jan-25

Benzene	2.20	0.050	mg/kg	2.00		110	82.8-130	6.45	15.8	
Toluene	2.15	0.050	mg/kg	2.00		107	86-128	4.39	15.9	
Ethylbenzene	2.32	0.050	mg/kg	2.00		116	85.9-128	1.56	16	
m,p-Xylene	4.75	0.100	mg/kg	4.00		119	89-129	1.28	16.2	
o-Xylene	2.37	0.050	mg/kg	2.00		118	86.1-125	2.16	16.7	
Total Xylenes	7.11	0.150	mg/kg	6.00		119	88.2-128	1.57	16.3	
Surrogate: 4-Bromofluorobenzene (PID)	0.0538		mg/kg	0.0500		108	71.5-134			

Batch 5011774 - Volatiles

Blank (5011774-BLK1)

Prepared & Analyzed: 17-Jan-25

Benzene	ND	0.050	mg/kg							
Toluene	ND	0.050	mg/kg							
Ethylbenzene	ND	0.050	mg/kg							
Total Xylenes	ND	0.150	mg/kg							

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
P. O. BOX 5753
HOBBS NM, 88240

Project: OGDEN STATE 5A
Project Number: NONE GIVEN
Project Manager: DIMITRY NIKANOROV
Fax To: (575) 391-8484

Reported:
22-Jan-25 17:29

Volatile Organic Compounds by EPA Method 8021 - Quality Control**Cardinal Laboratories**

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011774 - Volatiles**Blank (5011774-BLK1)**

Prepared & Analyzed: 17-Jan-25

Total BTEX	ND	0.300	mg/kg							
Surrogate: 4-Bromofluorobenzene (PID)	ND		mg/kg	0.0500		94.9	71.5-134			

LCS (5011774-BS1)

Prepared & Analyzed: 17-Jan-25

Benzene	1.93	0.050	mg/kg	2.00		96.5	82.8-130			
Toluene	2.06	0.050	mg/kg	2.00		103	86-128			
Ethylbenzene	2.01	0.050	mg/kg	2.00		101	85.9-128			
m,p-Xylene	3.93	0.100	mg/kg	4.00		98.2	89-129			
o-Xylene	1.97	0.050	mg/kg	2.00		98.6	86.1-125			
Total Xylenes	5.90	0.150	mg/kg	6.00		98.4	88.2-128			
Surrogate: 4-Bromofluorobenzene (PID)	0.0465		mg/kg	0.0500		93.1	71.5-134			

LCS Dup (5011774-BSD1)

Prepared & Analyzed: 17-Jan-25

Benzene	1.92	0.050	mg/kg	2.00		96.2	82.8-130	0.354	15.8	
Toluene	2.05	0.050	mg/kg	2.00		103	86-128	0.489	15.9	
Ethylbenzene	2.00	0.050	mg/kg	2.00		100	85.9-128	0.386	16	
m,p-Xylene	3.91	0.100	mg/kg	4.00		97.6	89-129	0.593	16.2	
o-Xylene	1.96	0.050	mg/kg	2.00		97.9	86.1-125	0.686	16.7	
Total Xylenes	5.86	0.150	mg/kg	6.00		97.7	88.2-128	0.624	16.3	
Surrogate: 4-Bromofluorobenzene (PID)	0.0463		mg/kg	0.0500		92.5	71.5-134			

Batch 5011775 - Volatiles**Blank (5011775-BLK1)**

Prepared & Analyzed: 17-Jan-25

Benzene	ND	0.050	mg/kg							
Toluene	ND	0.050	mg/kg							
Ethylbenzene	ND	0.050	mg/kg							
Total Xylenes	ND	0.150	mg/kg							
Total BTEX	ND	0.300	mg/kg							
Surrogate: 4-Bromofluorobenzene (PID)	0.0572		mg/kg	0.0500		114	71.5-134			

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Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Volatile Organic Compounds by EPA Method 8021 - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011775 - Volatiles

LCS (5011775-BS1)

Prepared & Analyzed: 17-Jan-25

Benzene	2.11	0.050	mg/kg	2.00		105	82.8-130			
Toluene	2.28	0.050	mg/kg	2.00		114	86-128			
Ethylbenzene	2.35	0.050	mg/kg	2.00		117	85.9-128			
m,p-Xylene	4.80	0.100	mg/kg	4.00		120	89-129			
o-Xylene	2.29	0.050	mg/kg	2.00		115	86.1-125			
Total Xylenes	7.10	0.150	mg/kg	6.00		118	88.2-128			

Surrogate: 4-Bromofluorobenzene (PID)

0.0554 mg/kg 0.0500 111 71.5-134

LCS Dup (5011775-BSD1)

Prepared & Analyzed: 17-Jan-25

Benzene	2.16	0.050	mg/kg	2.00		108	82.8-130	2.54	15.8	
Toluene	2.32	0.050	mg/kg	2.00		116	86-128	2.01	15.9	
Ethylbenzene	2.38	0.050	mg/kg	2.00		119	85.9-128	1.40	16	
m,p-Xylene	4.85	0.100	mg/kg	4.00		121	89-129	0.890	16.2	
o-Xylene	2.31	0.050	mg/kg	2.00		116	86.1-125	0.870	16.7	
Total Xylenes	7.16	0.150	mg/kg	6.00		119	88.2-128	0.884	16.3	

Surrogate: 4-Bromofluorobenzene (PID)

0.0540 mg/kg 0.0500 108 71.5-134

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Petroleum Hydrocarbons by GC FID - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011756 - General Prep - Organics

Blank (5011756-BLK1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	ND	10.0	mg/kg							
DRO >C10-C28	ND	10.0	mg/kg							
EXT DRO >C28-C36	ND	10.0	mg/kg							
Surrogate: 1-Chlorooctane	47.4		mg/kg	50.0		94.8	48.2-134			
Surrogate: 1-Chlorooctadecane	47.4		mg/kg	50.0		94.8	49.1-148			

LCS (5011756-BS1)		Prepared & Analyzed: 17-Jan-25								
GRO C6-C10	198	10.0	mg/kg	200		99.2	81.5-123			
DRO >C10-C28	202	10.0	mg/kg	200		101	77.7-122			
Total TPH C6-C28	400	10.0	mg/kg	400		100	80.9-121			
Surrogate: 1-Chlorooctane	49.8		mg/kg	50.0		99.6	48.2-134			
Surrogate: 1-Chlorooctadecane	47.3		mg/kg	50.0		94.7	49.1-148			

LCS Dup (5011756-BSD1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	207	10.0	mg/kg	200		103	81.5-123	4.22	13	
DRO >C10-C28	214	10.0	mg/kg	200		107	77.7-122	5.63	15.6	
Total TPH C6-C28	420	10.0	mg/kg	400		105	80.9-121	4.93	18.5	
Surrogate: 1-Chlorooctane	50.1		mg/kg	50.0		100	48.2-134			
Surrogate: 1-Chlorooctadecane	46.9		mg/kg	50.0		93.8	49.1-148			

Batch 5011776 - General Prep - Organics

Blank (5011776-BLK1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	ND	10.0	mg/kg							
DRO >C10-C28	ND	10.0	mg/kg							
EXT DRO >C28-C36	ND	10.0	mg/kg							
Surrogate: 1-Chlorooctane	42.1		mg/kg	50.0		84.2	48.2-134			
Surrogate: 1-Chlorooctadecane	41.8		mg/kg	50.0		83.6	49.1-148			

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
---	---	------------------------------

Petroleum Hydrocarbons by GC FID - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011776 - General Prep - Organics

LCS (5011776-BS1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	185	10.0	mg/kg	200		92.5	81.5-123			
DRO >C10-C28	187	10.0	mg/kg	200		93.5	77.7-122			
Total TPH C6-C28	372	10.0	mg/kg	400		93.0	80.9-121			
Surrogate: 1-Chlorooctane	45.0		mg/kg	50.0		90.0	48.2-134			
Surrogate: 1-Chlorooctadecane	43.2		mg/kg	50.0		86.4	49.1-148			

LCS Dup (5011776-BSD1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	191	10.0	mg/kg	200		95.3	81.5-123	3.07	13	
DRO >C10-C28	194	10.0	mg/kg	200		96.8	77.7-122	3.49	15.6	
Total TPH C6-C28	384	10.0	mg/kg	400		96.1	80.9-121	3.28	18.5	
Surrogate: 1-Chlorooctane	43.8		mg/kg	50.0		87.6	48.2-134			
Surrogate: 1-Chlorooctadecane	41.7		mg/kg	50.0		83.4	49.1-148			

Batch 5011777 - General Prep - Organics

Blank (5011777-BLK1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	ND	10.0	mg/kg							
DRO >C10-C28	ND	10.0	mg/kg							
EXT DRO >C28-C36	ND	10.0	mg/kg							
Surrogate: 1-Chlorooctane	45.4		mg/kg	50.0		90.9	48.2-134			
Surrogate: 1-Chlorooctadecane	46.4		mg/kg	50.0		92.8	49.1-148			

LCS (5011777-BS1)		Prepared: 17-Jan-25 Analyzed: 18-Jan-25								
GRO C6-C10	190	10.0	mg/kg	200		95.1	81.5-123			
DRO >C10-C28	201	10.0	mg/kg	200		101	77.7-122			
Total TPH C6-C28	391	10.0	mg/kg	400		97.8	80.9-121			
Surrogate: 1-Chlorooctane	48.1		mg/kg	50.0		96.3	48.2-134			
Surrogate: 1-Chlorooctadecane	47.3		mg/kg	50.0		94.7	49.1-148			

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES P. O. BOX 5753 HOBBS NM, 88240	Project: OGDEN STATE 5A Project Number: NONE GIVEN Project Manager: DIMITRY NIKANOROV Fax To: (575) 391-8484	Reported: 22-Jan-25 17:29
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Petroleum Hydrocarbons by GC FID - Quality Control

Cardinal Laboratories

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
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Batch 5011777 - General Prep - Organics

LCS Dup (5011777-BSD1)

Prepared: 17-Jan-25 Analyzed: 18-Jan-25

GRO C6-C10	193	10.0	mg/kg	200	96.3	81.5-123	1.25	13		
DRO >C10-C28	199	10.0	mg/kg	200	99.6	77.7-122	0.969	15.6		
Total TPH C6-C28	392	10.0	mg/kg	400	97.9	80.9-121	0.115	18.5		
Surrogate: 1-Chlorooctane	46.4		mg/kg	50.0	92.9	48.2-134				
Surrogate: 1-Chlorooctadecane	45.4		mg/kg	50.0	90.8	49.1-148				

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

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

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: McNabb Partners
Project Manager: Dmitry Nikanorov
Address: 5014 W Carlsbad Hwy
City: Hobbs
State: NM **Zip:** 88240
Phone #: 917-497-6890 **Fax #:**
Project #:
Project Name: Ogden State 5A
Project Location: Eddy County, NM
Sampler Name: Auden Escalada, Dmitry Nikanorov
FOR LAB USE ONLY

BILL TO
P.O. #:
Company: Murchison
Attn: Greg Boans
Address: On-File
City:
Fax #:
Phone #:
Zip:

ANALYSIS REQUEST

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
H250296		X	1								1/17/25	9:00	X	X	X
	BS-29	C	1	X							1/17/25	9:05	X	X	X
	BS-30	C	1	X							1/17/25	9:10	X	X	X
	BS-31	C	1	X							1/17/25	9:15	X	X	X
	BS-32	C	1	X							1/17/25	9:20	X	X	X
	BS-33	C	1	X							1/17/25	9:25	X	X	X
	BS-34	C	1	X							1/17/25	9:30	X	X	X
	BS-35	C	1	X							1/17/25	9:35	X	X	X
	BS-36	C	1	X							1/17/25	9:40	X	X	X
	BS-37	C	1	X							1/17/25	9:45	X	X	X
	BS-38	C	1	X							1/17/25	9:45	X	X	X

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Relinquished By: [Signature] **Date:** 1-17-25
Received By: [Signature] **Date:** 1-17-25

Delivered By: (Circle One) **Observed Temp. °C:** 1.32 **Sample Condition:** Cool Intact Yes No
Sampler - UPS - Bus - Other: **Corrected Temp. °C:** 0.72 Yes No

Checked By: [Signature] **Turnaround Time:** 24H **Standard:** Standard KUSH Bacteria (only) Cool Intact Yes No Corrected Temp. °C

REMARKS: *Customer requested Depth changes to 1/2/25

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinallabsnm.com



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners		P.O. #:		BILL TO		ANALYSIS REQUEST														
Project Manager: Dmitry Nikanorov		Company: Murchison																		
Address: 5014 W Carlisbad Hwy		Attn: Greg Boans																		
City: Hobbs		Address: On-File																		
Phone #: 917-497-6890		City:																		
Fax #: 917-497-6890		Fax #:																		
Project #: Ogdan State 5A		Zip:																		
Project Name: Ogdan State 5A		Phone #:																		
Project Location: Eddy County, NM		Fax #:																		
Sampler Name: Auden Escalada, Dmitry Nikanorov		PRESERV:																		
FOR LAB USE ONLY		SAMPLING																		
Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX	DATE	TIME	TPH	Chloride	BTEX											
MSD 2946	BS-39	C	1	X	1/17/25	9:45	X	X	X											
	BS-40	C	1	X	1/17/25	9:50	X	X	X											
	BS-41	C	1	X	1/17/25	9:55	X	X	X											
	BS-42	C	1	X	1/17/25	10:00	X	X	X											
	BS-43	C	1	X	1/17/25	10:05	X	X	X											
	BS-44	C	1	X	1/17/25	10:10	X	X	X											
	BS-45	C	1	X	1/17/25	10:15	X	X	X											
	BS-46	C	1	X	1/17/25	10:20	X	X	X											
	BS-47	C	1	X	1/17/25	10:25	X	X	X											
	BS-48	C	1	X	1/17/25	10:30	X	X	X											

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Relinquished By: [Signature] Date: 1/17/25 Received By: [Signature] Date: 1/17/25

Turnaround Time: 24H Standard K10811

Thermometer ID #140 Correction Factor -0.6°C

Bacteria (only) Sample Condition: Cool Intact Observed Temp. °C Corrected Temp. °C

Remarks: [Blank]

Verbal Result: Yes No Add'l Phone #: All Results are emailed. Please provide Email address:

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinallabsnm.com



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners
Project Manager: Dirmity Nikanorov
Address: 5014 W Carlisbad Hwy
City: Hobbs **State:** NM **Zip:** 88240
Phone #: 917-497-8990 **Fax #:**
Project #:
Project Name: Ogdan State 5A
Project Location: Eddy County, NM
Sampler Name: Auden Escalada, Dirmity Nikanorov

P.O. #:
Company: Murchison
Attn: Greg Boans
Address: On-File
City:
Fax #:
Phone #:
Zip:

FOR LAB USE ONLY

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
HS0294	BS-49	8'	C 1	X							1/17/25	10:35	X	X	X
	BS-50	1'	C 1	X							1/17/25	10:40	X	X	X
	BS-51	1'	C 1	X							1/17/25	10:45	X	X	X
	BS-52	1'	C 1	X							1/17/25	10:50	X	X	X
	BS-53	1'	C 1	X							1/17/25	10:55	X	X	X
	BS-54	1'	C 1	X							1/17/25	11:00	X	X	X
	BS-55	1'	C 1	X							1/17/25	11:05	X	X	X
	BS-56	1'	C 1	X							1/17/25	11:10	X	X	X
	BS-57	1'	C 1	X							1/17/25	11:15	X	X	X
	BS-58	1'	C 1	X							1/17/25	11:20	X	X	X

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Relinquished By: [Signature] **Date:** 1/17/25
Received By: [Signature] **Date:** 1/17/25

Turnaround Time: 24Hr **Standard** **KUSH**
Thermometer: 440 **Bacteria (only) Sample Condition:** **Cool Intact:** **Yes** **No**
Correction Factor: 0.5°C **Observed Temp. °C:** **Corrected Temp. °C:**

Verbal Result: Yes No **Add'l Phone #:**
All Results are emailed. Please provide Email address:

Delivered By: (Circle One) **Observed Temp. °C:** 1.3 **Sample Condition:** Cool Intact Yes No
Sampler - UPS - Bus - Other: **Corrected Temp. °C:** 0.7 **Checked By:** [Signature] **(Initials):** [Signature]

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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners	P.O. #:	BILL TO	ANALYSIS REQUEST
Project Manager: Dmitry Nikanorov	Company: Murchison		
Address: 5014 W Carlisbad Hwy	Attn: Greg Boans		
City: Hobbs	Address: On-File		
Phone #: 917-497-6890	City:		
Project #:	Fax #:		
Project Name: Ogden State 5A	Zip:		
Project Location: Eddy County, NM	Phone #:		
Sampler Name: Auden Escalada, Dmitry Nikanorov	Fax #:		

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
31	WS-17	C	1	X						1/17/25	11:30	X	X	X	
32	WS-18	C	1	X						1/17/25	11:35	X	X	X	
33	WS-19	C	1	X						1/17/25	11:40	X	X	X	
34	WS-20	C	1	X						1/17/25	11:45	X	X	X	
35	WS-21	C	1	X						1/17/25	11:50	X	X	X	
36	WS-22	C	1	X						1/17/25	12:00	X	X	X	
37	WS-23	C	1	X						1/17/25	12:05	X	X	X	
38	WS-24	C	1	X						1/17/25	12:10	X	X	X	
39	WS-25	C	1	X						1/17/25	12:15	X	X	X	
40	WS-26	C	1	X						1/17/25	12:15	X	X	X	

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Relinquished By: [Signature] **Date:** 1-17-25 **Received By:** [Signature] **Date:** 1-17-25

Relinquished By: [Signature] **Date:** 1-17-25 **Received By:** [Signature] **Date:** 1-17-25

Delivered By: (Circle One) **Observed Temp. °C:** 13.3 **Sample Condition:** Cool Intact Yes No

Sampler - UPS - Bus - Other: **Corrected Temp. °C:** 0.7 **Checked By:** [Signature] **Theraround Time:** 24hr **Standard:** **Bacteria (only) Sample Condition:** Cool Intact Yes No

REMARKS:

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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners Project Manager: Dimitry Nikanorov Address: 5014 W Carlisbad Hwy City: Hobbs Phone #: 917-497-6990 Project #: Project Name: Ogden State 5A Project Location: Eddy County, NM Sampler Name: Auden Escalada, Dimitry Nikanorov <small>FOR LAB USE ONLY</small>		P.O. #: Company: Murchison Attn: Greg Boans Address: On-File City: Fax #: Phone #: Fax #:	
State: NM Zip: 88240		BILL TO	
Matrix: (G)RAB OR (C)OMP. # CONTAINERS: 1 GROUNDWATER: <input type="checkbox"/> WASTEWATER: <input type="checkbox"/> SOIL: <input checked="" type="checkbox"/> OIL: <input type="checkbox"/> SLUDGE: <input type="checkbox"/> OTHER: <input type="checkbox"/>		PRESERV: <input checked="" type="checkbox"/> SAMPLING:	
Lab I.D.: HES0294 41 42		DATE: 1/17/25 TIME: 12:25	
Sample I.D.: WS-27 WS-28		TPH: <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Chloride: <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> BTEX: <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	
Observed Temp. °C: 13.5 Corrected Temp. °C: 0.72		Turnaround Time: 24hr Standard <input checked="" type="checkbox"/>	
Relinquished By: [Signature] Date: 1/17/25 Time: 13:29		Verbal Result: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Add'l Phone #:	
Relinquished By: [Signature] Date: 1/17/25 Time:		All Results are emailed. Please provide Email address:	
Delivered By: (Circle One) UPS <input checked="" type="checkbox"/> Bus <input type="checkbox"/> Other:		Bacteria (only) Sample Condition Cool Intact: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Corrected Temp. °C:	

† Cardinal cannot accept verbal changes. Please email changes to cely.keene@cardinallabsnm.com



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

November 14, 2024

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 11/13/24 15:40.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene".

Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/13/2024	Sampling Date:	11/12/2024
Reported:	11/14/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DS - 03 0.5FT (H246926-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/14/2024	ND	2.05	102	2.00	1.91	
Toluene*	<0.050	0.050	11/14/2024	ND	2.11	106	2.00	2.69	
Ethylbenzene*	<0.050	0.050	11/14/2024	ND	2.10	105	2.00	2.20	
Total Xylenes*	<0.150	0.150	11/14/2024	ND	6.25	104	6.00	2.06	
Total BTEX	<0.300	0.300	11/14/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 103 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	16.0	16.0	11/14/2024	ND	416	104	400	0.00	

TPH 8015M		mg/kg		Analyzed By: ms					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/14/2024	ND	236	118	200	0.0696	
DRO >C10-C28*	<10.0	10.0	11/14/2024	ND	226	113	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	11/14/2024	ND					

Surrogate: 1-Chlorooctane 94.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 90.1 % 49.1-148

Cardinal Laboratories

*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/13/2024	Sampling Date:	11/12/2024
Reported:	11/14/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DS - 03 1FT (H246926-02)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/14/2024	ND	2.05	102	2.00	1.91		
Toluene*	<0.050	0.050	11/14/2024	ND	2.11	106	2.00	2.69		
Ethylbenzene*	<0.050	0.050	11/14/2024	ND	2.10	105	2.00	2.20		
Total Xylenes*	<0.150	0.150	11/14/2024	ND	6.25	104	6.00	2.06		
Total BTEX	<0.300	0.300	11/14/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 103 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	80.0	16.0	11/14/2024	ND	416	104	400	0.00		

TPH 8015M		mg/kg		Analyzed By: ms						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/14/2024	ND	236	118	200	0.0696		
DRO >C10-C28*	<10.0	10.0	11/14/2024	ND	226	113	200	2.08		
EXT DRO >C28-C36	<10.0	10.0	11/14/2024	ND						

Surrogate: 1-Chlorooctane 93.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 88.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/13/2024	Sampling Date:	11/12/2024
Reported:	11/14/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Shalyn Rodriguez
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DS - 03 2FT (H246926-03)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/14/2024	ND	2.05	102	2.00	1.91		
Toluene*	<0.050	0.050	11/14/2024	ND	2.11	106	2.00	2.69		
Ethylbenzene*	<0.050	0.050	11/14/2024	ND	2.10	105	2.00	2.20		
Total Xylenes*	<0.150	0.150	11/14/2024	ND	6.25	104	6.00	2.06		
Total BTEX	<0.300	0.300	11/14/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	128	16.0	11/14/2024	ND	416	104	400	0.00		

TPH 8015M		mg/kg		Analyzed By: ms						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/14/2024	ND	236	118	200	0.0696		
DRO >C10-C28*	<10.0	10.0	11/14/2024	ND	226	113	200	2.08		
EXT DRO >C28-C36	<10.0	10.0	11/14/2024	ND						

Surrogate: 1-Chlorooctane 94.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 91.1 % 49.1-148

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*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

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

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*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: MCKnabb Partners Project Manager: Dmirity Nikanorov Address: 5014 W Carlisbad Hwy City: Hobbs State: NM Zip: 88240 Phone #: 917-497-6890 Fax #: Project #: Project Name: Ogden State 5A Project Location: Eddy County, NM Sampler Name: Auden Escalada		P.O. #: Company: Murchison Attn: Greg Boans Address: On-File City: Fax #: Phone #: Zip:	
FOR LAB USE ONLY		BILL TO	
Lab I.D.		ANALYSIS REQUEST	
Sample I.D.		(G)RAB OR (C)OMP. # CONTAINERS GROUNDWATER WASTEWATER SOIL OIL SLUDGE OTHER : ACID/BASE: ICE / COOL OTHER :	
DS-03 0.5ft. G 1 DS-03 1ft. G 1 DS-03 2ft. G 1		DATE TIME 11/12/24 10:10 11/12/24 10:15 11/12/24 10:18	
TPH Chloride BTEX		X X X X X X X X X	

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Relinquished By: *[Signature]* Date: 11-13-24 Received By: *[Signature]* Date: 11-13-24
 Relinquished By: *[Signature]* Date: 11-13-24 Received By: *[Signature]* Date: 11-13-24

Delivered By: (Circle One) Observed Temp. °C: 10.1 Sample Condition: Cool Intact Yes No
 Sampler - UPS - Bus - Other: Corrected Temp. °C: 5.51 Yes No

Turnaround Time: 24hr Standard Add'l Phone #:
 Thermometer ID: #440 Correction Factor: -0.6°C Bacteria (only) Sample Condition: Cool Intact Yes No
 Observed Temp. °C: Corrected Temp. °C:

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinalabsnm.com



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

October 25, 2024

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 10/23/24 16:40.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Mike Snyder".

