



February 20, 2025

New Mexico Energy Minerals and Natural Resources Department

New Mexico Oil and Gas Conservation Division
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

**Re: Closure Request
Nash Unit 53 SWD
Incident Numbers nAPP2406163532 & nAPP2430437322
Eddy County, New Mexico**

To Whom It May Concern:

Ensolum, LLC (Ensolum), on behalf of XTO Energy, Inc. (XTO), has prepared this *Closure Request* to document assessment, excavation, and soil sampling activities at the Nash Unit 53 SWD (Site). The purpose of the assessment and soil sampling activities was to assess for the presence or absence of impacts to soil following two releases of produced water. Based on field observations, field screening activities, and soil sample laboratory analytical results, XTO is submitting this *Closure Request*, describing delineation and excavation activities that have occurred and requesting no further action for Incident Numbers nAPP2406163532 & nAPP2430437322.

SITE DESCRIPTION AND RELEASE BACKGROUND

The Site is located in Unit H, Section 13, Township 23 South, Range 29 East, in Eddy County, New Mexico (32.307893°, -103.933313°) and is associated with oil and gas exploration and production operations on State Trust Land managed by the New Mexico State Land Office (NMSLO) under Lease ID K066000003.

On February 20, 2024, a stainless-steel tubing at the well head developed a pin hole leak resulting in the release of approximately 11.37 barrels (bbls) of produced water onto the surface of the well pad. A vacuum truck was immediately dispatched to the Site to recover free-standing fluids; 10.00 bbls of produced water were recovered. XTO reported the release to the New Mexico Oil Conservation Division (NMOCD) via Notification of Release (NOR) and an Initial C-141 Application (C-141) on March 1, 2024. The release was assigned Incident Number nAPP2406163532.

On August 16, 2024, XTO submitted an extension request for multiple past due incidents via email to the NMOCD. The extension request stated:

XTO is requesting an extension for a remediation work plan or closure report required in 19.15.29.12.B.(1) NMAC for the attached locations/incident numbers listed in this message. We understand that the releases all occurred between February and March of this year and attendant documentation is overdue. Kindly be aware that these occurred during a high turnover period of personnel in our department, transitioning staff, and a large company-wide data migration that collectively disturbed our incident tracking efforts for remediation. In our efforts to correct the

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issue, XTO is proactively assigning each of these incidents to be successfully addressed by contractors for closure in accordance with 19.15.29.12 NMAC.

On August 19, 2024, the NMOCD denied the extension request for the following reason:

An extension request needs to be requested before the Remediation Closure Report Due Date Deadline. All of these incidents are at least 60 days out of compliance. The extension requests are denied. Please include this e-mail correspondence in the remediation and/or closure reports.

While the extension request was denied by NMOCD, remediation efforts at the Site continued and the release was addressed in accordance with Title 19, Chapter 15, Part 29, Section 12 (19.15.29.12) of the New Mexico Administrative Code (NMAC).

On October 29, 2024, human error in frac tank operations resulted in the release of approximately 7 bbls of produced water onto the surface of the well pad. A vacuum truck was immediately dispatched to the Site to recover free-standing fluids; 5 bbls of produced water were recovered. XTO reported the release to the NMOCD via NOR on October 30, 2024, and subsequently a C-141 on October 31, 2024. The release was assigned Incident Number nAPP2430437322.

SITE CHARACTERIZATION AND CLOSURE CRITERIA

The Site was characterized to assess the applicability of Table I, Closure Criteria for Soils Impacted by a Release, of 19.15.29 NMAC. Results from the characterization desktop review are presented below. Potential Site receptors are identified on Figure 1.

Depth to groundwater at the Site is estimated to be less than 50 feet below ground surface (bgs) based on nearby depth to groundwater data. On February 24, 2022, a soil boring permitted by New Mexico Office of the State Engineer (NMOSE) (C-4594 POD 7) was completed approximately 0.18 miles northeast of the Site utilizing hollow stem auger drilling method. Soil boring C-4594 POD 7 was drilled to a depth of 34 feet bgs. A field geologist logged and described soil continuously. Groundwater was encountered at 28 feet bgs. The borehole was properly abandoned with a slurry of Portland Type I/II Neat cement, utilizing a tremie from 34 feet bgs to surface. The Well Record & Log for C-4594 POD 7 is included in Appendix A.

The closest continuously flowing or significant watercourse to the Site is an intermittent dry wash, located approximately 766 feet south of the Site. The Site is greater than 200 feet from a lakebed, sinkhole, or playa lake and greater than 300 feet from an occupied residence, school, hospital, institution, church, or wetland. The Site is greater than 1,000 feet to a freshwater well or spring and is not within a 100-year floodplain or overlying a subsurface mine. The Site is underlain by unstable geology (high potential karst designation area).