Mike Snyder For Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 01 (1') (H246465-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	416	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 107 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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*=Accredited Analyte

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 02 (1') (H246465-02)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 115 % 49.1-148

Cardinal Laboratories

*=Accredited Analyte

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 03 (1') (H246465-03)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1140	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

Cardinal Laboratories

*=Accredited Analyte

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 04 (1') (H246465-04)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	432	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 05 (1') (H246465-05)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 108 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	464	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 99.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.3 % 49.1-148

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Analytical Results For:

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 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 06 (1') (H246465-06)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	176	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 113 % 49.1-148

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Analytical Results For:

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Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 07 (1') (H246465-07)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 118 % 48.2-134

Surrogate: 1-Chlorooctadecane 116 % 49.1-148

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Analytical Results For:

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 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 08 (1') (H246465-08)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	640	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 87.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 74.2 % 49.1-148

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Analytical Results For:

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 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 09 (1') (H246465-09)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	544	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 118 % 48.2-134

Surrogate: 1-Chlorooctadecane 117 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 10 (1') (H246465-10)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	320	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 115 % 49.1-148

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Analytical Results For:

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 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 11 (1') (H246465-11)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	448	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 93.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 92.3 % 49.1-148

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Analytical Results For:

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 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 12 (1') (H246465-12)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	400	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 13 (1') (H246465-13)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	320	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 109 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 14 (1') (H246465-14)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 15 (1') (H246465-15)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	144	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 107 % 48.2-134

Surrogate: 1-Chlorooctadecane 105 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 16 (1') (H246465-16)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 100 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 95.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 93.2 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 01 (0-1') (H246465-17)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49		
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 96.4 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	176	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND						

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 106 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 02 (0-1') (H246465-18)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 98.4 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.6 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 03 (0-1') (H246465-19)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49		
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 97.1 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	176	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND						

Surrogate: 1-Chlorooctane 105 % 48.2-134

Surrogate: 1-Chlorooctadecane 104 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 04 (0-1') (H246465-20)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 97.4 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Notes and Definitions

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

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners
Project Manager: Dmitry Nikanorov
Address: 5014 W Carlsbad Hwy
City: Hobbs
State: NM **Zip:** 88240
Phone #: 917-497-6890 **Fax #:**
Project #:
Project Name: Ogdan State 5A
Project Location: Eddy Co, NM
Sampler Name: Auden Escalada

P.O. #:
Company: Murchison Oil & Gas
Attn: Greg Boans
Address: 5325 Sierra Vista Dr.
City: Carlsbad
State: NM **Zip:** 88220
Phone #: 575-706-0667 **Fax #:**

FOR LAB USE ONLY

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
1	BS-01	C	1	X							10/23/24	9:00	X	X	X
2	BS-02	(1)	C	X							10/23/24	9:10	X	X	X
3	BS-03	(1)	C	X							10/23/24	9:20	X	X	X
4	BS-04	(1)	C	X							10/23/24	9:30	X	X	X
5	BS-05	(1)	C	X							10/23/24	9:40	X	X	X
6	BS-06	(1)	C	X							10/23/24	9:50	X	X	X
7	BS-07	(1)	C	X							10/23/24	10:00	X	X	X
8	BS-08	(1)	C	X							10/23/24	10:10	X	X	X
9	BS-09	(1)	C	X							10/23/24	10:20	X	X	X
10	BS-10	(1)	C	X							10/23/24	10:30	X	X	X

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Relinquished By: [Signature] **Date:** 10/23/24 **Time:** 10:40
Received By: [Signature] **Date:** 10/23/24 **Time:** 10:30

Delivered By: (Circle One) **Observed Temp. °C:** 3.15 **Corrected Temp. °C:** 2.51
Sampler - UPS - Bus - Other: UPS Bus Other

Sample Condition: Cool Intact Yes No
Checked By: [Signature] **Turnaround Time:** 48 hours **Standard:** **Bacteria (only) Sample Condition:** Cool Intact Yes No **Corrected Temp. °C:**

Remarks: Dmitri@mcnabbpartners.com

† Cardinal cannot accept verbal changes. Please email changes to caley.keene@cardinallabsnm.com



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

November 04, 2024

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 11/01/24 11:14.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene". The signature is written in a cursive style.

Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 03 (1.5') (H246673-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88	
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 99.5 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	11/03/2024	ND	432	108	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 96.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 105 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 08 (1.5') (H246673-02)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 98.9 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	112	16.0	11/03/2024	ND	432	108	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 99.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 17 (1') (H246673-03)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 99.2 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	144	16.0	11/03/2024	ND	432	108	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 97.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 109 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 18 (1') (H246673-04)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 97.7 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	160	16.0	11/03/2024	ND	432	108	400	3.64		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 102 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 19 (1') (H246673-05)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88	
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 98.6 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	80.0	16.0	11/03/2024	ND	432	108	400	3.64	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 98.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 108 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 20 (1') (H246673-06)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 100 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	128	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 96.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 21 (1') (H246673-07)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 99.2 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	64.0	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 98.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 22 (1') (H246673-08)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88	
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 98.0 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 80.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 86.3 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 23 (1') (H246673-09)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 98.5 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	96.0	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 86.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 95.2 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 24 (1') (H246673-10)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 98.8 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	64.0	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 97.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 109 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 25 (10.5') (H246673-11)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88	
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 99.5 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	192	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 102 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 26 (10.5') (H246673-12)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 101 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	112	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 27 (10.5') (H246673-13)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88		
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 99.0 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	160	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 98.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 28 (10.5') (H246673-14)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	1.96	98.2	2.00	7.88	
Toluene*	<0.050	0.050	11/02/2024	ND	1.92	96.0	2.00	7.04	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	1.95	97.3	2.00	5.63	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	5.77	96.2	6.00	5.51	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 100 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/02/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/02/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/02/2024	ND					

Surrogate: 1-Chlorooctane 100 % 48.2-134

Surrogate: 1-Chlorooctadecane 113 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 05 (0-1') (H246673-15)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/01/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/01/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/01/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/01/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/01/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/02/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/02/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/02/2024	ND					

Surrogate: 1-Chlorooctane 97.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 108 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 06 (0-1') (H246673-16)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/01/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/01/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/01/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/01/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/01/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/02/2024	ND	194	97.0	200	4.40	
DRO >C10-C28*	<10.0	10.0	11/02/2024	ND	196	98.0	200	4.01	
EXT DRO >C28-C36	<10.0	10.0	11/02/2024	ND					

Surrogate: 1-Chlorooctane 90.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 100 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 07 (0-1') (H246673-17)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17		
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	272	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/02/2024	ND	194	97.0	200	4.40		
DRO >C10-C28*	<10.0	10.0	11/02/2024	ND	196	98.0	200	4.01		
EXT DRO >C28-C36	<10.0	10.0	11/02/2024	ND						

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 08 (0-1') (H246673-18)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17		
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67		
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37		
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12		
Total BTEX	<0.300	0.300	11/02/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	352	16.0	11/02/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04		
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37		
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND						

Surrogate: 1-Chlorooctane 107 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Analytical Results For:

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 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 09 (0-10.5') (H246673-19)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	96.0	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 95.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 94.8 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 10 (0-10.5') (H246673-20)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 103 % 48.2-134

Surrogate: 1-Chlorooctadecane 104 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 11 (0-10.5') (H246673-21)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	208	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 109 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 12 (0-10.5') (H246673-22)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 112 % 48.2-134

Surrogate: 1-Chlorooctadecane 112 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 13 (0-10.5') (H246673-23)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 112 % 48.2-134

Surrogate: 1-Chlorooctadecane 112 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 14 (0-10.5') (H246673-24)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	29.3	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	15.2	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 113 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 15 (0-10.5') (H246673-25)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	272	16.0	11/02/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 115 % 48.2-134

Surrogate: 1-Chlorooctadecane 116 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 16 (0-10.5') (H246673-26)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	11/03/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 86.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 86.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DS - 01 (2.5') (H246673-27)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	144	16.0	11/03/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 98.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 100 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	11/01/2024	Sampling Date:	10/31/2024
Reported:	11/04/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: DS - 02 (3') (H246673-28)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	11/02/2024	ND	2.05	103	2.00	8.17	
Toluene*	<0.050	0.050	11/02/2024	ND	2.13	107	2.00	7.67	
Ethylbenzene*	<0.050	0.050	11/02/2024	ND	2.09	104	2.00	7.37	
Total Xylenes*	<0.150	0.150	11/02/2024	ND	6.62	110	6.00	6.12	
Total BTEX	<0.300	0.300	11/02/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	11/03/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	11/01/2024	ND	218	109	200	2.04	
DRO >C10-C28*	<10.0	10.0	11/01/2024	ND	219	109	200	1.37	
EXT DRO >C28-C36	<10.0	10.0	11/01/2024	ND					

Surrogate: 1-Chlorooctane 106 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

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

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Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: McNabb Partners Project Manager: Dmirity Nikanorov Address: 5014 W Carlsbad Hwy City: Hobbs Phone #: 917-497-6890 Project #: Project Name: Ogden State 5A Project Location: Eddy Co, NM Sampler Name: Dmirity Nikanorov, Auden Escalada		State: NM Zip: 88240 Attn: Greg Boans Address: 5325 Sierra Vista Dr. City: Carlsbad State: NM Zip: 88220 Phone #: 575-706-0667 Fax #:		BILL TO P.O. #: Company: Murchison Oil & Gas Attn: Greg Boans Address: 5325 Sierra Vista Dr. City: Carlsbad State: NM Zip: 88220 Phone #: 575-706-0667 Fax #:		ANALYSIS REQUEST	
FOR LAB USE ONLY Lab I.D.: <i>H446173</i> Sample I.D.:		(G)RAB OR (C)OMP. # CONTAINERS GROUNDWATER WASTEWATER SOIL OIL SLUDGE OTHER : ACID/BASE: ICE / COOL OTHER :		MATRIX PRESERV SAMPLING		DATE TIME TPH Chloride BTEX	
BS-03 (1.5') BS-17 (1.5') BS-18 (1') BS-19 (1') BS-20 (1') BS-21 (1') BS-22 (1') BS-23 (1') BS-24 (1')		C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1		X X X X X X X X		10/31/24 11:30 10/31/24 11:35 10/31/24 11:40 10/31/24 11:45 10/31/24 11:50 10/31/24 11:55 10/31/24 12:00 10/31/24 12:05 10/31/24 12:10 10/31/24 12:15	

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Relinquished By: *[Signature]* Date: *11-24* Received By: *[Signature]* Date: *11/14*

Relinquished By: *[Signature]* Date: *11/14* Received By: *[Signature]* Date: *11/14*

Delivered By: (Circle One) Observed Temp. °C: *34.0* Corrected Temp. °C: *28.4* Sample Condition: Cool Intact Yes No

Sampler - UPS - Bus - Other: Corrected Temp. °C: *28.4* Checked By: *[Signature]* (Initials)

Turnaround Time: *24 hours* Standard *KUSN* Bacteria (only) Sample Condition: Cool Intact Yes No

Thermometer ID # *1016* Correction Factor *-0.6* Observed Temp. °C: *34.0* Corrected Temp. °C: *28.4*

REMARKS: ** Cust. requested ID changes*

Verbal Result: Yes No Add'l Phone #: _____ All Results are emailed. Please provide Email address: _____

† Cardinal cannot accept verbal changes. Please email changes to caley.keene@cardinalabsnm.com



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

BILL TO

ANALYSIS REQUEST

Company Name: McNabb Partners		Project Manager: Dmirity Nikanorov		P.O. #:	
Address: 5014 W Carlsbad Hwy		City: Hobbs		Company: Murchison Oil & Gas	
State: NM Zip: 88240		Phone #: 917-497-6890		Attn: Greg Boans	
Project #:		Project Owner: Murchison Oil&Gas		Address: 5325 Sierra Vista Dr,	
Project Name: Ogden State 5A		Project Location: Eddy Co, NM		City: Carlsbad	
Sampler Name: Dmirity Nikanorov, Auden Escalada		FOR LAB USE ONLY		State: NM Zip: 88220	
				Phone #: 575-706-0667	
				Fax #:	

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						PRESERV			DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:	ICE / COOL	OTHER :					
21	WS-11	(0-10.5)	C 1	X									10/31/24	13:10	X	X	X
22	WS-12	(0-10.5)	C 1	X									10/31/24	13:15	X	X	X
23	WS-13	(0-10.5)	C 1	X									10/31/24	13:20	X	X	X
24	WS-14	(0-10.5)	C 1	X									10/31/24	13:25	X	X	X
25	WS-15	(0-10.5)	C 1	X									10/31/24	13:30	X	X	X
26	WS-16	(0-10.5)	C 1	X									10/31/24	13:35	X	X	X
27	DS-01	(2.5)	G 1	X									10/31/24	14:00	X	X	X
28	DS-02	(3)	G 1	X									10/31/24	14:10	X	X	X

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Relinquished By: *DNV* Date: *11-1-24* Received By: *Yvonne White* Verbal Result: Yes No Add'l Phone #:
 All Results are emailed. Please provide Email address:
 REMARKS:

Delivered By: (Circle One) Observed Temp. °C *34.0* Sample Condition Cool Intact Bacteria (only) Sample Condition Cool Intact
 Corrected Temp. °C *28.2* Yes No No No No

Turnaround Time: *24 hours* Standard *KUSHI*
 Thermometer ID # *140* Correction Factor *-0.6* Yes No No

† Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinalhshsm.com



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

October 25, 2024

DIMITRY NIKANOROV

MC NABB SERVICES

P. O. BOX 5753

HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 10/23/24 16:40.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Mike Snyder". The signature is fluid and cursive.

Mike Snyder For Celey D. Keene

Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 01 (1') (H246465-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	416	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 107 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 02 (1') (H246465-02)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	160	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 115 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 03 (1') (H246465-03)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	1140	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 04 (1') (H246465-04)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	432	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 05 (1') (H246465-05)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 108 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	464	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 99.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.3 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 06 (1') (H246465-06)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	176	16.0	10/24/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 113 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 07 (1') (H246465-07)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	160	16.0	10/24/2024	ND	432	108	400	0.00	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 118 % 48.2-134

Surrogate: 1-Chlorooctadecane 116 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 08 (1') (H246465-08)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	640	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 87.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 74.2 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 09 (1') (H246465-09)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	544	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 118 % 48.2-134

Surrogate: 1-Chlorooctadecane 117 % 49.1-148

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Analytical Results For:

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 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 10 (1') (H246465-10)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	320	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 114 % 48.2-134

Surrogate: 1-Chlorooctadecane 115 % 49.1-148

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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 11 (1') (H246465-11)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	448	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 93.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 92.3 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 12 (1') (H246465-12)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72	
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 107 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	400	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND					

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 13 (1') (H246465-13)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	320	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 109 % 48.2-134

Surrogate: 1-Chlorooctadecane 107 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 14 (1') (H246465-14)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 106 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	240	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 15 (1') (H246465-15)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	2.72		
Toluene*	<0.050	0.050	10/24/2024	ND	2.08	104	2.00	3.58		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	2.06	103	2.00	5.07		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	6.47	108	6.00	3.80		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 105 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	144	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/24/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/24/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/24/2024	ND						

Surrogate: 1-Chlorooctane 107 % 48.2-134

Surrogate: 1-Chlorooctadecane 105 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: BS - 16 (1') (H246465-16)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49		
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 100 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	160	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND						

Surrogate: 1-Chlorooctane 95.5 % 48.2-134

Surrogate: 1-Chlorooctadecane 93.2 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 01 (0-1') (H246465-17)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 96.4 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	176	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 106 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 02 (0-1') (H246465-18)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 98.4 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	240	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.6 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 03 (0-1') (H246465-19)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49		
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77		
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96		
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84		
Total BTEX	<0.300	0.300	10/24/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 97.1 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	176	16.0	10/24/2024	ND	416	104	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02		
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53		
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND						

Surrogate: 1-Chlorooctane 105 % 48.2-134

Surrogate: 1-Chlorooctadecane 104 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 DIMITRY NIKANOROV
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	10/23/2024	Sampling Date:	10/23/2024
Reported:	10/25/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	NONE GIVEN	Sample Received By:	Tamara Oldaker
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: WS - 04 (0-1') (H246465-20)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	10/24/2024	ND	1.93	96.3	2.00	6.49	
Toluene*	<0.050	0.050	10/24/2024	ND	1.86	93.0	2.00	5.77	
Ethylbenzene*	<0.050	0.050	10/24/2024	ND	1.88	94.2	2.00	4.96	
Total Xylenes*	<0.150	0.150	10/24/2024	ND	5.59	93.2	6.00	4.84	
Total BTEX	<0.300	0.300	10/24/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 97.4 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: AC					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	224	16.0	10/24/2024	ND	416	104	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	10/25/2024	ND	231	115	200	4.02	
DRO >C10-C28*	<10.0	10.0	10/25/2024	ND	231	115	200	5.53	
EXT DRO >C28-C36	<10.0	10.0	10/25/2024	ND					

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 110 % 49.1-148

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

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

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Mike Snyder For Celey D. Keene, Lab Director/Quality Manager



CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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

Company Name: McNabb Partners
Project Manager: Dmitry Nikanorov
Address: 5014 W Carlsbad Hwy
City: Hobbs
State: NM **Zip:** 88240
Phone #: 917-497-6890 **Fax #:**
Project #:
Project Name: Ogdan State 5A
Project Location: Eddy Co, NM
Sampler Name: Auden Escalada

P.O. #:
Company: Murchison Oil & Gas
Attn: Greg Boans
Address: 5325 Sierra Vista Dr.
City: Carlsbad
State: NM **Zip:** 88220
Phone #: 575-706-0667 **Fax #:**

FOR LAB USE ONLY

Lab I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	TPH	Chloride	BTEX
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER	ACID/BASE:					
	BS-01	(1)	C 1	X							10/23/24	9:00	X	X	X
	BS-02	(1)	C 1	X							10/23/24	9:10	X	X	X
	BS-03	(1)	C 1	X							10/23/24	9:20	X	X	X
	BS-04	(1)	C 1	X							10/23/24	9:30	X	X	X
	BS-05	(1)	C 1	X							10/23/24	9:40	X	X	X
	BS-06	(1)	C 1	X							10/23/24	9:50	X	X	X
	BS-07	(1)	C 1	X							10/23/24	10:00	X	X	X
	BS-08	(1)	C 1	X							10/23/24	10:10	X	X	X
	BS-09	(1)	C 1	X							10/23/24	10:20	X	X	X
	BS-10	(1)	C 1	X							10/23/24	10:30	X	X	X

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Relinquished By: [Signature] **Date:** 10/23/24 **Received By:** [Signature] **Date:** 10/23/24

Delivered By: (Circle One) **Observed Temp. °C:** 3.15 **Sample Condition:** Cool Intact Yes No

Sampler - UPS - Bus - Other: **Corrected Temp. °C:** 2.51 **Checked By:** [Signature]

Turnaround Time: 48 hours **Standard:** **Bacteria (only) Sample Condition:** Cool Intact Yes No

Thermometer ID #140 **Correction Factor -0.5°C** **Observed Temp. °C:** **Corrected Temp. °C:**

Remarks: Dmitri@mcnabbpartners.com

† Cardinal cannot accept verbal changes. Please email changes to caley.keene@cardinallabsnm.com



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

August 30, 2024

ANDREW PARKER
MC NABB SERVICES
P. O. BOX 5753
HOBBS, NM 88240

RE: OGDEN STATE 5A

Enclosed are the results of analyses for samples received by the laboratory on 08/26/24 16:33.

Cardinal Laboratories is accredited through Texas NELAP under certificate number TX-C24-00112. Accreditation applies to drinking water, non-potable water and solid and chemical materials. All accredited analytes are denoted by an asterisk (*). For a complete list of accredited analytes and matrices visit the TCEQ website at www.tceq.texas.gov/field/qa/lab_accred_certif.html.

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

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

Accreditation applies to public drinking water matrices.

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

Sincerely,

A handwritten signature in black ink that reads "Celey D. Keene". The signature is written in a cursive style.

Celey D. Keene
Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 01 0.5' (H245183-01)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/28/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/28/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	0.205	0.050	08/28/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	1.20	0.150	08/28/2024	ND	5.52	92.0	6.00	4.78	GC-NC1
Total BTEX	1.41	0.300	08/28/2024	ND					GC-NC1

Surrogate: 4-Bromofluorobenzene (PID) 130 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	528	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	96.6	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	1650	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	396	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 93.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 114 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 01 1' (H245183-02)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37		
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55		
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69		
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78		
Total BTEX	<0.300	0.300	08/27/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.8 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	256	16.0	08/28/2024	ND	464	116	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190		
DRO >C10-C28*	49.7	10.0	08/27/2024	ND	200	99.8	200	2.08		
EXT DRO >C28-C36	12.4	10.0	08/27/2024	ND						

Surrogate: 1-Chlorooctane 80.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 106 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 01 1.5' (H245183-03)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 95.5 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	256	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	27.9	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 80.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 106 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 02 0.5' (H245183-04)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 95.2 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	112	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	<10.0	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 75.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.3 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 02 2' (H245183-05)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 96.1 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	528	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	10.0	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 75.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 100 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 03 0.5' (H245183-06)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 97.2 % 71.5-134

Chloride, SM4500CI-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	896	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	54.3	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	19.4	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 70.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 93.6 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 03 1' (H245183-07)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 96.0 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	672	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	<10.0	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 80.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 104 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 03 1.5' (H245183-08)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/27/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 96.7 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	480	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.190	
DRO >C10-C28*	13.8	10.0	08/27/2024	ND	200	99.8	200	2.08	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 78.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 101 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 04 0.5' (H245183-09)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/28/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/28/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/28/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	<0.150	0.150	08/28/2024	ND	5.52	92.0	6.00	4.78	
Total BTEX	<0.300	0.300	08/28/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 98.0 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	352	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS						S-04
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	12.1	10.0	08/27/2024	ND	207	104	200	0.190		
DRO >C10-C28*	444	10.0	08/27/2024	ND	200	99.8	200	2.08		
EXT DRO >C28-C36	121	10.0	08/27/2024	ND						

Surrogate: 1-Chlorooctane 113 % 48.2-134

Surrogate: 1-Chlorooctadecane 150 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 04 1' (H245183-10)

BTEX 8021B		mg/kg		Analyzed By: JH						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	08/28/2024	ND	1.86	92.9	2.00	3.37		
Toluene*	<0.050	0.050	08/28/2024	ND	1.80	89.8	2.00	4.55		
Ethylbenzene*	<0.050	0.050	08/28/2024	ND	1.85	92.6	2.00	4.69		
Total Xylenes*	<0.150	0.150	08/28/2024	ND	5.52	92.0	6.00	4.78		
Total BTEX	<0.300	0.300	08/28/2024	ND						

Surrogate: 4-Bromofluorobenzene (PID) 95.6 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	240	16.0	08/28/2024	ND	464	116	400	10.9		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.466		
DRO >C10-C28*	67.9	10.0	08/27/2024	ND	210	105	200	2.37		
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND						

Surrogate: 1-Chlorooctane 87.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 111 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 05 0.5' (H245183-11)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/28/2024	ND	1.86	92.9	2.00	3.37	
Toluene*	<0.050	0.050	08/28/2024	ND	1.80	89.8	2.00	4.55	
Ethylbenzene*	<0.050	0.050	08/28/2024	ND	1.85	92.6	2.00	4.69	
Total Xylenes*	0.289	0.150	08/28/2024	ND	5.52	92.0	6.00	4.78	GC-NC1
Total BTEX	<0.300	0.300	08/28/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 104 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: HM					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	1070	16.0	08/28/2024	ND	464	116	400	10.9	

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	21.3	10.0	08/27/2024	ND	207	104	200	0.466	
DRO >C10-C28*	1150	10.0	08/27/2024	ND	210	105	200	2.37	
EXT DRO >C28-C36	279	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 78.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 108 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 05 2' (H245183-12)

BTEX 8021B		mg/kg		Analyzed By: JH					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Benzene*	<0.050	0.050	08/27/2024	ND	1.95	97.6	2.00	15.1	
Toluene*	<0.050	0.050	08/27/2024	ND	1.97	98.6	2.00	13.0	
Ethylbenzene*	<0.050	0.050	08/27/2024	ND	2.08	104	2.00	11.0	
Total Xylenes*	<0.150	0.150	08/27/2024	ND	6.45	107	6.00	10.1	
Total BTEX	<0.300	0.300	08/27/2024	ND					

Surrogate: 4-Bromofluorobenzene (PID) 116 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CT					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
Chloride	688	16.0	08/27/2024	ND	432	108	400	0.00	QM-07

TPH 8015M		mg/kg		Analyzed By: MS					
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier
GRO C6-C10*	<10.0	10.0	08/27/2024	ND	207	104	200	0.466	
DRO >C10-C28*	42.5	10.0	08/27/2024	ND	210	105	200	2.37	
EXT DRO >C28-C36	<10.0	10.0	08/27/2024	ND					

Surrogate: 1-Chlorooctane 85.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 109 % 49.1-148

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Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 06 0.5' (H245183-13)

BTEX 8021B		mg/kg		Analyzed By: JH				S-04		
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	08/27/2024	ND	1.95	97.6	2.00	15.1	GC-NC	
Toluene*	<0.050	0.050	08/27/2024	ND	1.97	98.6	2.00	13.0	GC-NC	
Ethylbenzene*	0.957	0.050	08/27/2024	ND	2.08	104	2.00	11.0	GC-NC1	
Total Xylenes*	0.596	0.150	08/27/2024	ND	6.45	107	6.00	10.1	GC-NC1	
Total BTEX	1.55	0.300	08/27/2024	ND					GC-NC1	

Surrogate: 4-Bromofluorobenzene (PID) 172 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CT						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	288	16.0	08/27/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	27.5	10.0	08/27/2024	ND	207	104	200	0.466		
DRO >C10-C28*	377	10.0	08/27/2024	ND	210	105	200	2.37		
EXT DRO >C28-C36	89.0	10.0	08/27/2024	ND						

Surrogate: 1-Chlorooctane 91.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 121 % 49.1-148

Cardinal Laboratories

*=Accredited Analyte

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

Celey D. Keene, Lab Director/Quality Manager



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

Analytical Results For:

MC NABB SERVICES
 ANDREW PARKER
 P. O. BOX 5753
 HOBBS NM, 88240
 Fax To: (575) 391-8484

Received:	08/26/2024	Sampling Date:	08/23/2024
Reported:	08/30/2024	Sampling Type:	Soil
Project Name:	OGDEN STATE 5A	Sampling Condition:	Cool & Intact
Project Number:	20160312-MURCHINSON-OGDENSTATE5	Sample Received By:	Alyssa Parras
Project Location:	MURCHISON - EDDY CO., NM		

Sample ID: CS - 06 1' (H245183-14)

BTEX 8021B		mg/kg		Analyzed By: JH				S-04		
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Benzene*	<0.050	0.050	08/27/2024	ND	1.95	97.6	2.00	15.1	GC-NC	
Toluene*	<0.050	0.050	08/27/2024	ND	1.97	98.6	2.00	13.0	GC-NC	
Ethylbenzene*	0.632	0.050	08/27/2024	ND	2.08	104	2.00	11.0	GC-NC1	
Total Xylenes*	0.394	0.150	08/27/2024	ND	6.45	107	6.00	10.1	GC-NC1	
Total BTEX	1.03	0.300	08/27/2024	ND					GC-NC1	

Surrogate: 4-Bromofluorobenzene (PID) 147 % 71.5-134

Chloride, SM4500Cl-B		mg/kg		Analyzed By: CT						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
Chloride	128	16.0	08/27/2024	ND	432	108	400	0.00		

TPH 8015M		mg/kg		Analyzed By: MS						
Analyte	Result	Reporting Limit	Analyzed	Method Blank	BS	% Recovery	True Value QC	RPD	Qualifier	
GRO C6-C10*	46.4	10.0	08/27/2024	ND	207	104	200	0.466		
DRO >C10-C28*	977	10.0	08/27/2024	ND	210	105	200	2.37		
EXT DRO >C28-C36	295	10.0	08/27/2024	ND						

Surrogate: 1-Chlorooctane 93.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 126 % 49.1-148

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*=Accredited Analyte

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

- S-04 The surrogate recovery for this sample is outside of established control limits due to a sample matrix effect.
QM-07 The spike recovery was outside acceptance limits for the MS and/or MSD. The batch was accepted based on acceptable LCS recovery.
GC-NC1 8260 confirmation analysis was performed; initial GC results were not supported by GC/MS analysis and are biased high with interfering compounds.
GC-NC 8260 confirmation analysis was performed; initial GC results were not supported by GC/MS analysis and are reported as ND.
ND Analyte NOT DETECTED at or above the reporting limit
RPD Relative Percent Difference
** Samples not received at proper temperature of 6°C or below.
*** Insufficient time to reach temperature.
- Chloride by SM4500Cl-B does not require samples be received at or below 6°C
Samples reported on an as received basis (wet) unless otherwise noted on report

Cardinal Laboratories

*=Accredited Analyte

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

Celey D. Keene

Celey D. Keene, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: <u>McNabb Partners</u> Project Manager: <u>Andrew Parker</u> Address: <u>On-File</u> City: _____ State: _____ Zip: _____ Phone #: _____ Fax #: _____ Project #: _____ Project Owner: _____ Project Name: <u>20160512-murchison-ogdenstate5</u> Project Location: <u>Ogden State SA</u> Sampler Name: <u>Christopher Turner</u>		P.O. #: <u>20160512-murchison-ogdenstate5</u> Company: <u>MurchisonDI&Env</u> Address: <u>atmurdg@wcmurphytrk.com</u> City: _____ State: _____ Zip: _____ Phone #: _____ Fax #: _____	
FOR LAB USE ONLY Lab I.D. _____ Sample I.D. _____ H245/53 1 2 3 4 5 6 7 8 9 10 CS-01 CS-01 CS-01 CS-02 CS-02 CS-03 CS-03 CS-03 CS-04 CS-04		BILL TO ANALYSIS REQUEST	
Date: <u>8/24/24</u> Time: <u>10:33</u> Relinquished By: _____ Received By: <u>APRANA</u>		DATE TIME 08/23 9:28 9:32 9:37 9:45 9:49 10:03 10:09 10:15 10:24	
Observed Temp. °C: <u>18.1</u> Corrected Temp. °C: <u>17.2</u>		Matrix: <input checked="" type="checkbox"/> SOIL Matrix: <input type="checkbox"/> GROUNDWATER Matrix: <input type="checkbox"/> WASTEWATER Matrix: <input type="checkbox"/> OIL Matrix: <input type="checkbox"/> SLUDGE Matrix: <input type="checkbox"/> OTHER: _____ Preserv: <input checked="" type="checkbox"/> ICE / COOL Preserv: <input type="checkbox"/> ACID/BASE Preserv: <input type="checkbox"/> OTHER: _____	
Delivered By: (Circle One) _____ Sampler - UPS - Bus - Other: _____		Turnaround Time: _____ Standard <input checked="" type="checkbox"/> Rush <input type="checkbox"/> Bacteria (only) <input type="checkbox"/> Sample Condition <input type="checkbox"/> Cool Intact <input type="checkbox"/> Observed Temp. °C _____ Corrected Temp. °C _____	
Remarks: _____ Verbal Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Phone #: _____ All Results are emailed. Please provide Email address: _____		Chloride <input checked="" type="checkbox"/> TPH (GRO+DRO+MRO) <input checked="" type="checkbox"/> BTEX (Benzene) <input checked="" type="checkbox"/>	

Appendix F

New Buyer's Approval of Liability



McNabb Partners, LLC
Hobbs • Carlsbad • Midland

February 5, 2025

EMNRD - Oil Conservation Division

Attn: Brittany Hall

1000 Rio Brazos Road

Aztec, NM 87110

Subject: Ogden State #5A, Incident ID: nAPP2415825281

Dear Ms. Hall,

Murchison Oil and Gas, LLC ("Murchison") is currently applying for a deferral on the Ogden State #5A (Incident ID: nAPP2415825281) ("Ogden State #5A") and one of the conditions of approval is:

"Any potential buyer of the site must be made aware of contamination that will be deferred until plugging and abandonment of the well or decommissioning of the battery, whichever comes first. The potential buyer must agree to take the liability if a change of ownership is to occur. Proof that any potential buyer has been made aware of and their acceptance of liability must be included in the next submittal."

Ridge Runner Resources is aware Murchison is pursuing a deferral on the Ogden State #5A. Ridge Runner Resources is aware of their acceptance of liability if a change of ownership is to occur.

Murchison and Ridge Runner Resources are currently under a Purchase and Sale Agreement dated April 20, 2024 ("PSA") and nothing in this letter will amend the terms of the PSA.

Murchison and Ridge Runner Resources appreciate the NMOCD's time and attention to this matter.

Sincerely,



Murchison Oil and Gas, LLC
Sana Hines, CFO



Ridge Runner Resources
Brian Cassens, Co-CEO

TRANSPORTER'S MANIFEST
MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Merchison*
Address:
Project Lead:

Greg Boone 575 628 3932

LOCATION OF MATERIAL:

API# *30-015-37264*

Location: *Osden State SA*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

*Dump Truck
M-31*

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *18 loads*

Contaminated

FACILITY CONTACT:

Date: *10-18-24*

Contact Signature:
(Agent for ~~Conoco~~ Phillips)

Sorel

NAME OF TRANSPORTER: (Driver)

Date:

10-18-2024

Driver Signature:

*Alfonso Lueva
Alfonso Lueva*

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

ES&S Environmental Solutions
5053 IH Hwy 285
Orla, TX 79779

Representative
Signature:

Jorge Garcia



(PLEASE PRINT)

REQUIRED INFORMATION

Name: Greg Boone
Phone No:

GENERATOR

NO. 348849

Operator No.
Operator's Name: M. L. JOHNSON
Address
City, State, Zip
Phone No.

Permit/RRC No.
Lease/Well Name & No.: Garden State SA
County
API No.: 30-015-37404
Rig Name & No.
AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Water Based Muds, etc.), Non-Injectable Waters, and Other Exempt Wastes. Includes handwritten 'Dump Truck 10 31'.

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P wastes must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other: *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations...
MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name: McNeill Partners
Address: 1509 W. Fairchild Ave
575-897-0050
Phone No.

Driver's Name: [Signature]
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT:

Name/No.

Site Name/ Permit No.: Red Bluff Facility / STF-065
Address: 5053 US Hwy 285, Orla, TX 79770

Phone No.: 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

Table for Tank Bottoms with columns for Gauges (1st, 2nd), Received (BS&W, Free Water, Total), and BS&W (%).

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why?

NAME (PRINT), DATE, TITLE, SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: 2500011
Phone No: 805-122-3432

GENERATOR

NO. **356910**

Operator No. _____
Operators Name M. Robinson
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Ogden State SA
County _____
API No. 00-915-57264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and government protocol of the waste)	
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____	<u>0.007 Truck</u>
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____		Produced Water (Non-Injectable) _____	
Produced Formation Solids _____		Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC/LPL), ignitability, corrosivity and bioactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS 17 E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McKee Trucking
Address 1200 W. Carlisle Hwy
281-902-0050
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 1:25 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/yr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why?

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead:

Greg Boone 575 628 3432

LOCATION OF MATERIAL:

MAN # *30-015-~~376~~ 37264*

Location: *Ogden State SA*
Company: *Murchison*

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

<i>#1</i>	<i>#2</i>	<i>#3</i>
✓	✓	

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15* ~~10~~ *yards*

Contaminated

FACILITY CONTACT:

Date: *10 18 24*

Contact Signature:
(Agent for ~~ConocoPhillips~~)

Scott

NAME OF TRANSPORTER: (Driver)

Date:

Driver Signature:

10-18-24

VICTOR MANCEANO

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

PS&O Environmental Solutions
5055 US Hwy 286
Orto, TX 79774

Representative
Signature:

George



(PLEASE PRINT) *REQUIRED INFORMATION*

Phone No.:

GENERATOR

NO. 356885

Operator No. _____
Operators Name: MURCHISON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. OGDEN STATE # 54
County _____
API No. 202-015-37269
Rig Name & No. _____
AFE/PO No. _____

Table with columns: EXEMPT E&P Waste/Service Identification and Amount, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES. Includes handwritten entries like 'dump truck - m-38'.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other: *please select from Non-Exempt Waste List on back
QUANTITY: B-BARRELS 1.5 YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations.
MSDS information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name: OIL FIELD PARTNERS
Address _____
Phone No. _____

Driver's Name: JASON WARD
Phone No. 01-38
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.
SHIPMENT DATE: 10-18-24 DRIVER'S SIGNATURE: JASON WARD DELIVERY DATE: DRIVER'S SIGNATURE

TRUCK TIME STAMP: IN: 10-18-24 OUT:
DISPOSAL FACILITY:
RECEIVING AREA: Name/No. 57

Site Name/Permit No.: Red Bluff Facility / STF-065
Address: 5053 US Hwy 285, Orla, TX 79770
Phone No.: 432-448-4239
NORM READINGS TAKEN? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr):

TANK BOTTOMS

Table with columns: Test, Inches, BS&W Received, Free Water, Total Received, BS&W (%).

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED
If denied, why?
NAME (PRINT): JASON WARD DATE: 10/18/24 TITLE: DRIVER SIGNATURE: JASON WARD

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *MURKINSON*
Address:
Project Lead:

Greg Boone 575 623 3932

LOCATION OF MATERIAL:

Location: *Ogden State 5A*
Company:

API# 30-015-37204

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1	#2	#3
✓	✓	✓

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 yards*

Contaminated

FACILITY CONTACT:

Date: *10.21.24*

Contact Signature:
(Agent for ~~Conoco~~ Phillips)

Sentia

NAME OF TRANSPORTER: (Driver)

Date: *10.21.24*

Driver Signature: *VICTOR MANZANO*

DISPOSAL SITE:

M-38

Name of Disposal:

Address:

Date: *RM Environmental Solutions*
5053 US Hwy 285
Orla, TX 79779

Representative
Signature:

George Garcia



(PLEASE PRINT)

REQUIRED INFORMATION

Name _____

Phone No. _____

GENERATOR

NO. **356887**

Operator No. _____
Operators Name: MURKINSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. EG DEN STATE '50
County _____
API No. 30-019-37264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and approximate amount if we know)	
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____	<u>EMPTY TRUCK #38</u>
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____		Produced Water (Non-Injectable) _____	
Produced Formation Solids _____		Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and to follow threshold limits for toxicity (TECL), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS 15 E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R36) Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address TRU VANCE PARTNERS
Phone No. _____

Driver's Name VICTOR MANZANO
Phone No. _____
Truck No. 0028
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 10/21/24 DRIVER'S SIGNATURE VICTOR MANZANO

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 10/25/24 OUT: _____

Name/No. DJ

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Oria, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____
NAME (PRINT) John DATE 10/21/24 TITLE Driver SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name ORIG. FORM

Phone No. _____

GENERATOR

NO. **356888**

Operator No. _____
 Operators Name MURKINSON
 Address _____
 City, State, Zip _____
 Phone No. _____

Permit/RRC No. _____
 Lease/Well Name & No. Padon State F-0
 County _____
 API No. 30-015-37264
 Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and approximate amount of the waste) <u>2000 TRUCK 1130</u>	
Oil Based Cuttings _____			Washout Water (Non-Injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____			Produced Water (Non-Injectable) _____
Produced Formation Solids _____			Gathering Line Water/Waste (Non-Injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysts
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name MICHAEL PARTAKOS
 Address _____
 Phone No. _____

Driver's Name Victor Hernandez
 Phone No. _____
 Truck No. 1120
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10-21-24

DRIVER'S SIGNATURE Victor Hernandez

TRUCK TIME STAMP

IN: 12:34 PM OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. ??

Site Name/Permit No. Red Bluff Facility / STF-065
 Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____
 NAME (PRINT) Victor Hernandez DATE 10/21/24 TITLE _____ SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name: GENG BONG

Phone No. _____

GENERATOR

NO. **356889**

Operator No. _____
Operators Name Shirley Munson
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Chadwick #2
County Wichita
API No. 30-115-27364
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)	
Oil Based Cuttings _____			Washout Water (Non-Injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____			Produced Water (Non-Injectable) _____
Produced Formation Solids _____			Gathering Line Water/Waste (Non-Injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

2 tank
Truck = 17-38

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address MC Math PARTNERS
Phone No. _____

Driver's Name Victor Hernandez
Phone No. _____
Truck No. 1134
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 12-21-24

DRIVER'S SIGNATURE VICTOR HERNANDEZ

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 7:25am OUT: _____

Name/No. D-2

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____
NAME (PRINT) John DATE 12/21/24 TITLE _____ SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead:

Greg Boone 575 629 3932

LOCATION OF MATERIAL:

API# 30-015-37264

Location: *Ogden State 5A*
Company:

Murchison
S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

*Dump Truck
m-36*

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

<i>Load 1</i>	<i>Load 2</i>	<i>Load 3</i>
<i>356912</i>	<i>356911</i>	

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 tons*

Contaminated

FACILITY CONTACT:

Date: *10 23 24*

Contact Signature:
(Agent for ConocoPhillips)

[Signature]

NAME OF TRANSPORTER: (Driver)

Date: *10-23-2024*

Driver Signature: *Alvaro Tercero*
Alvaro Tercero

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

*ES&S Environmental Solutions
6063 US Hwy 249
Orla, TX 79779*

Representative
Signature:

[Signature]



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR		NO. 356912
Operator No. _____	Permit/RRC No. _____	
Operators Name _____	Lease/Well Name & No. _____	
Address _____	County _____	
City, State, Zip _____	API No. _____	
Phone No. _____	Rig Name & No. _____	
	AFE/PD No. _____	

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (must list and quantify process oil free solvent)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	Dump, TR=20
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulation, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER	
Transporter's Name _____	Driver's Name _____
Address _____	Phone No. _____
Phone No. _____	Truck No. _____
	WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address **5053 US Hwy 285, Orfa, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS			
	Feet	Inches	
1st Gauge Received _____	_____	_____	BS&W Received _____
2nd Gauge Received _____	_____	_____	Free Water _____
			Total Received _____
			BS&W (%) _____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Released to Imaging: 2/7/2025 8:52:43 AM
Name: _____
Phone No: 505-248-3422

GENERATOR

NO. **356911**

Operator No. _____
Operators Name: Murphy
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Johnnie 30
County Sevier
API No. 301015 37364
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (name and generation process of the waste)
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	<u>Dump Truck</u>
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY	_____	
E&P Contaminated Soil	_____	Track Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name: _____
Address: _____
Phone No. _____

Driver's Name: Alfonso Torres
Phone No. 505-248-3517
Truck No. 1136
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE: _____ DRIVER'S SIGNATURE: _____ DELIVERY DATE: _____ DRIVER'S SIGNATURE: _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 11:25 AM OUT: _____ Name/No. D

Site Name/ Permit No. Red Bluff Facility / STF-065
Address: 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____
NAME (PRINT): Alfonso Torres DATE: 10/22/24 TITLE: Driver SIGNATURE: _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*

Address:

Project Lead:

Greg Boone 575 628 3932

LOCATION OF MATERIAL:

Location: *ogden state 5A*

Company: *Murchison*

AP# 30-015-37264

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1	#2	#3
✓	✓	✓

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 tons*

Contaminated

FACILITY CONTACT:

Date: *10-23-24*

Contact Signature:
(Agent for *Cannon Phillips*)

[Signature]

NAME OF TRANSPORTER: (Driver)

Date

Driver Signature:

10-23-24

VICTOR MANZANO

DISPOSAL SITE:

M-3B

Name of Disposal:

Address:

Date:

*0360 Environmental Solutions
6063 US Hwy 285
Orla, TX 79779*

Representative
Signature:

[Signature]



(PLEASE PRINT)

REQUIRED INFORMATION

Name: SAFE DRIVE

Phone No. _____

GENERATOR

NO. **356890**

Operator No. _____
 Operators Name Murphy
 Address _____
 City, State, Zip _____
 Phone No. _____

Permit/RRC No. _____
 Lease/Well Name & No. Archer State #50
 County Wade
 API No. 30208-57264
 Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable)	_____	OTHER EXEMPT WASTES (type and quantity placed at the well)
Oil Based Cuttings	_____		Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Muds	_____	Produced Water (Non-Injectable)	_____		
Water Based Cuttings	_____	Gathering Line Water/Waste (Non-Injectable)	_____		
Produced Formation Solids	_____	INTERNAL USE ONLY	_____		
Tank Bottoms	_____	Truck Washout (exempt waste)	_____		
E&P Contaminated Soil	_____				
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), irritability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: 8-BARRELS _____ 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
 Address 1111 North Carters
 Phone No. _____

Driver's Name Vince Gonzalez
 Phone No. _____
 Truck No. 1128
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

10-23-24

DELIVERY DATE _____

Vince Gonzalez

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 10/23/24 OUT: _____

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
 Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) Jorge Lopez DATE 10/23/24 TITLE _____ SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name: BURGESS

Phone No. _____

GENERATOR

NO. **357584**

Operator No. _____
 Operators Name Murphy
 Address _____
 City, State, Zip _____
 Phone No. _____

Permit/RRC No. _____
 Lease/Well Name & No. Clayton #101 #50
 County _____
 API No. 30-018-37264
 Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable) _____	OTHER EXEMPT WASTES (type and quantity amount of the waste) <u>2000</u> <u>TANK 1102</u>
Oil Based Cuttings _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Muds _____		Produced Water (Non-Injectable) _____	
Water Based Cuttings _____		Gathering Line Water/Waste (Non-Injectable) _____	
Produced Formation Solids _____			
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
 Address 1277 ALABAMA PARTNERSHIP
 Phone No. _____

Driver's Name Vince Murphey
 Phone No. _____
 Truck No. 1119E
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 11-23-24

DRIVER'S SIGNATURE Vince Murphey

TRUCK TIME STAMP

IN: 1:55 PM OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 27

Site Name/ Permit No. Red Bluff Facility / STF-065
 Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (Print) Jerry DATE 11/23/24 TITLE Driver SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name GUSK RADE

Phone No. _____

GENERATOR

NO. **357585**

Operator No. _____
Operators Name MURKINSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. FRITTON SHIP 200
County _____
API No. 20015 27064
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (high and generation process of the waste) <u>DUMP</u> <u>TRUCK WASHOUT - 1134</u>
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY	_____	
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS 10 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 211 WOOD PARK DRIVE
Phone No. _____

Driver's Name WILLIAM HANCOCK
Phone No. _____
Truck No. 11320
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10/23/24

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 2:08 PM OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 17

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 microjouergents? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____
Name (print) WILLIAM HANCOCK DATE 10/23/24 TITLE DRIVER SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: MURKINSON
Address:
Project Lead:

Great Boque 575 628 3932

LOCATION OF MATERIAL:

API# 30-015-37264

Location: Ogden State BA
Company: MURKINSON

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: 15 Tons

Contaminated

M37

FACILITY CONTACT:

Date: 10-24-24

Contact Signature:
(Agent for ~~Conoco~~ Phillips)

Savage

NAME OF TRANSPORTER: (Driver)

Date: 10-24-24

Driver Signature: Joel Van Buskirk

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

10/24

Representative
Signature

E.D.



(PLEASE PRINT)

REQUIRED INFORMATION

Name _____

Phone No. _____

GENERATOR

NO. 348051

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for Oil Based Muds, Water Based Muds, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, and OTHER EXEMPT WASTES.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, Corrosivity and flammability

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHIP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: 10:51 OUT: _____
DISPOSAL FACILITY RECEIVING AREA Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770
Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

Table with columns for 1st Gauge, 2nd Gauge, Received, BS&W Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?
NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Signature]
Phone No.:

GENERATOR

NO. **348052**

Operator No. _____
Operators Name: Murchison
Address: _____
City, State, Zip: _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No.: Agri Star 200A
County: _____
API No.: 30-010-07000
Rig Name & No.: _____
AFE/PO No.: _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (Type and quantity amount at the source)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waster _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity.