Based on the results of the Site Characterization, the following NMOCD Table I Closure Criteria (Closure Criteria) apply:

- Benzene: 10 milligrams per kilogram (mg/kg)
- Benzene, toluene, ethylbenzene, and total xylenes (BTEX): 50 mg/kg
- Total petroleum hydrocarbons (TPH): 100 mg/kg
- Chloride: 600 mg/kg

NMSLO CULTURAL RESOURCES AND BIOLOGICAL REVIEW

Cultural Properties Protection

Since the releases occurred on the well pad, the Site is exempt from the Cultural Properties Protection Rule (CPP). As such, no additional cultural resource surveys were completed in connection with these releases.

Biological Review

Ensolum personnel conducted a desktop review to establish if the Site is within an area of possible threatened, endangered, and sensitive wildlife and plant species, environmentally sensitive areas, surface waters, and sensitive soils.

- A review of the U.S. Fish and Wildlife Services Information for Planning and Consultation (IPaC) resources indicated there are no critical wildlife habitats at the Site. A review of the Bureau of Land Management (BLM) New Mexico Plant Wildlife Habitat maps indicated potential habitats for Wright's water willow, Scheer's beehive cactus, and Tharp's blue-star near the Site. Threatened and endangered plant species are potentially present in the area surrounding the Site; however, no native vegetation outside of the well pad extent was disturbed during remediation activities since the releases both occurred on the well pad.
- The Site is located within an area of possible range of the Lesser Prairie Chicken habitat based on a review of NMSLO Candidate Conservation Agreement with Assurances (CCAA) map.
 - From March 1st through June 15th, no remediation activities would occur between the hours of 3:00 am to 9:00 am to protect any Lesser Prairie Chickens within the area.
- The Site is underlain by unstable geology (high potential karst designation area) and depth to groundwater is estimated to be less than 50 feet bgs, as determined by the Site Characterization.
- The Natural Resources Conservation Service (NRCS) Web Soil Survey classifies the soil type at the Site as Simona-Bippus complex. The Simona-Bippus complex is not considered a sensitive soil per the NMSLO guidelines. The release occurred on the caliche surface of the well pad, limiting contact with potentially sensitive native soil.

SITE ASSESSMENT AND DELINEATION ACTIVITIES

On September 12, 2024, Ensolum personnel visited the Site to evaluate the release extent based on information provided on the C-141 and visual observations for Incident Number nAPP2406163532. The release extent was mapped utilizing a handheld Global Positioning System (GPS) unit. On October 21, 2024, Ensolum personnel returned to the Site to oversee delineation activities. Three potholes (PH01 through PH03) were advanced via backhoe within the release area to assess the vertical extent of the release. Delineation soil samples were collected in each pothole at depths ranging from 0.5 feet to 4 feet bgs. The soil samples were field screened for volatile organic compounds (VOCs) utilizing a calibrated photoionization detector (PID) and chloride utilizing Hach[®] chloride QuanTab[®] test strips. Field screening results and observations were logged on lithologic/soil sampling logs, which are included in Appendix B. The release extent and delineation soil sample locations are depicted in Figure 2. Photographic documentation was completed during both Site visits and a photographic log is included in Appendix C.

The soil samples were placed directly into pre-cleaned glass jars, labeled with the location, date, time, sampler name, method of analysis, and immediately placed on ice. The soil samples were transported

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under strict chain-of-custody procedures to Cardinal Laboratories (Cardinal) in Hobbs, New Mexico, for analysis of the following constituents of concern (COCs): BTEX following United States Environmental Protection Agency (EPA) Method 8021B; TPH-gasoline range organics (GRO), TPH-diesel range organics (DRO), and TPH-oil range organics (ORO) following EPA Method 8015M/D; and chloride following Standards Method SM4500.

Laboratory analytical results for delineation soil samples PH01 through PH03, collected from 0.5 feet bgs, and PH01A collected from 4 feet bgs indicated chloride concentrations exceeded Closure Criteria. All other delineation soil samples collected indicated all COC concentrations were below Closure Criteria.

On October 29, 2024, following the delineation activities completed for Incident Number nAPP2406163532, the produced water release in accordance with Incident Number nAPP2430437322 had occurred. Ensolum personnel returned to the Site to conduct Site assessment activities and evaluate the newer release. The release extent was mapped utilizing a GPS unit and overlapped the southern area of the first release. The release extent is depicted on Figure 2.

EXCAVATION ACTIVITIES

Between January 20 and January 28, 2025, Ensolum personnel returned to the Site to oversee excavation activities. Impacted soil was excavated from the release areas as indicated by visible staining and delineation soil sample analytical data. Excavation activities were performed utilizing heavy equipment. To direct excavation activities, Ensolum personnel field screened soil for VOCs and chloride. Following removal of impacted soil, Ensolum personnel collected 5-point composite soil samples representing no more than 200 square feet from the sidewalls and floor of the excavation. The 5-point composite soil samples were collected by placing five equivalent aliquots of soil into a 1-gallon, resealable plastic bag and homogenizing the samples by thoroughly mixing.