Non-Exempt Other: _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the maximum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided):
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name: McKenna Brothers
Address: _____
Phone No.: _____

Driver's Name: Paul Van Ruckel
Phone No.: _____
Truck No.: 0157
WHP No.: _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No.: Red Bluff Facility / STF-065
Address: 5053 US Hwy 285, Orla, TX 79770

Phone No.: 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro Roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	2nd Gauge _____	Received _____	BS&W Received _____	Free Water _____	Total Received _____	BS&W (%) _____
-----------------	-----------------	----------------	---------------------	------------------	----------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____
NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **343344**

Operator No. _____
Operators Name March...
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable) _____	OTHER EXEMPT WASTES (type and generation records of the waste)
Oil Based Cuttings _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Muds _____		Produced Water (Non-Injectable) _____	
Water Based Cuttings _____		Gathering Line Water/Waste (Non-Injectable) _____	
Produced Formation Solids _____			
Tank Bottoms _____	INTERNAL USE ONLY	Truck Washout (exempt waste) _____	
E&P Contaminated Soil _____			
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McHale Petroleum
Address _____
Phone No. _____

Driver's Name Scott...
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

W

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murkison*
Address:
Project Lead:

Greg Boone 575 623 3932

LOCATION OF MATERIAL:

API# 30-015-37264

Location: *Ordan State 5A*
Company: *Murkison*

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1	#2	#3
↓	↓	↓

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 yards*

Contaminated

FACILITY CONTACT:

Date: *10-24-24*

Contact Signature:
(Agent for ConocoPhillips)

Satter

NAME OF TRANSPORTER: (Driver)

Date:

10-24-24

Driver Signature:

VICTOR MANZANO

M 38

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

10/24

Representative
Signature

E. O.



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: COBEN SCOTT
Phone No: _____

GENERATOR

NO. **357586**

Operator No. _____
Operators Name MURPHY
Address _____
City, State, Zip _____
Phone No _____

Permit/RRC No. _____
Lease/Well Name & No. CRATER 2015 5744
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable) _____	OTHER EXEMPT WASTES (type and approximate amount of the waste) <u>DUMP TO OILFIELD</u>
Oil Based Cuttings _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Muds _____		Produced Water (Non-Injectable) _____	
Water Based Cuttings _____		Gathering Line Water/Waste (Non-Injectable) _____	
Produced Formation Solids _____			
Tank Bottoms _____	INTERNAL USE ONLY	Truck Washout (exempt waste) _____	
E&P Contaminated Soil _____			
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations: 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 11111111111111111111
Phone No. _____

Driver's Name VICTOR MANZANO
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10/24/24

DRIVER'S SIGNATURE VICTOR MANZANO

TRUCK TIME STAMP

IN: 10:30 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. DT

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50-micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____
2nd Gauge _____		
Received _____		

BS&W Received _____	BS&W (%) _____
Free Water _____	
Total Received _____	

I hereby certify that the above load material has been (circle one)

ACCEPTED DENIED

If denied, why? _____

NAME (PRINT) _____

DATE 10/24/24

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Mike Smith

Phone No. _____

GENERATOR

NO. **357587**

Operator No. _____
Operators Name MICHAEL WILSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. CRACKENBERRY 50A
County _____
API No. 30015-2104
Rig Name & No. _____
AFF/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and general amount of hazardous) <u>DRILL</u> <u>TRUCK - 1138</u>
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS 15 E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 1111 NABO PARTIALS
Phone No. _____

Driver's Name VICTOR ALVARADO
Phone No. _____
Truck No. 0124
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10-27-24

DRIVER'S SIGNATURE VICTOR ALVARADO

TRUCK TIME STAMP

IN: 12:57 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 127

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one):

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name GENE KRAPE

Phone No _____

GENERATOR

NO. **357994**

Operator No. _____
Operators Name Murphy
Address _____
City, State, Zip _____
Phone No _____

Permit/HRC No. _____
Lease/Well Name & No. Parker sub 50
County Scott
API No. 57284
Rig Name & No. _____
AFE/PO No. _____

EXEMPT ESP Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTE types and generation amount of the volume <u>2138</u>
Oil Based Cuttings _____	Washout Water (Non-injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-injectable) _____	
Water Based Cuttings _____	Produced Water (Non-injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
ESP Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT ESP Waste/Service Identification and Amount

All non-exempt ESP waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360) Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: (i) field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description below) _____

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address WY-ROAD PARTNERS
Phone No. _____

Driver's Name WILLIAM HANCOCK
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10-22-34

DRIVER'S SIGNATURE WILLIAM HANCOCK

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 2:40 OUT: _____

Name/No. 153

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgen/hr? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

(NAME PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead:

Grey Boone 575 628 3932

LOCATION OF MATERIAL:

API# 30-015-37264

Location: *Olden State 5A*
Company: *Murchison*

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

M1 M2
↓

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 yards*

contaminated

FACILITY CONTACT:

Date: *10 24 24*

Contact Signature:
(Agent for ~~ConocoPhillips~~)

Sammy

NAME OF TRANSPORTER: (Driver)

Date:

Driver Signature:

10 29 24

VICTOR MANZANO
M 38

DISPOSAL SITE:

Name of Disposal:

Address:

Date:

10/25

Representative
Signature:

E. D.



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Carl [unclear]

Phone No. _____

GENERATOR

NO. **357995**

Operator No. _____
Operators Name MURKINSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Carbon State 3A
County INDIS. 37067
API No. _____
Rig Name & No. _____
AFF/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation (access if applicable)) <u>DUMP</u> <u>PAVING 1138</u>
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity, gas Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS 15 V-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address MILWAUKEE VALTIONS
Phone No. _____

Driver's Name VICTOR MANZANO
Phone No. _____
Truck No. 12345
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 10:47 OUT: _____

Name/No. 1047-107

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micr/roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	feet	inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED _____ If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *MURKINSON*
Address:
Project Lead:

Greg Boone 575 628 3932

LOCATION OF MATERIAL:

AP# 30-015-37264

Location: *Ogden State 5A*
Company: *MURKINSON*

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *20*
1/8 yards

Contaminated

FACILITY CONTACT:

Date: *10.24.24*

Contact Signature:
(Agent for ConocoPhillips)

Seering

NAME OF TRANSPORTER: (Driver)

Date: *10-25-24*

Driver Signature:

Andrew R. [Signature]
Andrew R.

DISPOSAL SITE:

Name of Disposal:
Address:
Date:

10/25

Representative
Signature:

[Signature]



(PLEASE PRINT)

REQUIRED INFORMATION

Name Orla
Phone No. _____

GENERATOR

NO. **349763**

Operator No. _____
Operators Name Orla
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Orla
County _____
APT No. 21-015-57300
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (trap and production process at the well)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	<u>M89</u> <u>Dump Ltd</u>
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), leachability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: B-BARRELS _____ 20 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McArthur
Address _____
Phone No. _____

Driver's Name Auton
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN 10:45 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 01

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	BS&W (%)
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one):

ACCEPTED

DEINED

If denied, why? _____

(NAME (PRINT)) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Merchison*
Address:
Project Lead:

Graef Boone *575 629 3932*

LOCATION OF MATERIAL:

Location: *Ordaz State 5A*
Company: *Merchison*

AP# 30-015-37264

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1	#2	#3
✓	✓	✓

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 yards*

Contaminated

FACILITY CONTACT:

Date: *10 29 24*

Contact Signature:
(Agent for *ConocoPhillips*)

Sorensen

NAME OF TRANSPORTER: (Driver)

Date: *10 29 24*

Driver Signature: *VICTOR ALVARADO*

m-38

DISPOSAL SITE:

Name of Disposal:
Address:
Date: *10/29*

Representative Signature: *[Signature]*



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: GOA TRUCK
Phone No: _____

GENERATOR

NO. **357996**

Operator No. _____
Operators Name: W. H. Johnson
Address: _____
City, State, Zip: _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No.: CRISTEN STATE #0-A
County: _____
API No.: 30-015-3210
Rig Name & No.: _____
AFE/PO No.: _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (type and generous amount of the waste) <u>DUMP TRUCK - 11-23</u>
Oil Based Cuttings	_____	Washout Water (Non-injectable)	_____	
Water Based Muds	_____	Completion Fluid/Flow Back (Non-injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY	_____	
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC&F), ignitability, corrosivity and reactivity.

Non-Exempt Other: _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name: _____
Address: NO WASTE PARTNERS
Phone No.: _____

Driver's Name: WALTER A. HANCOCK
Phone No.: _____
Truck No.: 1038
WHIP No.: _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE: 10-29-24

DRIVER'S SIGNATURE: WALTER A. HANCOCK

TRUCK TIME STAMP

IN: 10:05 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No.: _____

Site Name/ Permit No.: Red Bluff Facility / STF-065
Address: 5053 US Hwy 285, Orla, TX 79770

Phone No: 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro rontgen/hr? (Circle One) YES NO
NORM (mR/hr): _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Bob Poole
Phone No. _____

GENERATOR

NO. 357998

Operator No. _____
Operators Name Muchinson
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Exxon 213150
County _____
API No. 30015 2724
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds	_____	NON-INJECTABLE WATERS
Oil Based Cuttings	_____	
Water Based Muds	_____	Washout Water (Non-Injectable) _____
Water Based Cuttings	_____	Completion Fluid/Flow Back (Non-Injectable) _____
Produced Formation Solids	_____	Produced Water (Non-Injectable) _____
Tank Bottoms	_____	Gathering Line Water/Waste (Non-Injectable) _____
E&P Contaminated Soil	_____	INTERNAL USE ONLY
Gas Plant Waste	_____	Truck Washout (exempt waste) _____
		OTHER EXEMPT WASTES (type and generation process of the waste) <u>Dump truck 11-54</u>

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 1110 W. 14th Street
Phone No. _____

Driver's Name Victor Hernandez
Phone No. _____
Truck No. 1130
WH# No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 1-23-24 DRIVER'S SIGNATURE Victor Hernandez

TRUCK TIME STAMP IN: <u>12:05</u> OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>30015 2724</u>
---	--------------------------	--

Site Name/Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge	_____	_____	_____	_____
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____
NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 357998

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well _____
Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for Oil Based Muds, Water Based Muds, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, and OTHER EXEMPT WASTES.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), leachability, compressive and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certificates on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended.
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

COUNTRY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (inf/hr) _____

TANK BOTTOMS

Table with columns for Feet, Inches, 1st Gauge, 2nd Gauge, Received

Table with columns for BS&W Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Gene Smith

Phone No. _____

GENERATOR

NO. 357997

Operator No. _____

Permit/RRC No. _____

Operator's Name Murphy
Address _____

Lease/Well Name & No. Carroll

County _____

City, State, Zip _____

API No. 3010-2724

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds	_____	NON-INJECTABLE WASTES
Oil Based Cuttings	_____	
Water Based Muds	_____	Washout Water (Non-Injectable) _____
Water Based Cuttings	_____	Completion Fluid/Flow Back (Non-Injectable) _____
Produced Formation Solids	_____	Produced Water (Non-Injectable) _____
Tank Bottoms	_____	Gathering Line Water/Waste (Non-Injectable) _____
E&P Contaminated Soil	_____	INTERNAL USE ONLY
Gas Plant Waste	_____	Truck Washout (exempt waste) _____
		OTHER EXEMPT WASTES (type and generator product of the waste)
		<u>Waste</u> <u>11/1/2000</u>

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
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- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address Oil Field Services
Phone No. _____

Driver's Name Victor Hernandez
Phone No. _____
Truck No. 1138
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 11-27-24 DRIVER'S SIGNATURE VICTOR HERNANDEZ

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>151</u>
--	--------------------------	---------------------------------------

Site Name/Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orfa, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

Test	Inches	BS&W Received	BS&W (%)
1st Gauge	_____	_____	_____
2nd Gauge	_____	Free Water	_____
Received	_____	Total Received	_____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TIME _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 357997

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PD No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Water Based Muds, etc.), Non-Injectable Waters, and Other Exempt Wastes.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

Table for Tank Bottoms measurements: Feet, Inches, 1st Gauge, 2nd Gauge, Received.

Table for Tank Bottoms analysis: BS&W Received, Free Water, Total Received, BS&W (%).

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why?

(NAME (PRINT))

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Merch Bar*
Address:
Project Lead:

Greg Boone 575 688 3932

LOCATION OF MATERIAL:

Location: *ogden state 5A*
Company: *Murkison*

AP# 30-015-37264

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1	#2	#3
✓	✓	

DESCRIPTION OF WASTE:

Impacted Soil

Quantity: *15 yards*

Landfilled

FACILITY CONTACT:

Date: *10 30 24*

Contact Signature:
(Agent for Contractor)

Savage

NAME OF TRANSPORTER: (Driver)

Date: *10.30.24*

Driver Signature: *VICTOR MORGANO*

DISPOSAL SITE:

Name of Disposal:
Address:
Date:

10/30

Representative
Signature

M-38

E.D.



(PLEASE PRINT)

REQUIRED INFORMATION

Name Mike Smith

Phone No. _____

GENERATOR

NO. **357999**

Operator No. _____

Permit/RRC No. _____

Operators Name MURKINSON
Address _____

Lease/Well Name & No. Padon state 2010

County _____

City, State, Zip _____

API No. 24015 2724

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and quantity, percent of the total)	
Oil Based Cuttings _____			Washout Water (Non-Injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____			Produced Water (Non-Injectable) _____
Produced Formation Solids _____			Gathering Line Water/Waste (Non-Injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 1911 North 10th Street
Phone No. _____

Driver's Name Walter Alvarado
Phone No. _____
Truck No. 2034
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 10/30/24

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 10:15 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 101

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet	Inches
2nd Gauge		
Received		

BS&W Received	BS&W (%)
Free Water	
Total Received	

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. 357999

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PD No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and general oil process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided):
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Scott Gaudin

Phone No. _____

GENERATOR

NO. **359342**

Operator No. _____

Permit/RRC No. _____

Operators Name: Shannon Gaudin

Lease/Well Name & No. Shannon Gaudin

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and amount in words of the volume) <u>Oil based mud - 11-32</u>
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other: _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT. Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT. Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____

Driver's Name Victor Hernandez

Address MC NABO PARTNERS

Phone No. _____

Phone No. _____

Truck No. 1120

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 10-30-24 DRIVER'S SIGNATURE VICTOR HERNANDEZ

TRUCK TIME STAMP IN: <u>12:10</u> OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>T-27</u>
---	--------------------------	--

Site Name/Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO IF YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge				
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **359342**

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operators Name _____ Name & No. _____
 Address _____ County _____
 _____ API No. _____
 City, State, Zip _____ Rig Name & No. _____
 Phone No. _____ AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	(OTHER EXEMPT WASTES (type and generation process of the waste)) _____
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 _____ Truck No. _____
 Phone No. _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Oria, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro rontgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Foot	Inches	BS&W Received	BS&W (%)
1st Gauge	_____	_____	_____	_____
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: MURKINSON
Address:
Project Lead: GREG BOANE (575) 628-3932

LOCATION OF MATERIAL:

API: 30-015-37264

Location: OGDEN STATE SA
Company: MURKINSON

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

MSE

Load

DESCRIPTION OF WASTE:

Impacted Soil Cont.

Quantity:

18 yds

1

FACILITY CONTACT:

Date: 1 Nov 2024

Contact Signature: _____
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: 11-1-24

Driver Signature: *Josh Busby*

DISPOSAL SITE:

Name of Disposal: R360 - Orla

Address:

Date: 1 Nov 2024

Representative
Signature:

E.D.

Handwritten marks: a circled '10' and several vertical lines.



(PLEASE PRINT)

REQUIRED INFORMATION

Name: [Signature]
Phone No. _____

GENERATOR

NO. **360033**

Operator No. _____
Operators Name [Signature]
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Red Bluff - STF-065
County FW
API No. 50095-0124
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____
Oil Based Cuttings _____
Water Based Muds _____
Water Based Cuttings _____
Produced Formation Solids _____
Tank Bottoms _____
E&P Contaminated Soil _____
Gas Plant Waste _____

NON-INJECTABLE WATERS
Washout Water (Non-Injectable) _____
Completion Fluid/Flow Back (Non-Injectable) _____
Produced Water (Non-Injectable) _____
Gathering Line Water/Waste (Non-Injectable) _____
INTERNAL USE ONLY
Truck Washout (exempt waste) _____

OTHER EXEMPT WASTES (type and generation process of the waste)

Dump

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged; and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name [Signature]
Address _____
Phone No. _____

Driver's Name [Signature]
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE 1/1/21 DRIVER'S SIGNATURE [Signature] DELIVERY DATE 1/1/21 DRIVER'S SIGNATURE [Signature]

TRUCK TIME STAMP

IN: 11:28 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. [Signature]

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) **YES** NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

Foot Inches

1st Gauge		
2nd Gauge		
Received		

BS&W Received	BS&W (%)
Free Water	
Total Received	

I hereby certify that the above load material has been (circle one) **ACCEPTED** DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION* Name _____ Phone No. _____

GENERATOR

NO. 360033

Operator No. _____ Permit/RRC No. _____
Operators Name _____ Lease/Well _____
Address _____ Name & No. _____
County _____
City, State, Zip _____ API No. _____
Phone No. _____ Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (type and generation process of the waste)	_____
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____		
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____		
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____		
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	_____		
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____		
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
Address _____ Phone No. _____
Phone No. _____ Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

DATE (MM/DD) _____ DAY _____ TITLE _____ SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *MURKIN*

Address:

Project Lead: *GREG BOANE (575) 628-3132*

LOCATION OF MATERIAL:

API: 30-015-37264

Location: *OGDEN STATE SA*

Company: *MURKIN*

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Cont

Quantity:

15

FACILITY CONTACT:

Date: *1 Nov 2024*

Contact Signature:
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date

11-1-24

Driver Signature

Ron Hennessy

DISPOSAL SITE:

Name of Disposal: *R 360 - 1rLa*

Address:

Date:

Nov. 1

Representative
Signature:

E.D



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Eric
Phone No: 800-451-9411

GENERATOR

NO. **359345**

Operator No. _____
Operators Name Red Bluff Well
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. 2023-10-14-19A
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and amount in parentheses of the waste)	
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____	<u>Dump</u>
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____		Produced Water (Non-Injectable) _____	
Produced Formation Solids _____		Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Medwest Logistics
Address _____
Phone No. _____

Driver's Name Eric Hernandez
Phone No. _____
Truck No. 1022
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 2:00 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 101

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orfa, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name _____

Phone No. _____

GENERATOR

NO. **359345**

Operator No. _____
Operator's Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of this waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	DAP
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENT SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES ND

If YES, was reading > 50 micro mentsgents? (Circle One) YES ND

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: MURKINSON
Address:
Project Lead: GREG BOANE (575) 628-3932

LOCATION OF MATERIAL:

API: 30-015-37264

Location: OGDEN STATE SA
Company: MURKINSON

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

Dump Truck 1 load
m-36

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Cont

Quantity: 18 yd

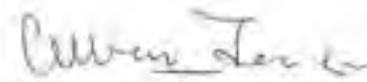
FACILITY CONTACT:

Date: 1 Nov 2024

Contact Signature: 
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: 11-1-2024

Driver Signature: 
Rihard Lopez

DISPOSAL SITE:

Name of Disposal: R360 - Orla
Address:
Date: 1 Nov 2024

Representative
Signature: 





(PLEASE PRINT)

REQUIRED INFORMATION

Name: John B. ...

Phone No: ...

GENERATOR

NO. **356914**

Operator No. _____
Operators Name H. ...
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Quadrant ...
County _____
API No. ...
Rig Name & No. _____
AFE/PQ No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (include and generate product of the waste) <u>Dumplings</u>	
Oil Based Cuttings _____			Washout Water (Non-Injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____			Produced Water (Non-Injectable) _____
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____		
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McNabb Partners
Address 1500 W. ...
Phone No. ...

Driver's Name _____
Phone No. ...
Truck No. ...
WHP No. ...

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 11-23-24

DRIVER'S SIGNATURE ...

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. ...

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Oria, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge		
2nd Gauge		
Received		

BS&W Received	BS&W (%)
Free Water	
Total Received	

I hereby certify that the above load material has been (circle one):

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **356914**

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable) _____	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Muds _____		Produced Water (Non-Injectable) _____	
Water Based Cuttings _____		Gathering Line Water/Waste (Non-Injectable) _____	
Produced Formation Solids _____			
Tank Bottoms _____	INTERNAL USE ONLY	Truck Washout (exempt waste) _____	
E&P Contaminated Soil _____			
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certificates on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No _____
WHP No _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge				
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: MURCHISON
Address:
Project Lead: GREG (575) 628-3932

LOCATION OF MATERIAL:

AIR: 30-015-37264

Location: OGDEN STATE SA
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

#1			
✓			

DESCRIPTION OF WASTE:

Impacted Soil Cont Quantity: 15 yrd

FACILITY CONTACT:

Date: 1 Nov 2024

Contact Signature:
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: 11-1-24

Driver Signature: VICTOR MANZANO

DISPOSAL SITE:

M36

Name of Disposal: R 360 - Oris

Address:

Date: 1 Nov 2024

Representative
Signature



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **359341**

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____
Oil Based Cuttings _____
Water Based Muds _____
Water Based Cuttings _____
Produced Formation Solids _____
Tank Bottoms _____
E&P Contaminated Soil _____
Gas Plant Waste _____

NON-INJECTABLE WATERS
Washout Water (Non-Injectable) _____
Completion Fluid/Flow Back (Non-Injectable) _____
Produced Water (Non-Injectable) _____
Gathering Line Water/Waste (Non-Injectable) _____
INTERNAL USE ONLY
Truck Washout (exempt waste) _____

OTHER EXEMPT WASTES (type and generator priority of the wastes)

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and fit below threshold limits for toxicity (TCPL), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge		
2nd Gauge		
Received		

BS&W Received		BS&W (%)	
Free Water			
Total Received			

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murochem*
Address:
Project Lead: *Craig Boone 575-628-3932*

LOCATION OF MATERIAL:

API: 30-015-37264

Location: *Ogden State SA*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

*1 loaded
2 load
~~3 load~~*

DESCRIPTION OF WASTE:

Impacted Soil Quantity:
Contaminated 15

FACILITY CONTACT:

Date: *1-15-25* Contact Signature: *Pligin Mad...*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver) *Ruben Bustillos #37 dump truck*

Date: *1-15-25* Driver Signature: *[Signature]*

DISPOSAL SITE:

Name of Disposal:
Address:
Date: *1/15/25*

Representative Signature: *[Signature]*



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREY BOANE
 AFE #:
 PO #:
 Manifest #: HW-727800
 Manif. Date: 1/15/2025
 Hauler: MCNABB PARTNERS
 Driver: RUBEN
 Truck #: M37
 Card #
 Job Ref #

Ticket #: 700-1675310
 Bid #: O6UJ9A000K09
 Date: 1/15/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity	Units
Contaminated Soil (RCRA Exempt)	15.00	yards

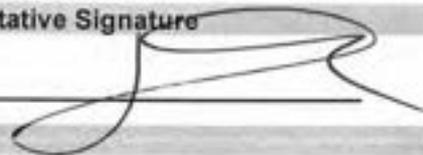
Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):
- MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

_____ 

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name LOREY WATKINS

Phone No. 505-251-2121

GENERATOR

NO. **HW-727800**

Generator Manifest # _____
Generator Name Murphy
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. DEFEU STATE 05A
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards):			
Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste) YES _____ NO _____	QUANTITY _____ TOP SOIL _____ CALICHE _____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold levels for toxicity (TCLP), ignitability, corrosivity and reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS L - LQUID Y - YARDS 15 E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360). Accepts certifications on a per load basis only.
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form).

(PRINT) AUTHORIZED AGENT SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name M. Murphy
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Rose B...
Print Name _____
Phone No. _____
Truck No. 2130

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 1-25-25 DRIVER SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>11</u>
--	--------------------------	--------------------------------------

Site Name/ Permit No. Halfway Facility / NM1-006 Phone No. 575-392-6368
Address 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220
NORM READINGS TAKEN? (Circle One) YES _____ NO _____ If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____
PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO _____

TANK BOTTOMS

	Feet	Inches	BS&W/BIBLS Received	BS&W (%)
1st Gauge	_____	_____	_____	_____
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one) ACCEPTED _____ DENIED _____ If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: RE

Phone No.

GENERATOR

NO. HW- 727800

Generator Manifest #
Generator Name
Address
City, State, Zip
Phone No.

Location of Origin
Lease/Well
Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

Table with columns for EXEMPT E&P Waste/Service Identification and Amount, NON-INJECTABLE WATERS, OTHER EXEMPT E&P WASTE STREAMS, INTERNAL USE ONLY, and TOP SOIL & CALICHE SALES.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES
NON EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity.

DISPOSAL QUANTITY: B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

- RCRA EXEMPT
RCRA NON-EXEMPT
EMERGENCY NON-OILFIELD
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.
Transporter Ticket #

Driver's Name
Print Name
Phone No.
Truck No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

Table with columns: TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name/No.)

Site Name/ Permit No. Address
Halfway Facility / NM1-006
6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220
Phone No. 575-392-6368
NORM READINGS, TAKEN? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO

TANK BOTTOMS

Table with columns: Feet, Inches, BS&W/BBLs Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why?

(PRINT) NAME DATE FILE SIGNATURE



(PLEASE PRINT)

REQUIRED INFORMATION

Name _____

Phone No. _____

GENERATOR

NO. **HW-727798**

Generator Manifest # Murchison Oil Rig

Location of Origin _____

Generator Name Murchison

Name & No. Dodge State-504

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS:	_____	OTHER EXEMPT E&P WASTE STREAMS	_____
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____		
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____		
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____		
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____		
Tank Bottoms	_____	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES	
E&P Contaminated Soil	<u>2</u>	Truck Washout (exempt waste)	YES _____ NO _____	QUANTITY	TOP SOIL _____ CALICHE _____
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS 15 E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations: 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Mr. Willie S. ...

Driver's Name Robert ...