Excavation soil samples FS01 through FS52 were collected from the floor of the excavation at depths ranging from 4 feet to 5 feet bgs. Excavation sidewall soil samples SW01 through SW12 were collected from the sidewalls of the excavation at depths ranging from ground surface to 5 feet bgs. The confirmation soil samples were collected, handled, and analyzed following the same procedures described above and were submitted to Cardinal. The final excavation extent and confirmation soil sample locations are depicted in Figure 3.

The final excavation extent measured approximately 10,250 square feet. A total of approximately 1,980 cubic yards of impacted soil were removed during the excavation activities. The impacted soil was transported and properly disposed of at the R360 Landfill Facility in Hobbs, New Mexico. Copies of all disposal manifests are included in Appendix D.

LABORATORY ANALYTICAL RESULTS

Laboratory analytical results for all final excavation soil samples indicated all COC concentrations were compliant with Closure Criteria. Impacted soil previously identified in delineation soil samples PH01 through PH03, and PH01A, were removed during excavation activities. Laboratory analytical results are summarized in Table 1 and laboratory analytical reports are included in Appendix E.

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CLOSURE REQUEST

Delineation and excavation activities were conducted at the Site to address impacted soil identified following two produced water releases. Laboratory analytical results for the confirmation soil samples collected from the final excavation extent, indicated all COCs were compliant with the Closure Criteria. Based on the soil sample analytical results, no further remediation was required. XTO will backfill the excavation with material purchased locally and recontour the Site to match pre-existing site conditions.

Excavation of impacted soil has mitigated impacts at this Site. XTO believes these remedial actions are protective of human health, the environment, and groundwater. As such, XTO respectfully requests closure for Incident Numbers nAPP2406163532 & nAPP2430437322.

If you have any questions or comments, please contact Ms. Tacoma Morrissey at (337) 257-8307 or tmorrissey@ensolum.com.

Sincerely,
Ensolum, LLC

Tracy Hillard
Project Engineer

Daniel R. Moir, PG (Licensed in WY & TX)
Senior Managing Geologist

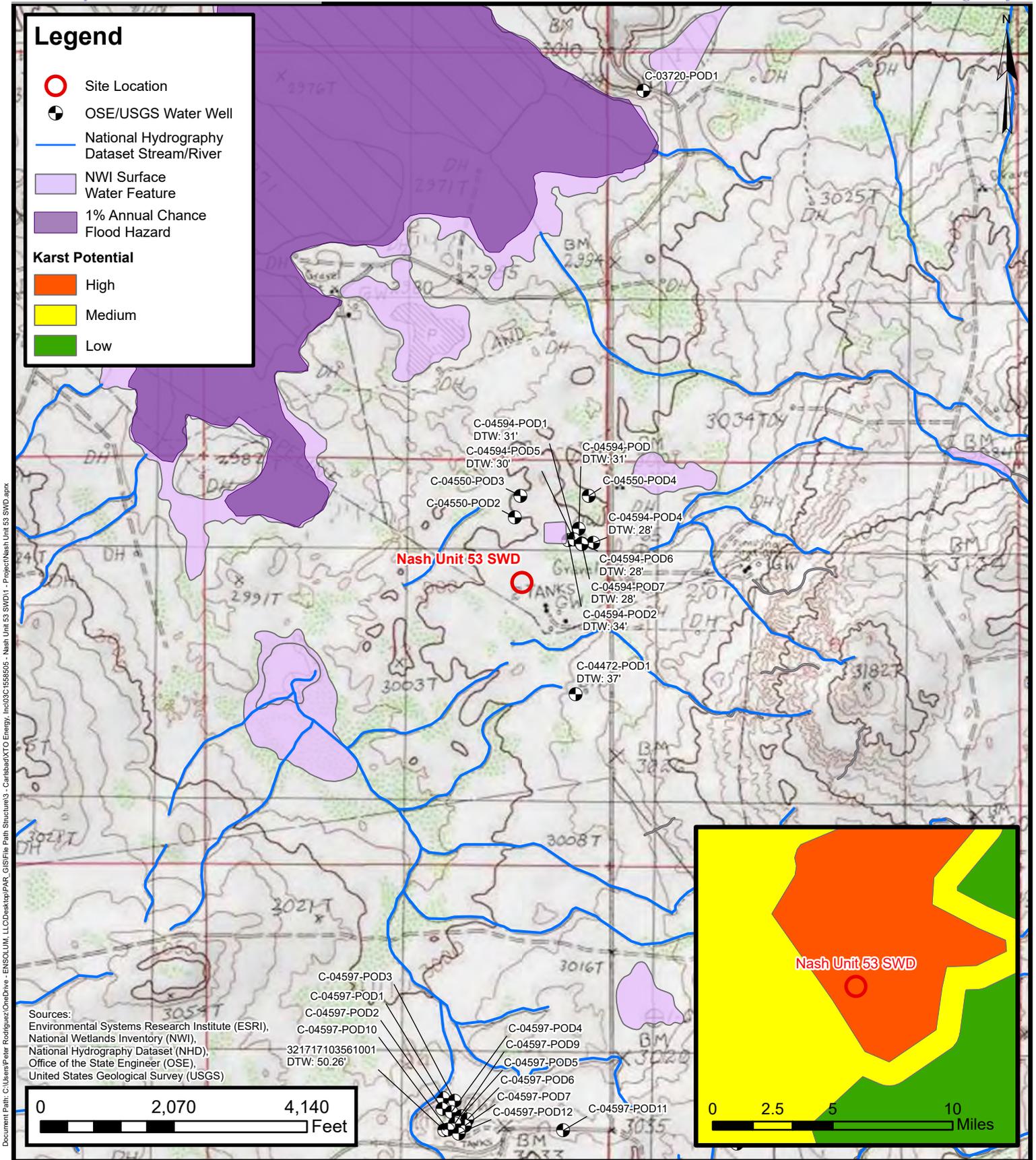
cc: Dale Woodall, XTO
Kaylan Dirkx, XTO
NMSLO