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 14

Site Name/ Permit No. Halfway Facility / NM1-006

Phone No. 575-392-6368

Address 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES _____ NO (X)

If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO (X)

PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO (X)

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____
2nd Gauge	_____	_____
Received	_____	_____

BS&W/BBLS Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) **ACCEPTED** **DENIED** If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW- 727798

Generator Manifest #, Generator Name, Address, City, State, Zip, Phone No., Location of Origin, Name & No., County, API No., Rig Name & No., AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Cuttings, etc.), NON-INJECTABLE WATERS, INTERNAL USE ONLY, and OTHER EXEMPT E&P WASTE STREAMS.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TECLP), ignitability, corrosivity and reactivity.

Non-Exempt Other: *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s) is/are not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

RCRA EXEMPT, RCRA NON-EXEMPT, EMERGENCY NON-OILFIELD, MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Transporter Ticket #, Driver's Name, Print Name, Phone No., Truck No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN, OUT, Name/No.

Site Name/ Permit No., Address, Halfway Facility / NM1-006, 6601 Hebbes Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220, Phone No. 575-392-6368

NORM READINGS TAKEN?, PASS THE PAINT FILTER TEST?, YES, NO

TANK BOTTOMS

Table for Tank Bottoms with columns for Feet, Inches, BS&W/BBLS Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been found and ACCEPTED, DENIED, If denied, why?

NAME (PRINT)

DATE

DATE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boane 575-628-3952*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

Load 1

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *18 yards*
11/30

FACILITY CONTACT:

Date: *1-16-25* Contact Signature: *Felix Medina*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-16-25* Driver Signature: *Joel Van Buren*

DISPOSAL SITE:

Name of Disposal: *R 360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1-16-25* *Orla 7279719* Representative
Signature: 



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: HW-722064
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: JOEL
 Truck #: M30
 Card #
 Job Ref #

Ticket #: 700-1675946
 Bid #: O6UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity	Units
Contaminated Soil (RCRA Exempt)	18.00	yards

Generator Certification Statement of Waste Status

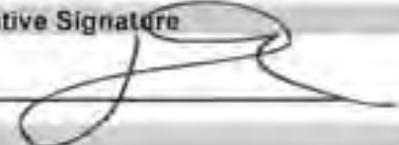
I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste

RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):

MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature _____

R360 Representative Signature 

Customer Approval _____

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name

Phone No.

GENERATOR

NO. HW-722064

Generator Manifest #

Location of Origin

Generator Name

Lease/Well

Address

Name & No.

City, State, Zip

County

Phone No.

API No.

Rig Name & No.

AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Water Based Cuttings, etc.), Non-Injectable Waters, and Other Exempt E&P Waste Streams.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

Non-Exempt Other *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

- RCRA EXEMPT, RCRA NON-EXEMPT, EMERGENCY NON-OILFIELD, MSDS information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name

Driver's Name

Address

Print Name

Phone No.

Phone No.

Transporter Ticket #

Truck No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT:

Name/No.

Site Name/ Permit No. Halfway Facility / NM1-006

Phone No. 575-392-6368

Address 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlisbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO

TANK BOTTOMS

Table for Tank Bottoms with columns for Gauge (1st, 2nd), Received, Feet, Inches, BS&W/BBLS Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW- 722064**

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well _____

Address _____

Name & No. _____

City, State, Zip _____

County _____

Phone No. _____

API No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS: Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT E&P WASTE STREAMS				
Oil Based Cuttings _____						
Water Based Muds _____						
Water Based Cuttings _____						
Produced Formation Solids _____						
Tank Bottoms _____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES				
E&P Contaminated Soil _____		Truck Washout (exempt waste)	YES	NO	QUANTITY	TOP SOIL
Gas Plant Waste _____						

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (ECLPT, Ignitability, Corrosivity and Reactivity).

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That such waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. Address: **Halfway Facility / NM1-006**
6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

Phone No. **575-392-6368**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W/BBLS Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-722064**

Generator Manifest # _____
 Generator Name _____
 Address _____
 City, State, Zip _____
 Phone No. _____

Location of Origin _____
 Lease/Well Name & No. _____
 County _____
 API No. _____
 Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT E&P WASTE STREAMS				
Oil Based Cuttings _____						
Water Based Muds _____						
Water Based Cuttings _____						
Produced Formation Solids _____						
Tank Bottoms _____	INTERNAL USE ONLY Truck Washout (exempt waste) YES _____ NO _____	TOP SOIL & CALICHE SALES		QUANTITY _____	TOP SOIL _____	CALICHE _____
E&P Contaminated Soil _____						
Gas Plant Waste _____						
WASTE GENERATION PROCESS: <input type="checkbox"/> DRILLING <input type="checkbox"/> COMPLETION <input type="checkbox"/> PRODUCTION <input type="checkbox"/> GATHERING LINES						

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
 Address _____
 Phone No. _____
 Transporter Ticket # _____

Driver's Name _____
 Print Name _____
 Phone No. _____
 Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below:

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN _____ OUT _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006**
 Address **6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

Phone No. **575-392-6368**

NORM READINGS TAKEN? (Circle One) YES _____ NO _____ If YES, was reading > 50 micro rontgenis? (Circle One) YES _____ NO _____
 PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO _____

TANK BOTTOMS

1st Gauge _____	Feet _____	inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **343345**

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease/Well _____
 Address _____ Name & No. _____
 _____ County _____
 _____ API No. _____
 City, State, Zip _____ Rig Name & No. _____
 Phone No. _____ AFE/PD No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Mud	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings	_____		
Water Based Mud	_____	Washout Water (Non-Injectable)	_____
Water Based Cuttings	_____	Completion Fluid/Flow Back (Non-Injectable)	_____
Produced Formation Solids	_____	Produced Water (Non-Injectable)	_____
Tank Bottoms	_____	Gathering Line Water/Waste (Non-Injectable)	_____
E&P Contaminated Soil	_____	INTERNAL USE ONLY	
Gas Plant Waste	_____	Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold levels for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 _____ Truck No. _____
 Phone No. _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____

DISPOSAL FACILITY Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Foot _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____	_____	_____
Received	_____	_____	Total Received	_____	_____	_____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 343345

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operators Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
----------	-----------	---------	--------

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site (listed above) and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Company Name

Phone No

GENERATOR

NO. 343346

Operator No.
Operators Name
Address
City, State, Zip
Phone No.

Permit/RRC No.
Lease/Well Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Water Based Muds, etc.), Non-Injectable Waters, and Other Exempt Wastes.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

Non-Exempt Other: *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law...

- RCRA EXEMPT
RCRA NON-EXEMPT
MSDS information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.

Driver's Name
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: OUT:

DISPOSAL FACILITY

RECEIVING AREA

Name/No.

Site Name/ Permit No.
Address: Red Bluff Facility / STF-065
5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

Table for Tank Bottoms with columns for Foot, Inches, BS&W Received, Free Water, Total Received, and BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 343346

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS:	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC/PI), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
----------	-----------	---------	--------

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (H360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHIP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

if YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

Feet

Inches

1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Company: IR360

Name: IR360

Phone No.:

GENERATOR

NO. 343348

Operator No. _____
Operators Name Murphy
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Red Bluff
County Orange
API No. 42032000000000000000
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WASTES	Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT WASTES (type and quantity per unit of the waste) <u>None</u>
Oil Based Cuttings	_____			
Water Based Muds	_____			
Water Based Cuttings	_____			
Produced Formation Solids	_____			
Tank Bottoms	_____			
E&P Contaminated Soil	_____			
Gas Plant Waste	_____			
		INTERNAL USE ONLY	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP) applicability. Comply with Hierarchy.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (IR360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name IR360
Address _____
Phone No. _____

Driver's Name John
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. IR360

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 343348

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operators Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 _____ WH# No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP: IN: _____ OUT: _____

DISPOSAL FACILITY RECEIVING AREA: Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro mentgents? (Circle One) YES NO
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Grey Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

*Dump Truck
m-31*

*1 load
2 load TX
3 load
Load 1 NM*

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *18*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elijio Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-16-25*

Driver Signature: *Alfonso Terceiro*

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25 Orla TX 79719*

Representative
Signature:





Permian Basin

Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: HW-730131
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: ALVARO
 Truck #: M31
 Card #:
 Job Ref #:

Ticket #: 700-1675992
 Bid #: O6UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Facility: CRI

Product / Service

Quantity Units

Contaminated Soil (RCRA Exempt)

18.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):
- MSDS Information
- RCRA Hazardous Waste Analysis
- Process Knowledge
- Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



NM MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: 130000

Phone No. _____

GENERATOR

NO. **HW-730131**

Generator Manifest # _____

Location of Origin _____

Generator Name MURKIN

Lease/Well Name & No. QUAD STATE 511

Address _____

County _____

City, State, Zip _____

API No. 33-015-57114

Phone No. _____

Rig Name & No. _____

A/E/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS
Oil Based Cuttings	Washout Water (Non-Injectable)	<u>Dump Truck 1/2</u>
Water Based Muds	Completion Fluid/Flow Back (Non-Injectable)	
Water Based Cuttings	Produced Water (Non-Injectable)	
Produced Formation Solids	Gathering Line Water/Waste (Non-Injectable)	
Tank Bottoms	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES
E&P Contaminated Soil	Truck Washout (exempt waste)	YES NO QUANTITY TOP SOIL CALICHE
Gas Plant Waste		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS L - LIQUID 18 Y - YARDS E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Mile High Partners
Address 1600 W. Fort Worth Blvd
Phone No. 817-307-0000
Transporter Ticket # _____

Driver's Name _____
Print Name _____
Phone No. 817-307-3517
Truck No. 103

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 2/11/2025 DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>14</u>
--	-------------------	--------------------------------------

Site Name/Permit No. Halfway Facility / NM1-006 Phone No. 575-392-6368
Address 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-730131**

Generator Manifest # _____
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PD No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)							
Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS				
Oil Based Cuttings	_____						
Water Based Muds	_____						
Water Based Cuttings	_____						
Produced Formation Solids	_____						
Tank Bottoms	_____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES				
E&P Contaminated Soil	_____						
Gas Plant Waste	_____						
		Truck Washout (exempt waste)	YES	NO	QUANTITY	TOP SOIL	CALICHE

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity.
Non-Exempt Other _____ *please select from **Non-Exempt Waste List on back**

DISPOSAL QUANTITY: B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

PRINTED AUTHORIZED AGENT'S SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name _____
Print Name _____
Phone No. _____
Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE RECEIPT'S SIGNATURE

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006** Phone No. **575-392-6368**
Address **5601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

	Feet	Inches	BS&W/BBLs Received	BS&W (%)
1st Gauge	_____	_____	_____	_____
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TITLE SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

PLEASE PRINT REQUIRED INFORMATION

Handwritten notes: "Candy Mail Company", "RB 369879", "1000 Clay Blvd", "Dallas TX 75201"

Generator Information:

Operator No. _____

Operators Name: MURKIN

Address: _____

City, State, Zip: _____

Phone No.: _____

Permit/RRC No.: RB 369879

Lease/Well Name & No.: _____

County: _____

API No.: 30-015-57240

Rig Name & No.: _____

AFE/PO No.: _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generator process of the waste) <u>Dump Truck</u>	
Oil Based Cuttings _____			Washout Water (Non-Injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____			Produced Water (Non-Injectable) _____
Produced Formation Solids _____			Gathering Line Water/Waste (Non-Injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY		
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other: _____

**please select from Non-Exempt Waste List on back*

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

Transporter Information:

Transporter's Name: 1111 W. 16th St

Address: 1500 W. 16th St

Phone No.: 972-251-1111

Driver's Name: John Doe

Phone No.: 972-251-1111

Truck No.: 1111

WHP No.: _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE: _____ DRIVER'S SIGNATURE: _____ DELIVERY DATE: _____ DRIVER'S SIGNATURE: _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

Name/No.: _____

RECEIVING AREA

Name/No.: _____

Site Name/Permit No.: Red Bluff Facility / STF-065

Address: 5053 US Hwy 285, Orla, TX 79770

Phone No.: 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) Yes No

NORM (mR/hr): _____

TANK BOTTOMS

Foot _____ Inches _____

sl Gauge _____

BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

Operator No. _____

Permit/RRC No. **RB 369879**

Operator's Name _____

Lease/Well _____

Address _____

Name & No. _____

City, State, Zip _____

County _____

Phone No. _____

API No. _____

Rig Name & No. _____

AFE/PO No. _____

Oil Based Muds _____

NON-INJECTABLE WATERS

Oil Based Cuttings _____

Washout Water (Non-Injectable) _____

Water Based Muds _____

Completion Fluid/Flow Back (Non-Injectable) _____

Water Based Cuttings _____

Produced Formation Solids _____

Produced Water (Non-Injectable) _____

Tank Bottoms _____

Gathering Line Water/Waste (Non-Injectable) _____

E&P Contaminated Soil _____

INTERNAL USE ONLY

Gas Plant Waste _____

Truck Washout (exempt waste) _____

OTHER EXEMPT WASTES (type and generation process of the waste)
Dump Truck

WASTE GENERATION PROCESS DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____

*please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT:

Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT:

Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information

RCRA Hazardous Waste Analysis

Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Phone No. _____

Phone No. _____

Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/

Red Bluff Facility / STF-065

Phone No. _____

432-448-4239

Permit No.

Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

Feet _____

Inches _____

1st Gauge _____

BS&W Received _____

BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

White - ORIGINAL

Blue - TRANSPORTER

Yellow - GENERATOR

Version 1
306.030-5100



WASTE FORM REQUIRED WITH MANIFEST

Topography
Sally Beal
75-22-3183

GENERATOR	
Operator No. _____	Permit/RRC No. RB 36988U
Operator's Name <u>M. Cochran</u>	Lease/Well <u>30-15-37244-514</u>
Address _____	Name & No. _____
City, State, Zip _____	County _____
Phone No. _____	API No. <u>30-15-37244</u>
	Rig Name & No. _____
	AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and percentage percent of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>Empty Truck</u>
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations: 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER	
Transporter's Name <u>Medwest Petroleum</u>	Driver's Name <u>Allen Henderson</u>
Address <u>15000 Parkridge Drive</u>	Phone No. <u>575-241-3517</u>
Phone No. <u>575-241-3517</u>	Truck No. <u>27-32</u>
	WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
Site Name/Permit No. Red Bluff Facility / STF-065	Phone No. 432-448-4239	
Address 5053 US Hwy 285, Orla, TX 79770		
NORM READINGS TAKEN? (Circle One) YES NO	If YES, was reading > 50 micro roentgens? (Circle One) Yes No	
	NORM (mR/hr) _____	

TANK BOTTOMS			
1st Gauge	Foot _____	Inches _____	
	BS&W Received _____	BS&W (%) _____	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Handwritten] Phone No: [Handwritten]

GENERATOR section with fields for Operator No., Name, Address, City, State, Zip, Phone No., Permit/IRRC No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No. Includes handwritten 'RB 369880'.

Table with columns for waste types: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES. Includes handwritten 'Dump Truck'.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity. Non-Exempt Other: [] please select from Non-Exempt Waste List on back

QUANTITY B BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- [] RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
[] RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non hazardous is attached. (Check the appropriate items as provided)
[] MSDS Information [] RCRA Hazardous Waste Analysis [] Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME DATE SIGNATURE

TRANSPORTER section with fields for Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHIP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVERS SIGNATURE DELIVERY DATE DRIVERS SIGNATURE

TRUCK TIME STAMP IN: OUT: DISPOSAL FACILITY RECEIVING AREA Name/No.

Site Name/ Permit No. Address: Red Bluff Facility / STF-065 5053 US Hwy 285, Orla, TX 79770 Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS section with fields for 1st Gauge (Feet, Inches), BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Handwritten] Phone No. [Handwritten]

GENERATOR

Operator No. [Blank]
Operators Name [Handwritten]
Address [Handwritten]
City, State, Zip [Handwritten]
Phone No. [Handwritten]

Permit/RRC No. RB 368505
Lease Well Name & No. [Handwritten]
County [Handwritten]
API No. [Handwritten]
Rig Name & No. [Handwritten]
AFE/PO No. [Handwritten]

Table with columns for waste types: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste. Includes sub-sections for NON-INJECTABLE WATERS and INTERNAL USE ONLY.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations...
MSDS information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME, DATE, SIGNATURE

TRANSPORTER

Transporter's Name [Handwritten]
Address [Handwritten]
Phone No. [Handwritten]

Driver's Name [Handwritten]
Phone No. [Handwritten]
Truck No. [Handwritten]
WHIP No. [Handwritten]

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE, DRIVER'S SIGNATURE, DELIVERY DATE, DRIVER'S SIGNATURE

Table with columns: TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770
Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge: Feet, Inches
BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT), DATE, TITLE, SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Grey Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

Load 1

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15*

FACILITY CONTACT:

Date: *1.16.25* Contact Signature: *Elijio Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: Driver Signature: *Victoria Herrera 1135*

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25 Orla TX 79719*

Representative
Signature:





(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. 335883

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operators Name Maudison Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (name and generation process of the waste)
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____
Water Based Cuttings _____		Produced Water (Non-Injectable) _____
Produced Formation Solids _____		Gathering Line Water/Waxes (Non-Injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY	<u>Dump Truck</u>
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS 15 E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

 (PRINT) AUTHORIZED AGENT'S SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name Mudwin Brothers Driver's Name Volusia Hecker
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: 7:11 OUT: _____

DISPOSAL FACILITY RECEIVING AREA Name/No. T-4

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
 Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
 NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge				
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

 NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 335883

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No _____

Permit/BRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (list and specify amounts of the waste)
Oil Based Cuttings	_____	Washout Water (Non-injectable)	_____	
Water Based Muds	_____	Completion Fluid/Flow Back (Non-injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY		
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT. Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT. Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) ACCEPTED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	--------------------------	----------------------------------

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro röntgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 336570

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well _____
Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (trace and/or injection process of the well)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHIP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orfa, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____	2nd Gauge _____	Received _____	BS&W Received _____	Free Water _____	Total Received _____	BS&W (%) _____
-----------------	-----------------	----------------	---------------------	------------------	----------------------	----------------

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 336570

Operator No. _____

Permit/RRC No. _____
Lease/Well _____

Operator's Name _____

Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Phone No. _____

Phone No. _____

Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

DEPARTURE DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/
Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. 409-393-3939

GENERATOR

NO. 335885

Operator No. _____
Operators Name Murphyson
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Lease - 1015-511
County _____
API No. 30-0115-35210
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable)	_____	OTHER EXEMPT WASTES (use list of generation process of the waste)
Oil Based Cuttings	_____		Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Muds	_____		Produced Water (Non-Injectable)	_____	
Water Based Cuttings	_____		Gathering Line Water/Waste (Non-Injectable)	_____	
Produced Formation Solids	_____		INTERNAL USE ONLY	_____	
Tank Bottoms	_____	Truck Washout (exempt waste)	_____		
E&P Contaminated Soil	_____				
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS _____ Y-YARDS 175 E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT. Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT. Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Matthews Partners
Address _____
Phone No. _____

Driver's Name Victor Hernandez
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named wagon(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 08 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. T-1

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

IF YES, was reading > 50-micro roemigrants? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

(NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 335885

Operator No. _____
Operator's Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Track Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity with Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge		
2nd Gauge		
Received		

BS&W Received		BS&W (%)	
Free Water			
Total Received			

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



Permian Basin

Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: HW-721715
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: VICTORIA
 Truck #: M35
 Card #
 Job Ref #

Ticket #: 700-1675956
 Bid #: 06UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37284
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Facility: CRI

Product / Service

Quantity Units

Contaminated Soil (RCRA Exempt)

15.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Process Knowledge
 - Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: _____

Phone No: 30-43

GENERATOR

NO. **HW-721715**

Generator Manifest # _____

Location of Origin _____

Generator Name Murphy Oil

Lease/Well _____

Address _____

Name & No. Dolan State Oil

City, State, Zip _____

County _____

Phone No. _____

API No. 20-01-5704

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS:		OTHER EXEMPT E&P WASTE STREAMS	
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	<u>Dump Truck</u>	
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____		
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____		
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____		
Tank Bottoms	_____	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES	
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	YES _____ NO _____	QUANTITY	TOP SOIL CALICHE
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), irritability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS 15 E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McAuley Transport

Driver's Name Victoria Medina

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 1155

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below:

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 1155

Site Name/ Permit No. Halfway Facility / NM1-006

Phone No. 575-392-6368

Address 6601 Hobbs Hwy US 62 / 100 Mile Marker 66 Carlsbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES _____ NO _____

If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____

PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO _____

TANK BOTTOMS

1st Gauge	Foot _____	Inches _____	BS&W/BBLS Received	_____	BS&W (%)	_____
2nd Gauge	Foot _____	Inches _____	Free Water	_____		
Received	Foot _____	Inches _____	Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED _____ DENIED _____ If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-721715**

Generator Manifest # _____
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Lease/Well _____
Name & No. _____
County _____
APT No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS		OTHER EXEMPT E&P WASTE STREAMS	
Oil Based Cuttings	Washout Water (Non-Injectable)	_____		
Water Based Muds	Completion Fluid/Flow Back (Non-Injectable)	_____		
Water Based Cuttings	Produced Water (Non-Injectable)	_____		
Produced Formation Solids	Gathering Line Water/Waste (Non-Injectable)	_____		
Tank Bottoms	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES	
E&P Contaminated Soil	Truck Washout (exempt waste)	YES _____ NO _____	QUANTITY	TOP SOIL
Gas Plant Waste				CALICHE

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name _____
Print Name _____
Phone No. _____
Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006**
Address **6681 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

Phone No. **575-392-6368**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Foot	_____	_____	BS&W/EBLS Received	_____	BS&W (%)	_____
2nd Gauge	Foot	_____	_____	Free Water	_____		
Received				Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

*1 load
2 load
3 load
4 load*

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elijio Mediano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver) *Ruben Bustillos* *M37 dump truck*

Date: *1-16-2025*

Driver Signature: 

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*

Address: *5053 US Hwy 285*

Date: *1.16.25* *Orla TX 79719*

Representative
Signature:





NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Eric P...

Phone No. 505-528-7172

GENERATOR

NO. **AD-0025340**

Generator Manifest # _____
Generator Name Murphy
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Padon State SA
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS	
Oil Based Cuttings	Washout Water (Non-Injectable)		
Water Based Muds	Completion Fluid/Flow Back (Non-Injectable)		
Water Based Cuttings	Produced Water (Non-Injectable)		
Produced Formation Solids	Gathering Line Water/Waste (Non-Injectable)		
Tank Bottoms	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES	
E&P Contaminated Soil	Truck Washout (exempt waste)	YES	NO
Gas Plant Waste		QUANTITY	TOP SOIL CALICHE

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 15 E - EACH

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Mr. Doble
Address ...
Phone No. _____
Transporter Ticket # _____

Driver's Name Richard Best
Print Name _____
Phone No. _____
Truck No. 2132

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 14

Site Name/Permit No. Antelope Draw Facility / NM1-66
Address 476 Battle Axe Rd., Jal, NM 88252

Phone No. 575-236-1734

NORM READINGS TAKEN? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

ACCEPTED

DENIED

If denied, why?



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Scott Brown

Phone No. 504-222-1234

GENERATOR

RB 368469

Operator No. _____
Operators Name Murphy
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease Well Name & No. Darton state 05A
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY 8-BARRELS 15 -Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Shuttleworth Brothers
Address 11024
Phone No. _____

Driver's Name Robert J. Shuttleworth
Phone No. _____
Truck No. 11024
WhP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name No. _____

Site Name/
Permit No.
Address

Red Bluff Facility / STF-065
5053 US Hwy 285, Orla, TX 79770

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
-----------	------------	--------------	---------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368469

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease/Well _____
 Address _____ Name & No. _____
 City, State, Zip _____ County _____
 Phone No. _____ API No. _____
 RIG Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Oilier _____ *please select from Non-Exempt Waste List on back

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
----------	-----------	---------	--------

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
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- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr)

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____
 BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Eric R...

Phone No. 937-612-1234

GENERATOR

RB 368467

Operator No. _____ Permit/RRC No. _____
 Operators Name Murphy Lease Well _____
 Address _____ Name & No. Dynex 57072-95A
 City, State, Zip _____ County _____
 Phone No. _____ API No. _____
 _____ Rig Name & No. _____
 _____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generator process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Shy Holdings, LLC Driver's Name Robert R...
 Address 1234 Main St Phone No. _____
 Phone No. _____ Truck No. _____
 _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY Name/No. _____	RECEIVING AREA
--	-------------------------------------	----------------

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
 Address 5053 US Hwy 285, Orla, TX 79770
 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge Feet _____ Inches _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368467

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease/Well _____
 Address _____ Name & No. _____
 County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (Type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

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 MSDS information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	-------------------	----------------------------------

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr)

TANK BOTTOMS

Foot _____ Inches _____
 1st Gauge _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

Operator No. _____ Permit/RRC No. **RB 368466**

Operator's Name _____ Lease/Well _____

Address _____ Name & No. _____

City, State, Zip _____ County _____

Phone No. _____ API No. _____

_____ Rig Name & No. _____

_____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Acceptance certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261; subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____

Address _____ Phone No. _____

Phone No. _____ Truck No. _____

_____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: <u>10:5</u> OUT: _____	DISPOSAL FACILITY	RECEIVING AREA
	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address: **5053 US Hwy 285, Orta, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
-----------	------------	--------------	---------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368466

Operator No. _____ Permit/RRC No. _____
 Lease Well _____
 Operator's Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS _____	OTHER EXEMPT WASTES (How and generation process of the waste) _____
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY _____	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back.