Appendices:

- Figure 1 Site Receptor Map
- Figure 2 Delineation Soil Sample Locations
- Figure 3 Excavation Soil Sample Locations
- Table 1 Soil Sample Analytical Results
- Appendix A Referenced Well Records
- Appendix B Lithologic / Soil Sampling Logs
- Appendix C Photographic Log
- Appendix D Disposal Manifests
- Appendix E Laboratory Analytical Reports & Chain-of-Custody Documentation



FIGURES



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Site Receptor Map

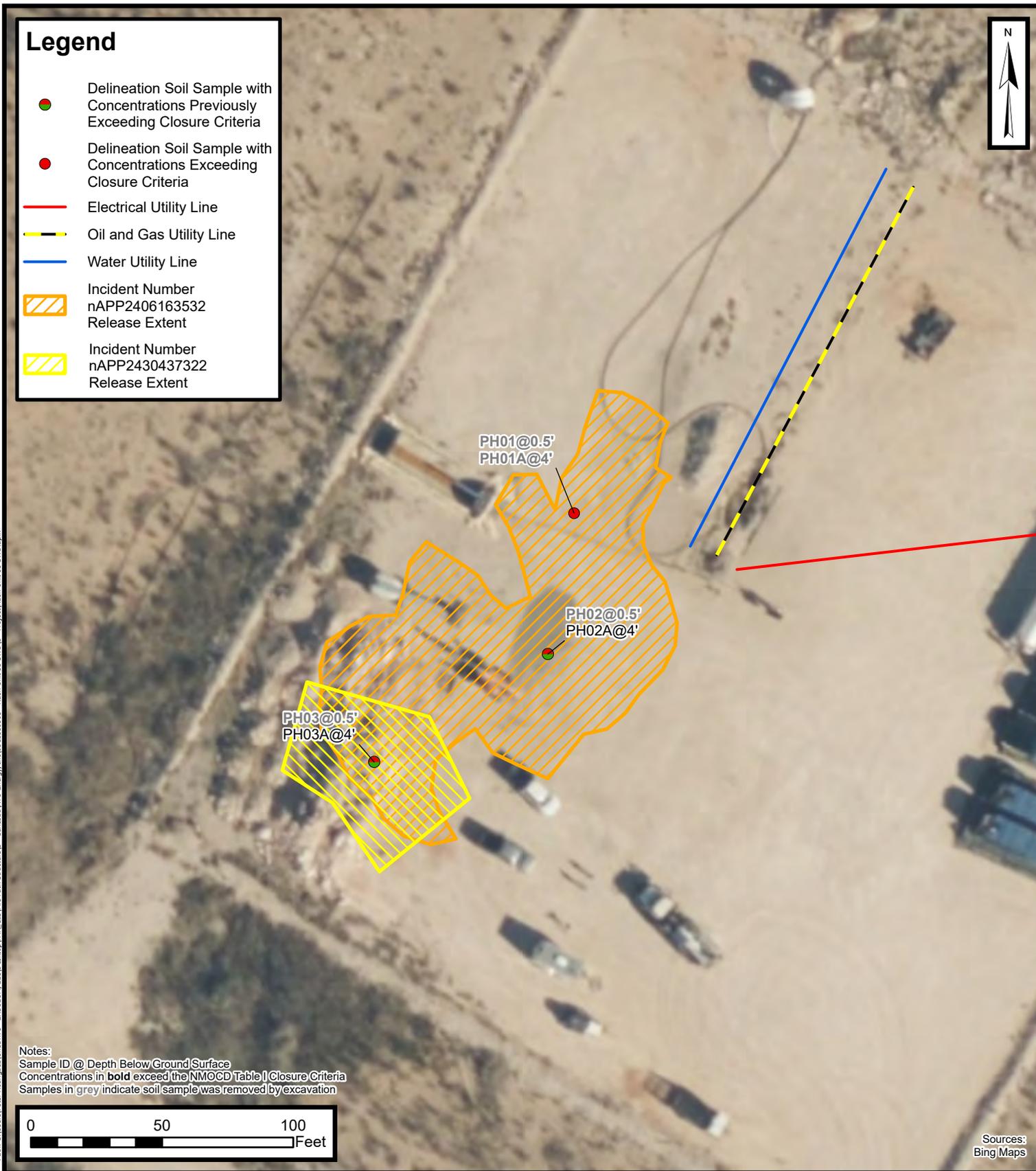
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Unit H, Sec 13, T23S, R29E
Eddy County, New Mexico

FIGURE

1



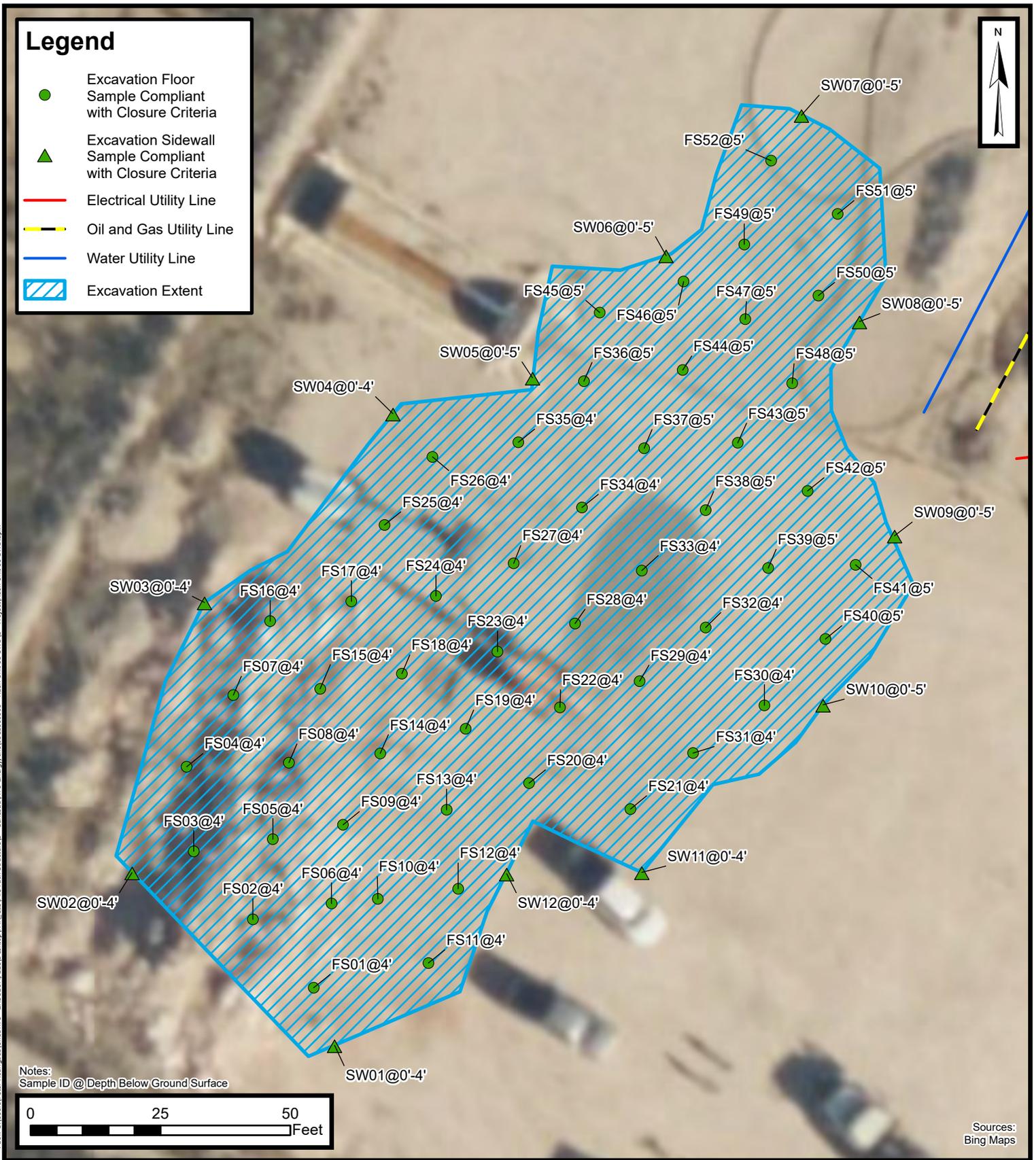
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Delineation Soil Sample Locations