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
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I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate item as provided)
- MSDS information
- RCRA Hazardous Waste Analysis
- Other (Provides Description Below)

 (PRINT) AUTHORIZED AGENT'S NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	-------------------	----------------------------------

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**
 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro rperigents? (Circle One) Yes No
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
-----------	------------	--------------	---------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

 NAME (PRINT) DATE TITLE SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Marchison*
Address:
Project Lead: *Greg Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

<i>11</i>	<i>12</i>	<i>13</i>	<i>14</i>
✓	✓	✓	✓

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15 Yards*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elijah Medeiros*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1/16/25*

Driver Signature: *VICTOR MANZANO*

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*

Address: *5053 US Hwy 285*

Date: *1.16.25* *Orla TX 79719*

Representative
Signature:

E.D.



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: AD-0025339
 Manif. Date: 1/16/2025
 Hauler: MCNABB SERVICES, INC.
 Driver: VICTOR
 Truck #: M38
 Card #
 Job Ref #

Ticket #: 700-1675958
 Bid #: O6UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity	Units
Contaminated Soil (RCRA Exempt)	15.00	yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

RCRA Exempt: Oil Field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste

RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items)

MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature _____

R360 Representative Signature 

Customer Approval _____

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Energy Center

Phone No. 505 238 22

GENERATOR

NO. **AD-0025339**

Generator Manifest # _____
Generator Name Murchison
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Olden State 3A
County _____
API No. 30-015-51264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS		
Oil Based Cuttings		Washout Water (Non-Injectable)	<u>bound</u> <u>triple 38</u>	
Water Based Muds		Completion Fluid/Flow Back (Non-Injectable)		
Water Based Cuttings		Produced Water (Non-Injectable)		
Produced Formation Solids		Gathering Line Water/Waste (Non-Injectable)		
Tank Bottoms	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES		
E&P Contaminated Soil		Truck Washout (exempt waste)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Gas Plant Waste		QUANTITY	TOP SOIL	CALICHE

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS L - LIQUID 15 Y - YARDS E - EADI

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address 1111 N. 1st St. Albuquerque
Phone No. _____
Transporter Ticket # _____

Driver's Name Walter Hernandez
Print Name _____
Phone No. _____
Truck No. 230

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE 1-16-25

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 14

Site Name/Permit No. Antelope Draw Facility / NM1-66
Address 476 Battle Axe Rd., Jal, NM 88252

Phone No. 575-236-1734

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above listed material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. AD-0025339

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS				
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____				
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____				
Water Based Cuttings _____		Produced Water (Non-Injectable) _____				
Produced Formation Solids _____		Gathering Line Water/Waste (Non-Injectable) _____				
Tank Bottoms _____	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES			
E&P Contaminated Soil _____	Truck Washout (exempt waste)	YES _____	NO _____	QUANTITY _____	TOP SOIL _____	CALICHE _____
Gas Plant Waste _____						

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. Antelope Draw Facility / NM1-66

Phone No. 575-236-1734

Address 476 Battle Axe Rd., Jal, NM 88252

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W/BBLS Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 348387

Operator No. _____
Operators Name M. J. [unclear]
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Exxon White 5 A
County _____
API No. 30-010-51264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and quantity unless of the waste): <u>Sludge</u> <u>Tank - 1138</u>
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address 2110 Webb Postoffice
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHF No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 1-16-25 DRIVER'S SIGNATURE [Signature]

TRUCK TIME STAMP

IN: 10:46 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orfa, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/yr) _____

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 349387

Operator No. _____

Permit/RRC No. _____

Operator's Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (use oil exploration protest of the waste)
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	_____
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY	_____	
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Phone No. _____

Phone No. _____

Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

DEPART DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro Röntgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

(DATE PRINT)

(DATE)

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **348380**

Operator No. _____
Operators Name Alanchip 6117
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (name and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), Ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Foot	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 348380

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (Name and generation process of the waste)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: 8-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

WHP _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Red Bluff

Phone No: 409-877-52

GENERATOR

NO. 348381

Operator No. _____
Operators Name MADOLINGSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. 20-015-5764
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings	_____		Washout Water (Non-Injectable) _____
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable) _____	<u>DRUG</u> <u>MARK</u>
Water Based Cuttings	_____	Produced Water (Non-Injectable) _____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____	Truck Washout (exempt waste) _____	
Gas Plant Waste	_____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address 1111 N. WINDY PARKWAY
Phone No. _____

Driver's Name VICTOR G. GARCIA
Phone No. _____
Truck No. 1138
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. 348381

Operator No. _____
Operators Name J. HUNTERSON
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>_____</u>
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC, PI, Ignitability, Corrosivity and Reactivity).
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
---	--------------------------	---

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge	_____	_____	_____	_____
2nd Gauge	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elijio Medina*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

M39

Date: *1-16-25*

Driver Signature: *Manuel Lopez*

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*

Address: *5053 US Hwy 285*

Date: *1.16.25* *Orla TX 79719*

Representative
Signature:

Alejandra P 



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREY BOANE
 AFE #:
 PO #:
 Manifest #: 348498
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: MANUEL
 Truck #: M39
 Card #
 Job Ref #

Ticket #: 700-1676007
 Bid #: O6UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity Units
Contaminated Soil (RCRA Exempt)	15.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

RCRA Exempt; Oil Field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste

RCRA Non-Exempt; Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):

MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature _____

R360 Representative Signature _____

Customer Approval _____

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



New Mexico

(PLEASE PRINT)

REQUIRED INFORMATION

Name Casey Brown

Phone No. _____

GENERATOR

NO. 348498

Operator No. _____

Permit/RRC No. _____

Operator's Name Murchison

Lease/Well

Order State S.A

Address _____

Name & No. _____

County

City, State, Zip _____

API No. 30-015-57164

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT ESP Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and quantity entered if not listed)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	<u>Dumping Truck</u>
ESP Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT ESP Waste/Service Identification and Amount

All non-exempt ESP waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
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 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McNabb Partners

Driver's Name Manuel Lopez

Address _____

Phone No. _____

Phone No. _____

Truck No. 1758

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site (listed above) and delivered without incident to the disposal facility listed below.

SHIPMENT DATE 1/16/25

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 14

Site Name/ Permit No. Red Bluff Facility / STF-065

Phone No. 432-448-4239

Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro röntgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	INCHES _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____	_____	_____
Received	_____	_____	Total Received	_____	_____	_____

I hereby certify that the above load material has been (circle one)

ACCEPTED 1/16/25

DENIED NO

If denied, why? NP

NAME (PRINT) Manuel Lopez

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **348498**

Operator No. _____
Operators Name Blanchard
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Golden State 50
County Tarrant
API No. 30-00-0010
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (type and generation process of the waste)	<u>Dump truck</u>
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____		
Water Based Muds	_____	Completion Fluid/Flow Back (Non-Injectable)	_____		
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____		
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	_____		
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____		
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS _____ Y-YARDS 15 E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations; 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McWright Brothers
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? NO
NAME (PRINT) McWright DATE 2/6/25 TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Red Bluff

Phone No. _____

GENERATOR

NO. **348497**

Operator No. _____
Operator's Name Murchison
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Golden State #5-A
County _____
API No. 30-05-5204
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and governing process of the waste)
Oil Based Cuttings	_____		
Water Based Muds	_____	Washout Water (Non-Injectable)	Dump Truck
Water Based Cuttings	_____	Completion Fluid/Flow Back (Non-Injectable)	
Produced Formation Solids	_____	Produced Water (Non-Injectable)	
Tank Bottoms	_____	Gathering Line Water/Waste (Non-Injectable)	
E&P Contaminated Soil	_____	INTERNAL USE ONLY	
Gas Plant Waste	_____	Truck Washout (exempt waste)	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold levels for toxicity (RCPL, ignitability, Corrosivity and Reactivity)

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS _____ 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McNabb-Rotors
Address _____
Phone No. _____

Driver's Name Manuel Lopez
Phone No. _____
Truck No. 1139
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DISPOSAL FACILITY'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orle, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO if YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	_____	_____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name

Phone No.

GENERATOR

NO. 348497

Operator No.

Permit/RRC No.

Operator's Name Murphy

Lease/Well Name & No.

Address

County

City, State, Zip

API No.

Phone No.

Rig Name & No.

AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)		
Oil Based Muds	<u> </u>	NON-INJECTABLE WATERS
Oil Based Cuttings	<u> </u>	
Water Based Muds	<u> </u>	Washout Water (Non-injectable) <u> </u>
Water Based Cuttings	<u> </u>	Completion Fluid/Flow Back (Non-injectable) <u> </u>
Produced Formation Solids	<u> </u>	Produced Water (Non-injectable) <u> </u>
Tank Bottoms	<u> </u>	Gathering Line Water/Waste (Non-injectable) <u> </u>
E&P Contaminated Soil	<u> </u>	INTERNAL USE ONLY
Gas Plant Waste	<u> </u>	Truck Washout (exempt waste) <u> </u>
		OTHER EXEMPT WASTES (type and generation process of the waste)
		<u> </u>

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (RCRA Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name

Driver's Name

Address

Phone No.

Phone No.

Truck No.

WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: <u> </u> OUT: <u> </u>	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u> </u>
--	--------------------------	--

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge	<u> </u>	<u> </u>	<u> </u>	<u> </u>
2nd Gauge	<u> </u>	<u> </u>	Free Water	<u> </u>
Received	<u> </u>	<u> </u>	Total Received	<u> </u>

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Gen Tech

Phone No. 214-231-1111

GENERATOR

NO. **348496**

Operator No. _____
Operators Name Murchison
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Dayton 514 to 52
County _____
API No. 30-015-57264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	_____	OTHER EXEMPT WASTES (type and generate amount of the waste)
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	<u>Dump Truck</u>
Water Based Muds	_____	Completion Fluids/Flow Back (Non-Injectable)	_____	
Water Based Cuttings	_____	Produced Water (Non-Injectable)	_____	
Produced Formation Solids	_____	Gathering Line Water/Waste (Non-Injectable)	_____	
Tank Bottoms	_____	INTERNAL USE ONLY	_____	
E&P Contaminated Soil	_____	Truck Washout (exempt waste)	_____	
Gas Plant Waste	_____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS 15 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

PRINTED AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McKale Petroleum
Address _____
Phone No. _____

Driver's Name Manuel Lopez
Phone No. _____
Truck No. 2139
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 1-16-2025

DISPST SIGNATURE _____

TRUCK TIME STAMP

IN: 1:15 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. RD 100

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name:

Phone No:

GENERATOR

NO. **348495**

Operator No. _____
Operators Name Munchison
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Oyster State 5A
County _____
API No. 30-015-57264
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (name and generation process of the waste)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	<u>Dump Truck</u>
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCPL), ignitability, corrosivity and reactivity

Non-Exempt Other: _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ 8-BARRELS _____ 15 Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name McNabb Partners
Address _____
Phone No. _____

Driver's Name Manuel Lopez
Phone No. _____
Truck No. 2739
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 1-16-25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: 11:02 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. T-11

Site Name/Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orfa, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro reentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why? _____

(NAME (PRINT)) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 348495

Operator No. _____

Permit/RRC No. _____

Operator's Name _____

Lease/Well Name & No. _____

Address _____

Country _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	Dump Truck
E&P Contaminated Soil _____		
Gas Phase Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TC/P), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Phone No. _____

Phone No. _____

Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site (listed above) and delivered without incident to the disposal facility (listed below)

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**

Phone No. **432-448-4239**

Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

Feet Inches

1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TIME

REMARKS

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Grey Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.16.25* Contact Signature: *Elijio Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-14-25* Driver Signature: *ARIE MAYBERRY TRUCK MB3*

DISPOSAL SITE:

Belly Dump

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25 Orla TX 79719*
R360 - Halfway

Representative
Signature:



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: 775 678 3732
Phone No.:

GENERATOR

NO. 347044

Operator No. _____
Operators Name MARCHISOL
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Ogden Hole SA
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS: Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT WASTES (type and general description of the waste) <u>Pelly Dump</u>
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY:	
E&P Contaminated Soil	_____	Truck Washout (exempt waste) _____	
Gas Plant Waste	_____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCFL), ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name MP
Address _____
Phone No. _____

Driver's Name Alan Mayberry
Phone No. _____
Truck No. MRS
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

1-16-25 Alan Mayberry 1-16-25 Alan Mayberry
SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: 11:00 OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 151

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro rontgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TIME

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. 347044

Operator No. _____
Operators Name Marchionni
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Ogden State 5A
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT ESP Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings	Washout Water (Non-Injectable)	<u>Polly Dump</u>
Water Based Muds	Completion Fluid/Flow Back (Non-Injectable)	
Water Based Cuttings	Produced Water (Non-Injectable)	
Produced Formation Solids	Gathering Line Water/Waste (Non-Injectable)	
Tank Bottoms	INTERNAL USE ONLY	
ESP Contaminated Soil	Truck Washout (exempt waste)	
Gas Plant Waste		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT ESP Waste/Service Identification and Amount

All non-exempt ESP waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name MP
Address _____
Phone No. _____

Driver's Name Joe Robinson
Phone No. _____
Truck No. 1553
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE 1-16-25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT)

REQUIRED INFORMATION

Name GARY BOONE

Phone No. 214-292-2922

GENERATOR

NO. **347045**

Operator No. _____
Operators Name Murchison
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. Ogden State 5A
County _____
API No. 38-015-37209
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable)	_____	OTHER EXEMPT WASTES (type and quantity removed from waste)
Oil Based Cuttings	_____		Completion Fluid/Flow Back (Non-Injectable)	_____	
Water Based Muds	_____		Produced Water (Non-Injectable)	_____	
Water Based Cuttings	_____		Gathering Line Water/Waste (Non-Injectable)	_____	
Produced Formation Solids	_____		INTERNAL USE ONLY	_____	
Tank Bottoms	_____	Truck Washout (exempt waste)	_____		
E&P Contaminated Soil	<u>X</u>				<u>Belly Dump</u>
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other: _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS 30 Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name MP
Address _____
Phone No. _____

Driver's Name Gene Mayberry
Phone No. _____
Truck No. 1183
WHIP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.
1-16-25 Gene Mayberry 1-16-25 Gene Mayberry

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: 06 OUT: _____

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Oria, TX 79770

Phone No. 432-448-4239

NORM READINGS-TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (Print)

DATE

TITLE

SIGNATURE



(PLEASE PRINT)

REQUIRED INFORMATION

Name

Phone No.

GENERATOR

NO. 347046

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT ESP Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, EBP Contaminated Soil, Gas Plant Waste. Includes sub-sections for NON-INJECTABLE WATERS and INTERNAL USE ONLY.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT ESP Waste/Service Identification and Amount

All non-exempt ESP waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS 20 Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended.
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens/hr? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

Table with columns: Feet, Inches, BS&W Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 347046

Operator No. _____
 Operators Name Murphy
 Address _____
 City, State, Zip _____
 Phone No. _____

Permit/RRC No. _____
 Lease/Well Name & No. 02402 5th 52
 County 10 013 37214
 API No. _____
 Rig Name & No. _____
 AFE/PO No. _____

EXEMPT ESP Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (place volume next to waste type in barrels or cubic yards)
Oil Based Cuttings	_____		<u>Rolls Drilling</u> _____ _____ _____ _____
Water Based Muds	_____	Washout Water (Non-Injectable)	
Water Based Cuttings	_____	Completion Fluid/Flow Back (Non-Injectable)	
Produced Formation Solids	_____	Produced Water (Non-Injectable)	
Tank Bottoms	_____	Gathering Line Water/Waste (Non-Injectable)	
ESP Contaminated Soil	_____	INTERNAL USE ONLY	
Gas Plant Waste	_____	Truck Washout (exempt waste)	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT ESP Waste/Service Identification and Amount
 All non-exempt ESP waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name MP
 Address _____
 Phone No. _____

Driver's Name Don Mayhew
 Phone No. _____
 Truck No. 1157
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE 2/6/25 DRIVER'S SIGNATURE Don Mayhew DELIVERY DATE 2/6/25 DRIVER'S SIGNATURE Don Mayhew

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. _____

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
 Address 5053 US Hwy 285, Orla, TX 79770

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received	_____	BS&W (%)	_____
2nd Gauge	_____	_____	Free Water	_____		
Received	_____	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREY BOANE
 AFE #:
 PO #:
 Manifest #: HW-730739
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: ACIE
 Truck #: M83
 Card #
 Job Ref #

Ticket #: 700-1675957
 Bid #: O6UJ9A000KO9
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity	Units
Contaminated Soil (RCRA Exempt)	20.00	yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

RCRA Exempt: Oil Field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste

RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):

MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature _____ R360 Representative Signature _____

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____ Date: _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT)

REQUIRED INFORMATION

Name: [Handwritten] Phone No.: [Handwritten]

GENERATOR

NO. HW-730739

Generator Manifest #, Generator Name, Address, City, State, Zip, Phone No.

Location of Origin, Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount

Table with columns for waste types (Oil Based Muds, Cuttings, etc.), water types (Washout, Completion, etc.), and soil types (Top Soil, Caliche).

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other: *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS, L - LIQUID, Y - YARDS, E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

- RCRA EXEMPT, RCRA NON-EXEMPT, MSDS Information, RCRA Hazardous Waste Analysis, Other, EMERGENCY NON-OILFIELD

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Transporter Ticket #

Driver's Name, Print Name, Phone No., Truck No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT:

Name/No. [Handwritten]

Site Name/Permit No., Address

Phone No.

NORM READINGS TAKEN? PASS THE PAINT FILTER TEST?

If YES, was reading > 50 micro roentgens?

TANK BOTTOMS

Table for Tank Bottoms measurements (1st Gaug, 2nd Gaug, Received)

Table for Tank Bottoms analysis (BS&W/BBLs Received, Free Water, Total Received, BS&W %)

ACCEPTED

DENIED

If denied, why?

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Grey Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.16.25* Contact Signature: *Elijio Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: Driver Signature:

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25 Orla TX 79719* Representative
Signature:



(PLEASE PRINT) *REQUIRED INFORMATION*

Name

Phone No.

GENERATOR

NO. 359344

Operator No.
Operators Name
Address
City, State, Zip
Phone No.

Permit/RRR No
Lease/Well
Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns: Waste Type, Volume, and Other Exempt Wastes. Rows include Oil Based Muds, Oil Based Cuttings, Water Based Muds, etc.

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity, and Reactivity.

Non-Exempt Other please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended.
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.

Driver's Name
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

Table with columns: TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name/No.)

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770
Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

Table for Tank Bottoms with columns: Feet, Inches, BS&W Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 359343

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (Indicate volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and quantity/percentage of total waste)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (ICPL, toxicity, Crystallinity and Benzene)

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 355710

Operator No. _____

Permit/RRC No. _____

Operator's Name _____

Lease/Well _____

Address _____

Name & No. _____

City, State, Zip _____

County _____

Phone No. _____

API No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste) no drums
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Phone No. _____

Phone No. _____

Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO
if YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

	Feet	Inches	BS&W Received	BS&W (%)
1st Gauge				
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED if denied, why? _____

(NAME PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 355710

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and chemical composition of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	200 1/2 1100
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (IDLH), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: 8-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

NORM (mR/hr) _____

TANK BOTTOMS

Feet

Inches

1st Gauge		
2nd Gauge		
Received		

BS&W Received		BS&W (%)
Free Water		
Total Received		

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

If denied, why?

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State SA*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elyia Iblechou*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: _____ Driver Signature: _____

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25* *Orla TX 79719* Representative
Signature:

[Signature]
Ympulnia
1. load - 20



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____ Phone No. _____

GENERATOR

RB 368515

Operator No. Permit/RRC No. Lease/Well Name & No. County API No. Rig Name & No. AFE/PO No. Operators Name Address City, State, Zip Phone No.

Table with columns: Oil Based Muds, Water Based Muds, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, INTERNAL USE ONLY, OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended.
MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name Address Phone No. Driver's Name Phone No. Truck No. WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN OUT DISPOSAL FACILITY RECEIVING AREA Name/No.

Site Name/ Permit No. Address Phone No. NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS

1st Gauge Feet Inches BS&W Received BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

Name _____

Phone No. _____

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

RB 368515

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease Well _____
 Address _____ Name & No. _____
 City, State, Zip _____ County _____
 Phone No. _____ API No. _____
 _____ Rfg Name & No. _____
 _____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ please select from Non-Exempt Waste List on back

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
----------	-----------	---------	--------

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS information RCRA Hazardous Waste Analysis Other (Provide Description Below)

 (PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name No. _____

Site Name/ Permit No. Address **Red Bluff Facility / STF-065**
5053 US Hwy 285, Orla, TX 79770
 Phone No. **432-448-4239**
 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro rontgens? (Circle One) Yes No
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____
 _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED if denied, why? _____

 NAME (PRINT) DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name

Phone No.

GENERATOR

NO. 349761

Operator No.
Operators Name
Address
City, State, Zip
Phone No.

Permit/RPC No.
Lease/Well Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Table with columns for waste types (Oil Based Muds, Cuttings, etc.), NON-INJECTABLE WATERS, and OTHER EXEMPT WASTES.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other: please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certification on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations.
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.

Driver's Name
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT:

Name/No.

Site Name/ Permit No.
Address

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro remigrants? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

Table for Tank Bottoms measurements: Feet, Inches, 1st Gauge, 2nd Gauge, Received

Table for Tank Bottoms analysis: BS&W Received, Free Water, Total Received, BS&W (%)

I hereby certify that the above load material has been (circle one)

ACCEPTED

DENIED

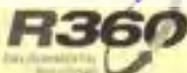
If denied, why?

NAME (PRINT)

DATE

TIME

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 349761

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (name and generation process of the waste)
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____		
		Truck Washout (exempt waste)	_____

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENY SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TIME SIGNATURE



(PLEASE PRINT)

REQUIRED INFORMATION

Name

Phone No.

GENERATOR

NO 349762

Operator No.
Operators Name
Address
City, State, Zip
Phone No.

Permit/RRC No.
Lease/Well Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

Table with columns: EXEMPT E&P Waste/Service Identification and Amount, NON-INJECTABLE WASTES, OTHER EXEMPT WASTES. Includes rows for Oil Based Muds, Water Based Muds, Produced Formation Solids, etc.

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCUP), cytotoxicity, corrosivity and reactivity.

Non-Exempt Other *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT
RCRA NON-EXEMPT
MSDS Information
RCRA Hazardous Waste Analysis
Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.

Driver's Name
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: OUT:

DISPOSAL FACILITY

RECEIVING AREA

Name/No.

Site Name/ Permit No.
Address

Phone No.

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr)

TANK BOTTOMS

Table for Tank Bottoms measurements: 1st Gauge, 2nd Gauge, Received. Columns for Feet, Inches.

Table for Tank Bottoms fluid analysis: BS&W Received, Fresh Water, Total Received. Columns for BS&W (%).