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FIGURE
2



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Excavation Soil Sample Locations

XTO Energy Inc.
Nash Unit 53 SWD

Incident Numbers: nAPP2406163532 & nAPP2430437322

Unit H, Sec 13, T23S, R29E
Eddy County, New Mexico

FIGURE

3



TABLES



TABLE 1
SOIL SAMPLE ANALYTICAL RESULTS
 Nash Unit 53 SWD
 XTO Energy, Inc
 Eddy County, New Mexico

Sample I.D.	Sample Date	Sample Depth (feet bgs)	Benzene (mg/kg)	Total BTEX (mg/kg)	TPH GRO (mg/kg)	TPH DRO (mg/kg)	TPH ORO (mg/kg)	GRO+DRO (mg/kg)	Total TPH (mg/kg)	Chloride (mg/kg)
NMOCD Table I Closure Criteria (NMAC 19.15.29)			10	50	NE	NE	NE	NE	100	600
Delineation Soil Samples										
PH01	10/21/2024	0.5	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	2,600
PH01A	10/21/2024	4	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	2,760
PH02	10/21/2024	0.5	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	4,000
PH02A	10/21/2024	4	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	368
PH03	10/21/2024	0.5	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	2,800
PH03A	10/21/2024	4	<0.050	<0.300	<20.0	<10.0	<10.0	<10.0	<10.0	48.0
Confirmation Soil Samples										
FS01	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
FS02	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	432
FS03	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	112
FS04	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS05	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
FS06	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	144
FS07	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
FS08	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	64.0
FS09	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	480
FS10	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	144
FS11	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	368
FS12	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	160
FS13	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	144
FS14	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	144
FS15	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	208
FS16	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	64.0
FS17	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	352
FS18	01/23/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS19	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	400
FS20	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS21	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS22	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	400
FS23	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	448
FS24	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320



TABLE 1
SOIL SAMPLE ANALYTICAL RESULTS
 Nash Unit 53 SWD
 XTO Energy, Inc
 Eddy County, New Mexico

Sample I.D.	Sample Date	Sample Depth (feet bgs)	Benzene (mg/kg)	Total BTEX (mg/kg)	TPH GRO (mg/kg)	TPH DRO (mg/kg)	TPH ORO (mg/kg)	GRO+DRO (mg/kg)	Total TPH (mg/kg)	Chloride (mg/kg)
NMOCD Table I Closure Criteria (NMAC 19.15.29)			10	50	NE	NE	NE	NE	100	600
FS25	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS26	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS27	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS28	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
FS29	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
FS30	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS31	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
FS32	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	112
FS33	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
FS34	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS35	01/27/2025	4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	112
FS36	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	288
FS37	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	208
FS38	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	288
FS39	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	224
FS40	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS41	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
FS42	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	464
FS43	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	336
FS44	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	160
FS45	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
FS46	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	400
FS47	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	416
FS48	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	320
FS49	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	288
FS50	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	400
FS51	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	224
FS52	01/27/2025	5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	128
SW01	01/23/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
SW02	01/23/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	96.0
SW03	01/23/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	80.0
SW04	01/23/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	144



TABLE 1 SOIL SAMPLE ANALYTICAL RESULTS Nash Unit 53 SWD XTO Energy, Inc Eddy County, New Mexico										
Sample I.D.	Sample Date	Sample Depth (feet bgs)	Benzene (mg/kg)	Total BTEX (mg/kg)	TPH GRO (mg/kg)	TPH DRO (mg/kg)	TPH ORO (mg/kg)	GRO+DRO (mg/kg)	Total TPH (mg/kg)	Chloride (mg/kg)
NMOCD Table I Closure Criteria (NMAC 19.15.29)			10	50	NE	NE	NE	NE	100	600
SW05	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
SW06	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	256
SW07	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	256
SW08	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	256
SW09	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	240
SW10	01/28/2025	0 - 5	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	176
SW11	01/28/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	176
SW12	01/28/2025	0 - 4	<0.050	<0.300	<10.0	<10.0	<10.0	<10.0	<10.0	160

Notes:

bgs: below ground surface

mg/kg: milligrams per kilogram

NMOCD: New Mexico Oil Conservation Division

BTEX: Benzene, Toluene, Ethylbenzene, and Xylenes

Concentrations in **bold** exceed the NMOCD Table I Closure Criteria or reclamation requirement where applicable.

GRO: Gasoline Range Organics

DRO: Diesel Range Organics

ORO: Oil Range Organics

TPH: Total Petroleum Hydrocarbon

NMAC: New Mexico Administrative Code

Grey text indicates soil sample removed during excavation activities



APPENDIX A

Referenced Well Records



WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

FILED MAR 30 2022 10:15

1. GENERAL AND WELL LOCATION	OSE POD NO. (WELL NO.) POD7 (BH-11)		WELL TAG ID NO. n/a		OSE FILE NO(S). C-4594		
	WELL OWNER NAME(S) XTO Energy , Inc. attn:Adrian Baker				PHONE (OPTIONAL) (432)-236-3808		
	WELL OWNER MAILING ADDRESS 6401 Holiday Hill Dr.				CITY Midland	STATE Texas	ZIP 79707
	WELL LOCATION (FROM GPS)	LATITUDE	DEGREES 32	MINUTES 18	SECONDS 33.32	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84	
		LONGITUDE	103	55	50.69		
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS - PLSS (SECTION, TOWNSHIP, RANGE) WHERE AVAILABLE SE NE Sec. 13 T23S R29E, NMPM							

2. DRILLING & CASING INFORMATION	LICENSE NO. 1249	NAME OF LICENSED DRILLER Jackie D. Atkins			NAME OF WELL DRILLING COMPANY Atkins Engineering Associates, Inc.			
	DRILLING STARTED 02/24/2022	DRILLING ENDED 02/24/2022	DEPTH OF COMPLETED WELL (FT) 34	BORE HOLE DEPTH (FT) ±34	DEPTH WATER FIRST ENCOUNTERED (FT) 28			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)				STATIC WATER LEVEL IN COMPLETED WELL (FT) 28	DATE STATIC MEASURED 2/24/22		
	DRILLING FLUID: <input type="checkbox"/> AIR <input type="checkbox"/> MUD ADDITIVES - SPECIFY:							
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input checked="" type="checkbox"/> OTHER - SPECIFY: Hollow Stem Auger					CHECK HERE IF PITLESS ADAPTER IS INSTALLED <input type="checkbox"/>		
	DEPTH (feet bgl)		BORE HOLE DIAM (inches)	CASING MATERIAL AND/OR GRADE (include each casing string, and note sections of screen)	CASING CONNECTION TYPE (add coupling diameter)	CASING INSIDE DIAM. (inches)	CASING WALL THICKNESS (inches)	SLOT SIZE (inches)
	FROM	TO						
	0	24	±6.5	2" SCH 40 PVC Riser	Flush Thread 2 TPI	2.067	0.154	--
	24	34	±6.5	2" SCH 40 PVC Screen	Flush Thread 2 TPI	2.067	0.154	0.010

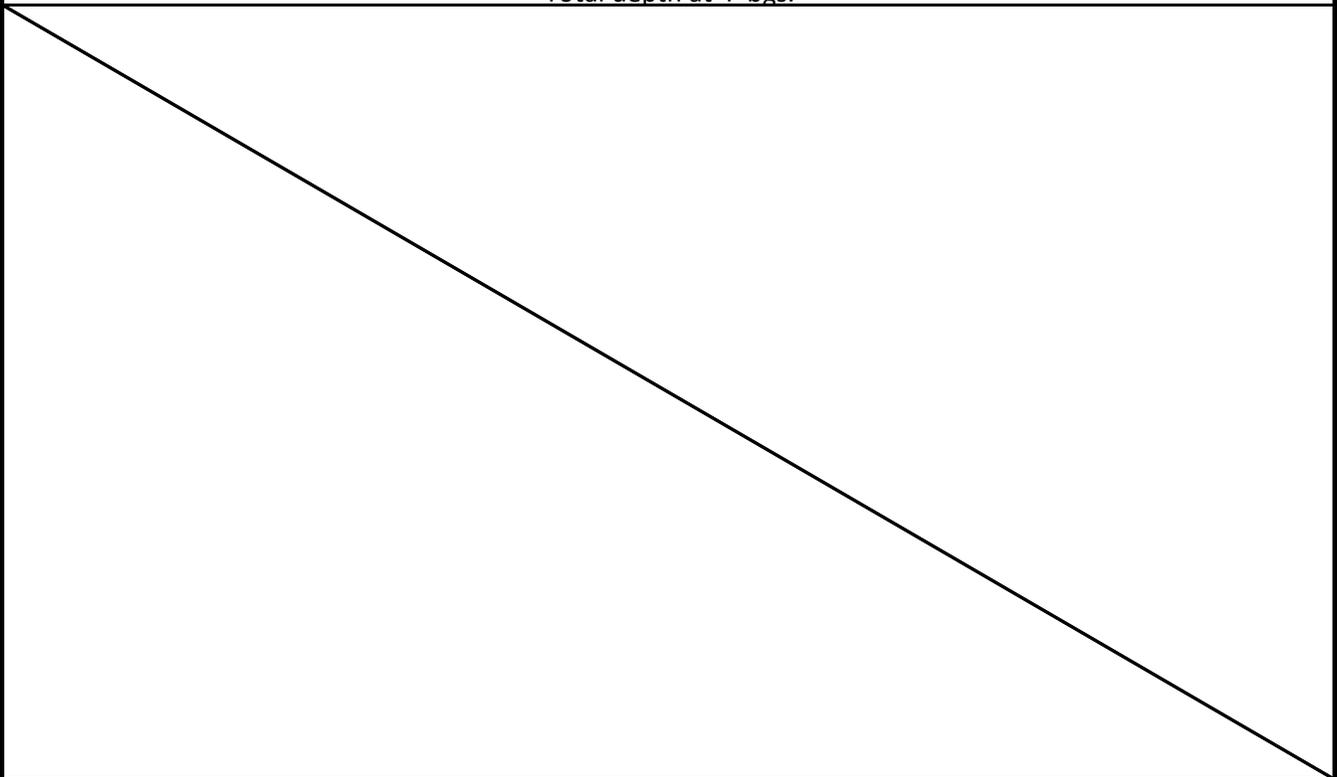
3. ANNULAR MATERIAL	DEPTH (feet bgl)		BORE HOLE DIAM. (inches)	LIST ANNULAR SEAL MATERIAL AND GRAVEL PACK SIZE-RANGE BY INTERVAL	AMOUNT (cubic feet)	METHOD OF PLACEMENT
	FROM	TO				