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. 349762

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS: Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT WASTES (type and quantity of process of the waste) B2 = 1000
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY Truck Washout (exempt waste) _____	
E&P Contaminated Soil	_____		
Gas Plant Waste	_____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulation, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065**
Address **5053 US Hwy 285, Orla, TX 79770**

Phone No. **432-448-4239**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	feet	inches	BS&W Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: HW-703937
 Manif. Date: 1/16/2025
 Hauler: MCNABB PARTNERS
 Driver: GUMER
 Truck #: M+0
 Card #:
 Job Ref #:

Ticket #: 700-1675993
 Bid #: O6UJ9A000K09
 Date: 1/16/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity Units
Contaminated Soil (RCRA Exempt)	20.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste

RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):

MSDS Information RCRA Hazardous Waste Analysis Process Knowledge Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Gumer Rdz

[Handwritten Signature]

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Left Blank

Phone No. _____

GENERATOR

NO. HW- 703937

Generator Manifest # _____
Generator Name Martinez
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. OPEN STATE SA
County _____
API No. 37-015-57245
Fig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT E&P WASTE STREAMS <u>DELLY DUMP</u>		
Oil Based Cuttings	_____				
Water Based Muds	_____				
Water Based Cuttings	_____				
Produced Formation Solids	_____				
Tank Bottoms	_____	INTERNAL USE ONLY Truck Washout (exempt waste) YES _____ NO <u>✓</u>	TOP SOIL & CALICHE SALES		
E&P Contaminated Soil	_____		QUANTITY	TOP SOIL	CALICHE
Gas Plant Waste	_____				

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS 20 E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations: 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name M. NADO PARTIERS
Address _____
Phone No. 575-397-0450
Transporter Ticket # _____

Driver's Name TIMOTHY R
Print Name _____
Phone No. _____
Truck No. H 90

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below:

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE 1-16-25

DRIVER'S SIGNATURE TIMOTHY R

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 77

Site Name/Permit No. Halfway Facility / NM1-006
Address 6601 Hobbs Hwy US 62 / 100 Mile Marker 66 Carlsbad, NM 88220

Phone No. 575-392-6368

NORM READINGS TAKEN? (Circle One) YES _____ NO ✓ If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____
PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO ✓

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W/BBLs Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED _____ DENIED _____ If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boane 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Belly truck # 3046637

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.16.25*

Contact Signature: *Elijio Medina*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: _____ Driver Signature: _____

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25* *Orla TX 79719*

Representative
Signature:

E.D.
Lyman
20 yards



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **HW- 722496**

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS			
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____			
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____			
Water Based Cuttings _____		Produced Water (Non-Injectable) _____			
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____	INTERNAL USE ONLY		QUANTITY	TOP SOIL	CALICHE
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES _____ NO _____				
Gas Plant Waste _____					

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), leachability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006**

Phone No. **575-392-6368**

Address **6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet	Inches
2nd Gauge		
Received		

BS&W/BBLS Received		BS&W (%)
Free Water		
Total Received		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

(NAME (PRINT)) _____

DATE _____

TITLE _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Company Name _____

Phone No. _____

GENERATOR

NO. **HW-722496**

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	_____	NON-INJECTABLE WATERS	Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT E&P WASTE STREAMS:			
Oil Based Cuttings	_____						
Water Based Muds	_____						
Water Based Cuttings	_____						
Produced Formation Solids	_____	INTERNAL USE ONLY	Truck Washout (exempt waste) YES _____ NO _____	QUANTITY	_____	TOP SOIL	_____
Tank Bottoms	_____			CALICHE	_____		
E&P Contaminated Soil	_____						
Gas Plant Waste	_____						

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (DCLPL), ignitability, Corrosivity, and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subject D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. _____

Halfway Facility / NM1-006

Phone No. **575-392-6368**

Address **6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

NDRM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Test location

1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W/BBLs Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

BILL _____

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW- 722496**

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Big Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS			
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____			
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____			
Water Based Cuttings _____		Produced Water (Non-Injectable) _____			
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____				
Tank Bottoms _____	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES		
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES _____ NO _____	QUANTITY	TOP SOIL	CALICHE	
Gas Plant Waste _____					

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is/are not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below) _____
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006**

Phone No. **575-392-6368**

Address **6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

NORM READINGS TAKEN? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

	Feet	Inches
1st Gauge	_____	_____
2nd Gauge	_____	_____
Received	_____	_____

BS&W/B8LS Received	_____	BS&W (%)	_____
Free Water	_____		
Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

FILE _____

SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Handwritten]

Phone No. [Handwritten]

GENERATOR

Operator No. [Handwritten]
Operators Name [Handwritten]
Address [Handwritten]
City, State, Zip [Handwritten]
Phone No. [Handwritten]

Permit/RRC No. RB 368504
Lease/Well Name & No. [Handwritten]
County [Handwritten]
API No. [Handwritten]
Rig Name & No. [Handwritten]
AFE/PO No. [Handwritten]

Table with columns: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, INTERNAL USE ONLY, OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other: [] please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS [] Y-YARDS [] E-EACH []

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- [] RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
[] RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations. 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
[] MSDS Information [] RCRA Hazardous Waste Analysis [] Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name [Handwritten]
Address [Handwritten]
Phone No. [Handwritten]

Driver's Name [Handwritten]
Phone No. [Handwritten]
Truck No. [Handwritten]
WHIP No. [Handwritten]

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: [Handwritten] OUT: [Handwritten]

Name/No. [Handwritten]

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770
Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES [] NO [] If YES, was reading > 50 micro roentgens? (Circle One) Yes [] No []
NORM (mR/hr)

TANK BOTTOMS

1st Gauge Feet [Handwritten] Inches [Handwritten] BS&W Received [Handwritten] BS&W (%) [Handwritten]

I hereby certify that the above load material has been (circle one) ACCEPTED [] DENIED [] If denied, why? [Handwritten]

NAME (PRINT)

DATE

TITLE

SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368504

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease/Well _____
 Address _____ Name & No. _____
 City, State, Zip _____ County _____
 Phone No. _____ API No. _____
 Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____		
Gas Plant Waste _____	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
 RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN _____ OUT: _____	Name/No. _____	

Site Name: **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Permit No. _____
 Address: **5053 US Hwy 295, Orla, TX 79770**
 NORM READINGS TAKEN? (Circle One) YES NO # YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge: _____ Feet _____ Inches _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

(PLEASE PRINT) *REQUIRES INFORMATION*

Company Man C...
Name...
Phone No...

GENERATOR

RB 369869

Operator No. _____ Permit/RRC No. _____
Operators Name _____ Lease/Well _____
Address _____ Name & No. _____
City, State, Zip _____ County _____
Phone No. _____ API No. _____
Rig Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

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- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
Address _____ Phone No. _____
Phone No. _____ Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	-------------------	----------------------------------

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
-----------	------------	--------------	---------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



PLEASE PRINT REQUIRED INFORMATION

GENERATOR

Operator No. Operators Name: Marchion Address City, State, Zip Phone No. Permit/RRC No. Lease/Well Name & No. County API No. Rig Name & No. AFE/PO No. RB 36986

Table with 3 columns: Waste Type (Oil Based Muds, Water Based Muds, etc.), NON-INJECTABLE WATERS (Washout Water, Completion Fluid Flow Back, etc.), OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only) RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations. 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided) MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name Address Phone No. Driver's Name Phone No. Truck No. WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: OUT: DISPOSAL FACILITY RECEIVING AREA Name/No.

Site Name/ Permit No. Address: Red Bluff Facility / STF-065 5053 US Hwy 285, Orla, TX 79770 Phone No. 432-448-4239 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS

1st Gauge Feet Inches BS&W Received BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

Write - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Company Man Name Phone No.

GENERATOR

RB 369868

Operator No., Operators Name, Address, City, State, Zip, Phone No., Permit/RRC No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No.

Table with 3 columns: Waste Type (Oil Based Muds, Water Based Muds, etc.), NON-INJECTABLE WATERS (Washout Water, Completion Fluid-Flow Back, etc.), OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

RCRA EXEMPT, RCRA NON-EXEMPT, MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name/No.)

Site Name/ Permit No. Red Bluff Facility / STF-065, Address 5053 US Hwy 285, Oria, TX 79770, Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO. If YES, was reading > 50 micro roentgens? (Circle One) Yes No. NORM (mR/hr)

TANK BOTTOMS

1st Gauge (Feet, Inches), BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boone 575-628-3952*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lee County, New Mexico

TRANSPORTER NAME & ADDRESS:

*Dump Truck
m-3j*

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *18*

FACILITY CONTACT:

Date: *1.17.25*

Contact Signature: *Flynn Williams*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-17-2025*

Driver Signature: *Alban Terro*
ALBAN TERRO

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 9th Hwy 255*
Date: *1.16.25* *Orla 7279779*

Representative
Signature.

E. D.

1-4



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

PLEASE PRINT REQUIRED INFORMATION

GENERATOR

Operator No. _____ Permit/RRC No. **RB 369881**

Operators Name _____ Lease Well _____

Address _____ Name & No. _____

City, State, Zip _____ County _____

Phone No. _____ API No. _____

_____ Rig Name & No. _____

_____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (use and permission process of the wastes)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	Washout Water (Non-Injectable) _____	Oilfield Waste
E&P Contaminated Soil _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Gas Plant Waste _____	Produced Water (Non-Injectable) _____	
	Gathering Line Water/Waste (Non-Injectable) _____	
	INTERNAL USE ONLY	
	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____

Address _____ Phone No. _____

Phone No. _____ Truck No. _____

_____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____

BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name

Phone No.

GENERATOR

Operator No., Operators Name, Address, City, State, Zip, Phone No., Permit/RRC No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No. RB 369881

Table with columns: Oil Based Muds, Water Based Muds, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

QUANTITY B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law.

RCRA EXEMPT, RCRA NON-EXEMPT, MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME, DATE, SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE, DRIVER'S SIGNATURE, DELIVERY DATE, DRIVER'S SIGNATURE

TRUCK TIME STAMP, DISPOSAL FACILITY, RECEIVING AREA

Site Name/ Permit No., Address, Phone No., NORM READINGS TAKEN?, YES NO, If YES, was reading > 50 micro roentgens? (Circle One) Yes No

TANK BOTTOMS

1st Gauge, Feet, Inches, BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT), DATE, TITLE, SIGNATURE

White - ORIGINAL, Blue - TRANSPORTER, Yellow - GENERATOR



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

PLEASE PRINT *REQUIRED INFORMATION

Handwritten notes and stamps in the top right corner.

GENERATOR

Operator No. _____ Permit/RRC No. **RB 369882**

Operator's Name _____ Lease/Well _____

Address _____ Name & No. _____

City, State, Zip _____ County _____

Phone No. _____ API No. **50-015-97044**

Rig Name & No. _____

AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	Empty Tank
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back*

QUANTITY: **8-BARRELS** Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt wastes (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____

Address _____ Phone No. _____

Phone No. _____ Truck No. _____

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No

NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____

BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Main Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: _____
Phone No: _____

GENERATOR

Operator No. _____ Permit/RRC No. **RB 369882**

Operator's Name _____ Lease Well _____

Address _____ Name & No. _____

City, State, Zip _____ County _____

Phone No. _____ API No. _____

_____ Rig Name & No. _____

_____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS _____	OTHER EXEMPT WASTES (type and generation process of the waste) <i>Very Tank</i>
Oil Based Cuttings _____	Washout Water (Non-injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-injectable) _____	
Water Based Cuttings _____	Produced Water (Non-injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY _____	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____

Address _____ Phone No. _____

Phone No. _____ Truck No. _____

_____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	-------------------	----------------------------------

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address **5053 US Hwy 285, Oris, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____

BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

White - ORIGINAL

Blue - TRANSPORTER

Yellow - GENERATOR

Version 1
808.R360 5/00

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boone 575-628-3432*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hoobs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.17.25* Contact Signature: *[Signature]*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-17-25* Driver Signature: *Alicia MAYHEW Truck MFR*

DISPOSAL SITE:

Belly Dump

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 225*
Date: *1.10.25* *Onle 7274719*

Representative
Signature:

R360 Halfway



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company/Main Contact Information

(PLEASE PRINT)

REQUIRED INFORMATION

Name

Phone No.

GENERATOR

Operator No. _____ Permit/RRC No. **RB 368537**

Operators Name Muschus Lease/Well Name & No. Optim State 5A

Address _____ County 30-018 5 21W

City, State, Zip _____ API No. _____

Phone No. _____ Rig Name & No. _____

AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)	
Oil Based Cuttings _____			Washout Water (Non-injectable) _____
Water Based Muds _____			Completion Fluid/Flow Back (Non-injectable) _____
Water Based Cuttings _____			Produced Water (Non-injectable) _____
Produced Formation Solids _____			Gathering Line Water/Waste (Non-injectable) _____
Tank Bottoms _____	INTERNAL USE ONLY	<u>Belly Dump</u>	
E&P Contaminated Soil <u>X</u>	Truck Washout (exempt waste) _____		
Gas Plant Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name MP Driver's Name Joe Mayberry

Address 1111 Phone No. _____

Phone No. _____ Truck No. 1183

WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE 1-17-25 DRIVER'S SIGNATURE Joe Mayberry DELIVERY DATE 1-17-25 DRIVER'S SIGNATURE Joe Mayberry

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: <u>11:00</u> OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**

Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No

NORM (mR/hr) _____

TANK BOTTOMS

Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
------------	--------------	---------------------	----------------

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Main Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

Operator No. _____ Permit/RRC No. **RB 368537**
Operator's Name _____ Lease Well _____
Address _____ Name & No. *Light + Shell 5A*
City, State, Zip _____ County *30-018-5-010*
Phone No. _____ Rig Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation; portion of the waste) <i>Polly Dump</i>
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste-Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS *20* Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
Address _____ Phone No. _____
Phone No. _____ Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN *15:00* OUT _____ Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge Feet _____ Inches _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE



Permian Basin

Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREY BOURNE
 AFE #:
 PO #:
 Manifest #: HW-730741
 Manif. Date: 1/17/2025
 Hauler: MCNABB PARTNERS
 Driver: ACIE
 Truck #: M83
 Card #
 Job Ref #

Ticket #: 700-1676481
 Bid #: O6UJ9A000K09
 Date: 1/17/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Facility: CRI

Product / Service

Quantity Units

Contaminated Soil (RCRA Exempt)

20.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21, 261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Process Knowledge
 - Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information
Name: Brey, Bruce
Phone No: 505 378 3753

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-730741**

Generator Manifest # _____
Generator Name: Munich
Address: _____
City, State, Zip: _____
Phone No: _____

Location of Origin
Lease/Well Name & No. AGDCO State 5A
County: _____
API No. _____
Rig Name & No. 30 013 27104
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS		
Oil Based Cuttings	Washout Water (Non-Injectable)	<u>Belly Dump</u>		
Water Based Muds	Completion Fluid/Flow Back (Non-Injectable)			
Water Based Cuttings	Produced Water (Non-Injectable)			
Produced Formation Solids	Gathering Line Water/Waste (Non-Injectable)			
Tank Bottoms	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES		
E&P Contaminated Soil	Truck Washout (exempt waste)	QUANTITY	TOP SOIL	CALICHE
Gas Plant Waste	YES	NO		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity

Non-Exempt Other: _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID 30 Y - YARDS E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations; 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name: PIP
Address: 1111
Phone No: _____
Transporter Ticket #: _____

Driver's Name: Eric Mahoney
Print Name: _____
Phone No: _____
Truck No: 1111

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.
SHIPMENT DATE: 1-17-25 DRIVER'S SIGNATURE: Eric Mahoney DELIVERY DATE: 1-17-25 DRIVER'S SIGNATURE: Eric Mahoney

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 14

Site Name/ Permit No.: Halfway Facility / NM1-006
Address: 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

Phone No: 575-392-6368

NORM READINGS TAKEN? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO
If YES, was reading > 50 micro roentgens? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Gauge			Free Water	
Received			Total Received	

ACCEPTED

DENIED

If denied, why?

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Craig Boone 575-628-3932*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

Load 1

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.17.25* Contact Signature: *P. Lynn Medeiros*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: _____ Driver Signature: _____

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5055 US Hwy 285*
Date: *1.16.25* *Orla 7274719*

Representative
Signature:

1.17.25



Permian Basin

Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANE
 AFE #:
 PO #:
 Manifest #: HW-713004
 Manif. Date: 1/17/2025
 Hauler: MCNABB PARTNERS
 Driver: GUMER
 Truck #: M90
 Card #
 Job Ref #

Ticket #: 700-1676537
 Bid #: O6UJ9A000K09
 Date: 1/17/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Facility: CRI

Product / Service	Quantity	Units
Contaminated Soil (RCRA Exempt)	20.00	yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Process Knowledge
 - Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Lancy Dantz

Phone No. _____

GENERATOR

NO. HW- 713004

Generator Manifest # _____
Generator Name MADRID
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. OTHEL STATE SA
County _____
API No. 70-015-57224
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)			
Oil Based Muds	_____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS
Oil Based Cuttings	_____		
Water Based Muds	_____		
Water Based Cuttings	_____		
Produced Formation Solids	_____		
Tank Bottoms	_____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES
E&P Contaminated Soil	_____		
Gas Plant Waste	_____	Truck Washout (exempt waste)	YES _____ NO _____
WASTE GENERATION PROCESS:		QUANTITY	TOP SOIL CALICHE
<input type="checkbox"/> DRILLING	<input type="checkbox"/> COMPLETION	<input type="checkbox"/> PRODUCTION	<input type="checkbox"/> GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCDF), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS _____ L - LIQUID _____ Y - YARDS 20 E - EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)

RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)

MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT'S SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name M. NUNO PARTNERS
Address _____
Phone No. 575-397-0050
Transporter Ticket # _____

Driver's Name TIMOTHY ROE
Print Name _____
Phone No. _____
Truck No. M 90

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE 1-17-25 DRIVER'S SIGNATURE TIMOTHY ROE

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>14</u>
--	-------------------	--------------------------------------

Site Name/Permit No. Halfway Facility / NM1-006 Phone No. 675-392-6368
Address 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES _____ NO _____ If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____

PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO _____

TANK BOTTOMS

Feet	Inches	BS&W/BBLs Received	BS&W (%)
1st Gauge	_____	_____	_____
2nd Gauge	_____	Free Water	_____
Received	_____	Total Received	_____

I hereby certify that the above load material has been (circle one): ACCEPTED _____ DENIED _____ If denied, why? _____

NAME (PRINT) _____ TITLE _____ SIGNATURE _____

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: J. S. [unclear] Phone No.:

GENERATOR

RB 370032

Operator No., Permit/RRG No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No., Operators Name, Address, City, State, Zip, Phone No.

Table with columns: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES (type and generation process of the waste).

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other: *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only).
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended.
MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME, DATE, SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE, DRIVER'S SIGNATURE, DELIVERY DATE, DRIVER'S SIGNATURE

TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name/No.)

Site Name/Permit No., Address, Phone No., Red Bluff Facility / STF-065, 5053 US Hwy 285, Orla, TX 79770, 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO. If YES, was reading >= 50 micro roentgens? (Circle One) Yes No. NORM (mR/hr)

TANK BOTTOMS

1st Gauge, Feet, Inches, BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED. If denied, why?

NAME (PRINT), DATE, TITLE, SIGNATURE

White - ORIGINAL, Blue - TRANSPORTER, Yellow - GENERATOR

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION

Company Name: ...
Name: ...
Title: ...

GENERATOR

RB 370030

Operator No. _____ Permit/RRC No. _____
Lease/Well Name & No. _____
Address _____ County _____
City, State, Zip _____ API No. _____
Phone No. _____ RIG Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	Borehole Cleanup
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name: Mystic Driver's Name: ...
Address: _____ Phone No.: _____
Phone No.: ... Truck No.: _____
WHP No.: _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orla, TX 79770
NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Feet	Inches	BS&W Received	BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

RB 370030

Operator No. _____ Perm/RRC No. _____
Operators Name _____ Lease/Well _____
Address _____ Name & No. _____
City, State, Zip _____ County _____
Phone No. _____ API No. _____
Rig Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS _____	OTHER EXEMPT WASTES (type and quantity of process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	_____
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY _____	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
Address _____ Phone No. _____
Truck No. _____
Phone No. _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**
NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge _____ Feet _____ Inches _____ BS&W Received _____ BS&W (%) _____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Marchion*
Address:
Project Lead: *Gary Boone 575-628-3952*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

load 1

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

3076637 Belly

Impacted Soil Contaminated Quantity: *20*

FACILITY CONTACT:

Date: *1.17.25*

Contact Signature: *Felix Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: *1-17-25*

Driver Signature: *Andrew R.*
Andrew R.

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5055 US Hwy 255*
Date: *1.16.25* *Order # 7274779*

Representative
Signature:

1.17.25



Customer: MURCHISON OIL & GAS INC
 Customer #: CRI4190
 Ordered by: GREG BOANES
 AFE #:
 PO #:
 Manifest #: HW-730755
 Manif. Date: 1/17/2025
 Hauler: MCNABB PARTNERS
 Driver: ANDREW
 Truck #: 3046632
 Card #
 Job Ref #

Ticket #: 700-1676508
 Bid #: O6UJ9A000K09
 Date: 1/17/2025
 Generator: MURCHISON OIL & GAS INC
 Generator #:
 Well Ser. #: 37264
 Well Name: OGDEN STATE
 Well #: 005A
 Field:
 Field #:
 Rig: NON-DRILLING
 County: EDDY (NM)

Permian Basin

Facility: CRI

Product / Service	Quantity Units
Contaminated Soil (RCRA Exempt)	20.00 yards

Generator Certification Statement of Waste Status

I hereby certify that according to the Resource Conservation and Recovery Act (RCRA) and the US Environmental Protection Agency's July 1988 regulatory determination, the above described waste is:

- RCRA Exempt: Oil field wastes generated from oil and gas exploration and production operations and are not mixed with non-exempt waste
- RCRA Non-Exempt: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24 or listed hazardous waste as defined in 40 CFR, part 261, subpart D, as amended. The following documentation is attached to demonstrate the above-described waste is non-hazardous. (Check the appropriate items):
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Process Knowledge
 - Other (Provide description above)

Driver/ Agent Signature

R360 Representative Signature

Customer Approval

THIS IS NOT AN INVOICE!

Approved By: _____

Date: _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-730755**

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT E&P WASTE STREAMS			
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____			
Water Based Muds _____		Completion Fluid/Flow Back (Non-Injectable) _____			
Water Based Cuttings _____		Produced Water (Non-Injectable) _____			
Produced Formation Solids _____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		Truck Washout (exempt waste) YES _____ NO _____	QUANTITY _____	TOP SOIL _____	CALICHE _____
E&P Contaminated Soil _____					
Gas Plant Waste _____					

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name _____

Driver's Name _____

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____

DRIVER'S SIGNATURE _____

DELIVERY DATE _____

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. _____

Site Name/ Permit No. **Halfway Facility / NM1-006**

Phone No. **575-392-6368**

Address **6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220**

NORM READINGS TAKEN? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

If YES, was reading > 50 micro roentgens? (Circle One) YES NO

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W/BBLS Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____

DATE _____

TITLE _____

SIGNATURE _____



NM MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

(PLEASE PRINT) *REQUIRED INFORMATION*

Name: _____

Phone No. _____

GENERATOR

NO. HW-730755

Generator Manifest # _____

Location of Origin _____

Generator Name _____

Lease/Well Name & No. _____

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. _____

AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)			
Oil Based Muds _____	NON-INJECTABLE WATERS		OTHER EXEMPT E&P WASTE STREAMS
Oil Based Cuttings _____	Wastewater (Non-injectable) _____		
Water Based Muds _____	Completion Fluid/Flow Back (Non-injectable) _____		
Water Based Cuttings _____	Produced Water (Non-injectable) _____		
Produced Formation Solids _____	Gathering Line Water/Waste (Non-injectable) _____		
Tank Bottoms _____	INTERNAL USE ONLY		TOP SOIL & CALICHE SALES
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES _____ NO _____	QUANTITY	TOP SOIL CALICHE
Gas Flare Waste _____			

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TDCL), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form.)

PRINTED AUTHORIZED AGENT'S SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name _____
Print Name _____
Phone No. _____
Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE: _____ DRIVER'S SIGNATURE: _____ DELIVERY DATE: 1-17-25 DRIVER'S SIGNATURE: _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	-------------------	----------------------------------

Site Name/ Permit No. Halfway Facility / NM1-006 Phone No. 575-392-6368
Address: 6601 Hobbs Hwy US 62 / 180 Mile Marker 66 Carlsbad, NM 88220

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

	Feet	Inches	BS&W/BBLS Received	BS&W (%)
1st Gauge				
2nd Gauge			Free Water	
Received			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

PRINTED DATE TITLE SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-730755**

Generator Manifest # _____
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

EXEMPT E&P Waste/Service Identification and Amount (place volume next to waste type in barrels or cubic yards)

Oil Based Muds _____	NON-INJECTABLE WATERS Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT E&P WASTE STREAMS			
Oil Based Cuttings _____					
Water Based Muds _____					
Water Based Cuttings _____					
Produced Formation Solids _____					
Tank Bottoms _____	INTERNAL USE ONLY Thick Washout Exempt Waste? YES _____ NO _____	TOP SOIL & CALICHE SALES			
E&P Contaminated Soil _____		QUANTITY	TOP SOIL	CALICHE	
Gas Plant Waste _____					

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for acidity (TCLP), ignitability, corrosivity and reactivity.

Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

DISPOSAL QUANTITY: B - BARRELS L - LIQUID Y - YARDS E - EACH

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulation, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)
- EMERGENCY NON-OILFIELD: Emergency non-hazardous, non-oilfield waste that has been ordered by the Department of Public Safety (the order, documentation of non-hazardous waste determination and a description of the waste must accompany this form)

(PRINT) AUTHORIZED AGENT SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name _____
Print Name _____
Phone No. _____
Truck No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
--	--------------------------	----------------------------------

Site Name/Permit No: **Halfway Facility / NM1-006** Phone No: **575-392-6368**
Address: **6601 Hobbs Hwy US 67 / 100 Mile Marker 66 Carlsbad, NM 88220**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge _____	Feet _____	Inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Gauge _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name

Phone No.

GENERATOR

RB 368499

Operator No.
Operators Name
Address
City, State, Zip
Phone No.

Permit/RRC No.
Lease Well Name & No.
County
API No.
Rig Name & No.
AFE/PO No.

Table with columns for waste types: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste. Includes sub-sections for NON-INJECTABLE WATERS, INTERNAL USE ONLY, and OTHER EXEMPT WASTES.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.
Non-Exempt Other *please select from Non-Exempt Waste List on back

QUANTITY 8-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name
Address
Phone No.

Driver's Name
Phone No.
Truck No.
WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

Table with columns: TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name/No.)

Site Name/ Permit No. Red Bluff Facility / STF-065
Address 5053 US Hwy 285, Orla, TX 79770

Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

Table with columns: 1st Gauge (Feet, Inches), BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

Name _____

Phone No. _____

(PLEASE PRINT)

REQUIRED INFORMATION

GENERATOR

RB 368499

Operator No. _____
Operators Name _____
Address _____
City, State, Zip _____
Phone No. _____

Permit/RRC No. _____
Lease/Well Name & No. _____
County _____
API No. _____
Rig Name & No. _____
AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generate process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name _____
Address _____
Phone No. _____

Driver's Name _____
Phone No. _____
Truck No. _____
WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TITLE SIGNATURE



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368503

Operator No. _____ Permit/RRC No. _____
 Operators Name _____ Lease/Well _____
 Address _____ Name & No. _____
 _____ County _____
 _____ API No. _____
 City, State, Zip _____ Rig Name & No. _____
 Phone No. _____ AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____	Washout Water (Non-Injectable) _____	R/W
Tank Bottoms _____	Completion Fluid/Flow Back (Non-Injectable) _____	
E&P Contaminated Soil _____	Produced Water (Non-Injectable) _____	
Gas Plant Waste _____	Gathering Line Water Waste (Non-Injectable) _____	
	INTERNAL USE ONLY	
	Truck Washout (exempt waste) _____	

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY B BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
 RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 MSDS Information RCRA Hazardous Waste Analysis Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 _____ Truck No. _____
 Phone No. _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**
 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr) _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Main Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

RB 368503

Operator No. _____ Permits/RRC No. _____
 Lease/Well _____
 Operators Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
 All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
 Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY	B-BARRELS	Y-YARDS	E-EACH
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I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
- MSDS Information
- RCRA Hazardous Waste Analysis
- Other (Provide Description Below)

PRINT: AUTHORIZED AGENES NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**
 NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro-roentgens? (Circle One) Yes No
 NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one) ACCEPTED DENIED If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Marchison*
Address:
Project Lead: *Grey Boane 575-628-3932*

LOCATION OF MATERIAL:

Location: *Ogden State 5A*
Company:

API-30-015-57264

S _____ T _____ R _____

Lee County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15*

FACILITY CONTACT:

Date: *124.25*

Contact Signature: *Elyio Medicano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Jose Rias

Date: *124 25*

Driver Signature:

Truck 09

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25* *Orla 7279779*

Representative
Signature:

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Handwritten] Phone No.: [Handwritten]

GENERATOR

RB 370768

Operator No., Operators Name, Address, City, State, Zip, Phone No., Perm/RRC No., Lease/Well, Name & No., County, API No., Rig Name & No., AFE/PO No.

Table with columns: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

QUANTITY B-BARRELS Y-YARDS E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT, RCRA NON-EXEMPT, MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: OUT: DISPOSAL FACILITY RECEIVING AREA Name/No.

Site Name/ Permit No./ Address, Phone No., NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS

1st Gauge Feet Inches BS&W Received BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

White ORIGINAL Blue TRANSPORTER Yellow GENERATOR

TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: [Handwritten] Phone No: [Handwritten]

GENERATOR section containing fields for Operator No., Operators Name, Address, City, State, Zip, Phone No., Permit/RRC No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No. Includes handwritten entry RB 370766.

Table with 3 columns: Waste Type, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES. Rows include Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, Washout Water, Completion Fluid/Flow Back, Produced Water, Gathering Line Water/Waste, INTERNAL USE ONLY, Truck Washout.

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [] GATHERING LINES

NON-EXEMPT E&P Waste Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity. Non-Exempt Other: [] please select from Non-Exempt Waste List on back

QUANTITY: [] 8-BARRELS [] Y-YARDS [] E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

RCRA EXEMPT: [] Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
RCRA NON-EXEMPT: [] Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
MSDS Information [] RCRA Hazardous Waste Analysis [] Other (Provide Description Below) []

(PRINT) AUTHORIZED AGENT'S NAME DATE SIGNATURE

TRANSPORTER section containing fields for Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WeIP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVERS SIGNATURE DELIVERY DATE DRIVERS SIGNATURE

TRUCK TIME STAMP IN: OUT: DISPOSAL FACILITY RECEIVING AREA Name/No.

Site Name/ Permit No. Red Bluff Facility / STF-065 Phone No. 432-448-4239
Address 5053 US Hwy 285, Orla, TX 79770
NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgen/hr? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS section containing fields for 1st Gauge (Feet, Inches), BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR



(PLEASE PRINT)

REQUIRED INFORMATION

Name _____
Phone No. _____

GENERATOR

RB 370766

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operators Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS Washout Water (Non-Injectable) _____ Completion Fluid/Flow Back (Non-Injectable) _____ Produced Water (Non-Injectable) _____ Gathering Line Water/Waste (Non-Injectable) _____	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount

All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.

Non-Exempt Other _____ *please select from **Non-Exempt Waste List** on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

- RCRA EXEMPT: Oil field wastes generated from oil and gas exploration and production operation and are not mixed with non-exempt waste (R360 Accepts certifications on a per load basis only)
- RCRA NON-EXEMPT: Oil field waste which is non-hazardous that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME

DATE

SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE

DRIVER'S SIGNATURE

DELIVERY DATE

DRIVER'S SIGNATURE

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. _____
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Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
 Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
 NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

White - ORIGINAL

Blue - TRANSPORTER

Yellow - GENERATOR

TRANSPORTER'S MANIFEST

MANIFEST # _____

SHIPPING FACILITY NAME & ADDRESS:

Company: *Murchison*
Address:
Project Lead: *Greg Boone 575-628-3952*

LOCATION OF MATERIAL:

API-30-015-57264

Location: *Ogden State 5A*
Company:

S _____ T _____ R _____

Lea County, New Mexico

TRANSPORTER NAME & ADDRESS:

McNabb Partners
4008 N. Grimes #270
Hobbs, NM 88240

DESCRIPTION OF WASTE:

Impacted Soil Contaminated Quantity: *15*

FACILITY CONTACT:

Date: *1.24.25*

Contact Signature: *Eligio Medrano*
(Agent for ConocoPhillips)

NAME OF TRANSPORTER: (Driver)

Date: _____ Driver Signature: _____

DISPOSAL SITE:

Name of Disposal: *R360 Environmental Solutions*
Address: *5053 US Hwy 285*
Date: *1.16.25* *Orla TX 74719*

Representative
Signature:



TEXAS NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Company Man Co. Name Phone No.

GENERATOR section with fields for Operator No., Operators Name, Address, City, State, Zip, Phone No., Permit/RRC No., Lease/Well Name & No., County, API No., Rig Name & No., AFE/PO No. Includes handwritten 'RB 370762'.

Table with columns for waste types: Oil Based Muds, Oil Based Cuttings, Water Based Muds, Water Based Cuttings, Produced Formation Solids, Tank Bottoms, E&P Contaminated Soil, Gas Plant Waste, NON-INJECTABLE WATERS, OTHER EXEMPT WASTES, INTERNAL USE ONLY.

WASTE GENERATION PROCESS: DRILLING, COMPLETION, PRODUCTION, GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount. All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other: please select from Non-Exempt Waste List on back

Table with columns: QUANTITY, B-BARRELS, Y-YARDS, E-EACH

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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MSDS Information, RCRA Hazardous Waste Analysis, Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER section with fields for Transporter's Name, Address, Phone No., Driver's Name, Phone No., Truck No., WHP No.

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP (IN, OUT), DISPOSAL FACILITY, RECEIVING AREA (Name, No.)

Site Name/ Permit No. Red Bluff Facility / STF-065, Address 5053 US Hwy 285, Orla, TX 79770, Phone No. 432-448-4239

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roeritgents? (Circle One) Yes No NORM (mR/hr)

TANK BOTTOMS section with fields for 1st Gauge (Feet, inches), BS&W Received, BS&W (%)

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

(NAME (PRINT)) DATE TITLE SIGNATURE

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

RB 370763

Operator No. _____ Permit/RRC No. _____
Lease/Well _____
Operators Name _____ Name & No. _____
Address _____ County _____
API No. _____
City, State, Zip _____ Rig Name & No. _____
Phone No. _____ AFE/PO No. _____

Oil Based Muds _____	NON INJECTABLE WATERS	OTHER EXEMPT WASTES (type and generation process of the waste)
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY: B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s) is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENT'S NAME _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name _____
Address _____ Phone No. _____
Truck No. _____
Phone No. _____ WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____		Name/No. _____

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one): **ACCEPTED** **DENIED** If denied, why? _____

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: _____
Phone No: _____

GENERATOR

RB 370763

Operator No. _____ Permit/RRC No. _____
 Lease/Well _____
 Operator's Name _____ Name & No. _____
 Address _____ County _____
 City, State, Zip _____ API No. _____
 Phone No. _____ Rig Name & No. _____
 AFE/PO No. _____

Oil Based Muds _____	NON-INJECTABLE WATERS	OTHER EXEMPT WASTES (type and quantity amount of the waste)
Oil Based Cuttings _____		
Water Based Muds _____		
Water Based Cuttings _____		
Produced Formation Solids _____		
Tank Bottoms _____	INTERNAL USE ONLY	
E&P Contaminated Soil _____	Truck Washout (exempt waste) _____	
Gas Plant Waste _____		

WASTE GENERATION PROCESS: DRILLING COMPLETION PRODUCTION GATHERING LINES

NON-EXEMPT E&P Waste/Service Identification and Amount
All non-exempt E&P waste must be analyzed and be below threshold limits for toxicity (TCLP), ignitability, Corrosivity and Reactivity.
Non-Exempt Other _____ *please select from Non-Exempt Waste List on back

QUANTITY _____ B-BARRELS _____ Y-YARDS _____ E-EACH _____

I hereby certify that the above listed material(s), is (are) not hazardous waste as defined by 40 CFR Part 261 or any applicable state law. That each waste has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulation.

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- RCRA NON-EXEMPT: Oil field waste which is non-hazardous (that does not exceed the minimum standards for waste hazardous by characteristics established in RCRA regulations, 40 CFR 261.21-261.24, or listed hazardous waste as defined by 40 CFR, part 261, subpart D, as amended. The following documentation demonstrating the waste as non-hazardous is attached. (Check the appropriate items as provided)
 - MSDS Information
 - RCRA Hazardous Waste Analysis
 - Other (Provide Description Below)

(PRINT) AUTHORIZED AGENTS NAME DATE SIGNATURE

TRANSPORTER

Transporter's Name _____ Driver's Name _____
 Address _____ Phone No. _____
 Phone No. _____ Truck No. _____
 WHP No. _____

I hereby certify that the above named material(s) was/were picked up at the Generator's site listed above and delivered without incident to the disposal facility listed below.

SHIPMENT DATE _____ DRIVER'S SIGNATURE _____ DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No: _____	

Site Name/ Permit No. **Red Bluff Facility / STF-065** Phone No. **432-448-4239**
Address **5053 US Hwy 285, Orla, TX 79770**

NORM READINGS TAKEN? (Circle One) YES NO If YES, was reading > 50 micro roentgens? (Circle One) Yes No
NORM (mR/hr)

TANK BOTTOMS

1st Gauge	Foot _____	Inches _____	BS&W Received _____	BS&W (%) _____
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I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) DATE TITLE SIGNATURE

White - ORIGINAL Blue - TRANSPORTER Yellow - GENERATOR

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

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

QUESTIONS

Action 428921

QUESTIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 428921
	Action Type: [C-141] Deferral Request C-141 (C-141-v-Deferral)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2415825281
Incident Name	NAPP2415825281 OGDEN STATE #005A @ 30-015-37264
Incident Type	Other
Incident Status	Deferral Request Received
Incident Well	[30-015-37264] OGDEN STATE #005A

Location of Release Source	
<i>Please answer all the questions in this group.</i>	
Site Name	OGDEN STATE #005A
Date Release Discovered	03/12/2016
Surface Owner	State

Incident Details	
<i>Please answer all the questions in this group.</i>	
Incident Type	Other
Did this release result in a fire or is the result of a fire	No
Did this release result in any injuries	No
Has this release reached or does it have a reasonable probability of reaching a watercourse	No
Has this release endangered or does it have a reasonable probability of endangering public health	No
Has this release substantially damaged or will it substantially damage property or the environment	No
Is this release of a volume that is or may with reasonable probability be detrimental to fresh water	No

Nature and Volume of Release	
<i>Material(s) released, please answer all that apply below. Any calculations or specific justifications for the volumes provided should be attached to the follow-up C-141 submission.</i>	
Crude Oil Released (bbls) Details	Cause: Normal Operations Unknown Crude Oil Released: 0 BBL (Unknown Released Amount) Recovered: 0 BBL Lost: 0 BBL.
Produced Water Released (bbls) Details	Not answered.
Is the concentration of chloride in the produced water >10,000 mg/l	No
Condensate Released (bbls) Details	Not answered.
Natural Gas Vented (Mcf) Details	Not answered.
Natural Gas Flared (Mcf) Details	Not answered.
Other Released Details	Not answered.
Are there additional details for the questions above (i.e. any answer containing Other, Specify, Unknown, and/or Fire, or any negative lost amounts)	C-141 requested by OCD for area of impact identified in Google Earth aerial photo. Date of photo used in lieu of unknown release date. Environmental consultant obtained to investigate indicated area of approximately 900 sq. ft. located inside lined tank battery containment. Stained caliche being removed and disposed of at OCD approved facility. Preparing for liner inspection.

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Phone: (505) 476-3441

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Action 428921

QUESTIONS (continued)

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QUESTIONS

Nature and Volume of Release (continued)	
Is this a gas only submission (i.e. only significant Mcf values reported)	No, according to supplied volumes this does not appear to be a "gas only" report.
Was this a major release as defined by Subsection A of 19.15.29.7 NMAC	Yes
Reasons why this would be considered a submission for a notification of a major release	From paragraph A. "Major release" determine using: (1) an unauthorized release of a volume, excluding gases, of 25 barrels or more.

With the implementation of the 19.15.27 NMAC (05/25/2021), venting and/or flaring of natural gas (i.e. gas only) are to be submitted on the C-129 form.

Initial Response

The responsible party must undertake the following actions immediately unless they could create a safety hazard that would result in injury.

The source of the release has been stopped	True
The impacted area has been secured to protect human health and the environment	True
Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices	True
All free liquids and recoverable materials have been removed and managed appropriately	True
If all the actions described above have not been undertaken, explain why	Not answered.

Per Paragraph (4) of Subsection B of 19.15.29.8 NMAC the responsible party may commence remediation immediately after discovery of a release. If remediation has begun, please prepare and attach a narrative of actions to date in the follow-up C-141 submission. If remedial efforts have been successfully completed or if the release occurred within a lined containment area (see Subparagraph (a) of Paragraph (5) of Subsection A of 19.15.29.11 NMAC), please prepare and attach all information needed for closure evaluation in the follow-up C-141 submission.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD 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 OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD 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.

I hereby agree and sign off to the above statement	Name: Cindy Cottrell Title: Regulatory Coordinator Email: ccottrell@jdmii.com Date: 09/26/2024
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Action 428921

QUESTIONS (continued)

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 428921
	Action Type: [C-141] Deferral Request C-141 (C-141-v-Deferral)

QUESTIONS

Site Characterization
Please answer all the questions in this group (only required when seeking remediation plan approval and beyond). This information must be provided to the appropriate district office no later than 90 days after the release discovery date.

What is the shallowest depth to groundwater beneath the area affected by the release in feet below ground surface (ft bgs)	Between 100 and 500 (ft.)
What method was used to determine the depth to ground water	Attached Document
Did this release impact groundwater or surface water	No
What is the minimum distance, between the closest lateral extents of the release and the following surface areas:	
A continuously flowing watercourse or any other significant watercourse	Between 1000 (ft.) and ½ (mi.)
Any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)	Between 1 and 5 (mi.)
An occupied permanent residence, school, hospital, institution, or church	Between 1 and 5 (mi.)
A spring or a private domestic fresh water well used by less than five households for domestic or stock watering purposes	Between 1 and 5 (mi.)
Any other fresh water well or spring	Between 1 and 5 (mi.)
Incorporated municipal boundaries or a defined municipal fresh water well field	Between 1 and 5 (mi.)
A wetland	Between 1 and 5 (mi.)
A subsurface mine	Greater than 5 (mi.)
An (non-karst) unstable area	Greater than 5 (mi.)
Categorize the risk of this well / site being in a karst geology	High
A 100-year floodplain	Between 1 and 5 (mi.)
Did the release impact areas not on an exploration, development, production, or storage site	No

Remediation Plan
Please answer all the questions that apply or are indicated. This information must be provided to the appropriate district office no later than 90 days after the release discovery date.

Requesting a remediation plan approval with this submission	Yes
<i>Attach a comprehensive report demonstrating the lateral and vertical extents of soil contamination associated with the release have been determined, pursuant to 19.15.29.11 NMAC and 19.15.29.13 NMAC.</i>	
Have the lateral and vertical extents of contamination been fully delineated	Yes
Was this release entirely contained within a lined containment area	No

Soil Contamination Sampling: (Provide the highest observable value for each, in milligrams per kilograms.)

Chloride (EPA 300.0 or SM4500 Cl B)	2440
TPH (GRO+DRO+MRO) (EPA SW-846 Method 8015M)	2142.6
GRO+DRO (EPA SW-846 Method 8015M)	1746.6
BTEX (EPA SW-846 Method 8021B or 8260B)	1.6
Benzene (EPA SW-846 Method 8021B or 8260B)	0.1

Per Subsection B of 19.15.29.11 NMAC unless the site characterization report includes completed efforts at remediation, the report must include a proposed remediation plan in accordance with 19.15.29.12 NMAC, which includes the anticipated timelines for beginning and completing the remediation.

On what estimated date will the remediation commence	10/26/2024
On what date will (or did) the final sampling or liner inspection occur	01/22/2025
On what date will (or was) the remediation complete(d)	01/22/2025
What is the estimated surface area (in square feet) that will be reclaimed	11490
What is the estimated volume (in cubic yards) that will be reclaimed	1502
What is the estimated surface area (in square feet) that will be remediated	11490
What is the estimated volume (in cubic yards) that will be remediated	1502

These estimated dates and measurements are recognized to be the best guess or calculation at the time of submission and may (be) change(d) over time as more remediation efforts are completed.
The OCD recognizes that proposed remediation measures may have to be minimally adjusted in accordance with the physical realities encountered during remediation. If the responsible party has any need to significantly deviate from the remediation plan proposed, then it should consult with the division to determine if another remediation plan submission is required.

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Action 428921

QUESTIONS (continued)

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 428921
	Action Type: [C-141] Deferral Request C-141 (C-141-v-Deferral)

QUESTIONS

Remediation Plan (continued)

Please answer all the questions that apply or are indicated. This information must be provided to the appropriate district office no later than 90 days after the release discovery date.

This remediation will (or is expected to) utilize the following processes to remediate / reduce contaminants:

(Select all answers below that apply.)

(Ex Situ) Excavation and off-site disposal (i.e. dig and haul, hydrovac, etc.)	Yes
Which OCD approved facility will be used for off-site disposal	Not answered.
OR which OCD approved well (API) will be used for off-site disposal	Not answered.
OR is the off-site disposal site, to be used, out-of-state	Yes
In which state is the disposal taking place	TX
What is the name of the out-of-state facility	R360 Red Bluff Facility, Orla
OR is the off-site disposal site, to be used, an NMED facility	No
(Ex Situ) Excavation and on-site remediation (i.e. On-Site Land Farms)	No
(In Situ) Soil Vapor Extraction	No
(In Situ) Chemical processing (i.e. Soil Shredding, Potassium Permanganate, etc.)	No
(In Situ) Biological processing (i.e. Microbes / Fertilizer, etc.)	No
(In Situ) Physical processing (i.e. Soil Washing, Gypsum, Disking, etc.)	No
Ground Water Abatement pursuant to 19.15.30 NMAC	No
OTHER (Non-listed remedial process)	No

Per Subsection B of 19.15.29.11 NMAC unless the site characterization report includes completed efforts at remediation, the report must include a proposed remediation plan in accordance with 19.15.29.12 NMAC, which includes the anticipated timelines for beginning and completing the remediation.

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD 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 OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD 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.

I hereby agree and sign off to the above statement	Name: Cindy Cottrell Title: Regulatory Coordinator Email: ccottrell@jdmii.com Date: 02/06/2025
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The OCD recognizes that proposed remediation measures may have to be minimally adjusted in accordance with the physical realities encountered during remediation. If the responsible party has any need to significantly deviate from the remediation plan proposed, then it should consult with the division to determine if another remediation plan submission is required.

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Action 428921

QUESTIONS (continued)

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	Action Number: 428921
	Action Type: [C-141] Deferral Request C-141 (C-141-v-Deferral)

QUESTIONS

Deferral Requests Only	
<i>Only answer the questions in this group if seeking a deferral upon approval this submission. Each of the following items must be confirmed as part of any request for deferral of remediation.</i>	
Requesting a deferral of the remediation closure due date with the approval of this submission	Yes
Have the lateral and vertical extents of contamination been fully delineated	Yes
Is the remaining contamination in areas immediately under or around production equipment where remediation could cause a major facility deconstruction	Yes
Please list or describe the production equipment and how (re)moving the equipment would cause major facility deconstruction	The equipment on site includes 3 - 500 bbl steel oil tanks, 2 - 500 bbl fiberglass produced water tanks, a 750 bbl fiberglass gun barrel, and a separator on a concrete pad. Removal of this equipment would cause major facility deconstruction. The wells would need to be shut in, production pipelines disconnected and tanks emptied, cleaned and moved off location. The concrete pad would need to be removed.
What is the remaining surface area (in square feet) that will still need to be remediated if a deferral is granted	2900
What is the remaining volume (in cubic yards) that will still need to be remediated if a deferral is granted	373
<i>Per Paragraph (2) of Subsection C of 19.15.29.12 NMAC if contamination is located in areas immediately under or around production equipment such as production tanks, wellheads and pipelines where remediation could cause a major facility deconstruction, the remediation, restoration and reclamation may be deferred with division written approval until the equipment is removed during other operations, or when the well or facility is plugged or abandoned, whichever comes first.</i>	
Enter the facility ID (f#) on which this deferral should be granted	Not answered.
Enter the well API (30-) on which this deferral should be granted	30-015-37264 OGDEN STATE #005A
Contamination does not cause an imminent risk to human health, the environment, or groundwater	True
<i>Per Subsection B of 19.15.29.11 NMAC unless the site characterization report includes completed efforts at remediation, the report must include a proposed remediation plan in accordance with 19.15.29.12 NMAC, which includes the anticipated timelines for beginning and completing the remediation.</i>	
I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD 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 OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD 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.	
I hereby agree and sign off to the above statement	Name: Cindy Cottrell Title: Regulatory Coordinator Email: ccottrell@jdmii.com Date: 02/06/2025

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QUESTIONS (continued)

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QUESTIONS

Sampling Event Information	
Last sampling notification (C-141N) recorded	422777
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	01/22/2025
What was the (estimated) number of samples that were to be gathered	11
What was the sampling surface area in square feet	2200

Remediation Closure Request	
<i>Only answer the questions in this group if seeking remediation closure for this release because all remediation steps have been completed.</i>	
Requesting a remediation closure approval with this submission	No

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CONDITIONS

Action 428921

CONDITIONS

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CONDITIONS

Created By	Condition	Condition Date
bhall	Deferral approved until the equipment is removed during other operations, or when the well or facility is plugged or abandoned, whichever comes first.	2/7/2025
bhall	Photos identified as figures 28-30 say "view of the excavation" while it's actually view of the liner being installed after all confirmation and deferral samples have been collected per operator's consultant.	2/7/2025