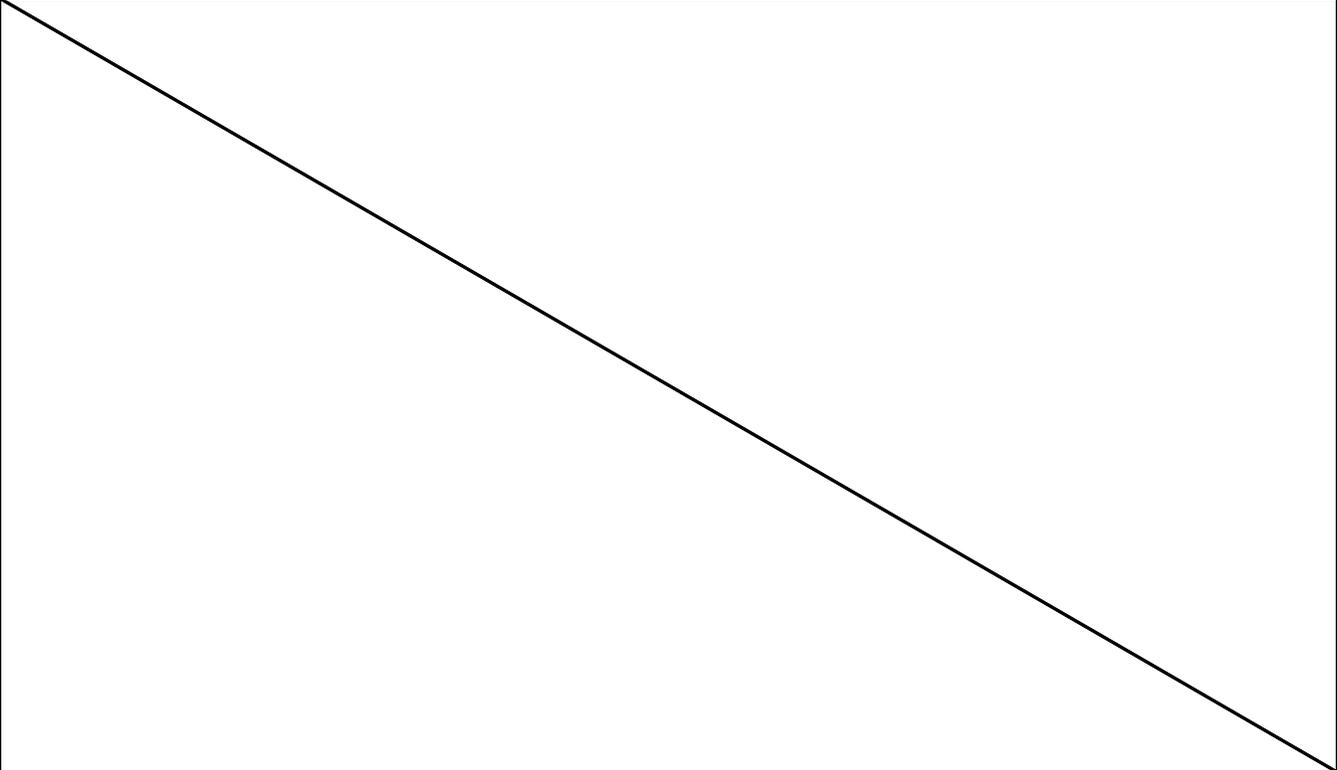
FOR OSE INTERNAL USE		WR-20 WELL RECORD & LOG (Version 01/28/2022)			
FILE NO. C-4594-POD7	POD NO. POD7	TRN NO. 723705			
LOCATION 23S 29E 13	4-2-2	WELL TAG ID NO. N/A	PAGE 1 OF 2		

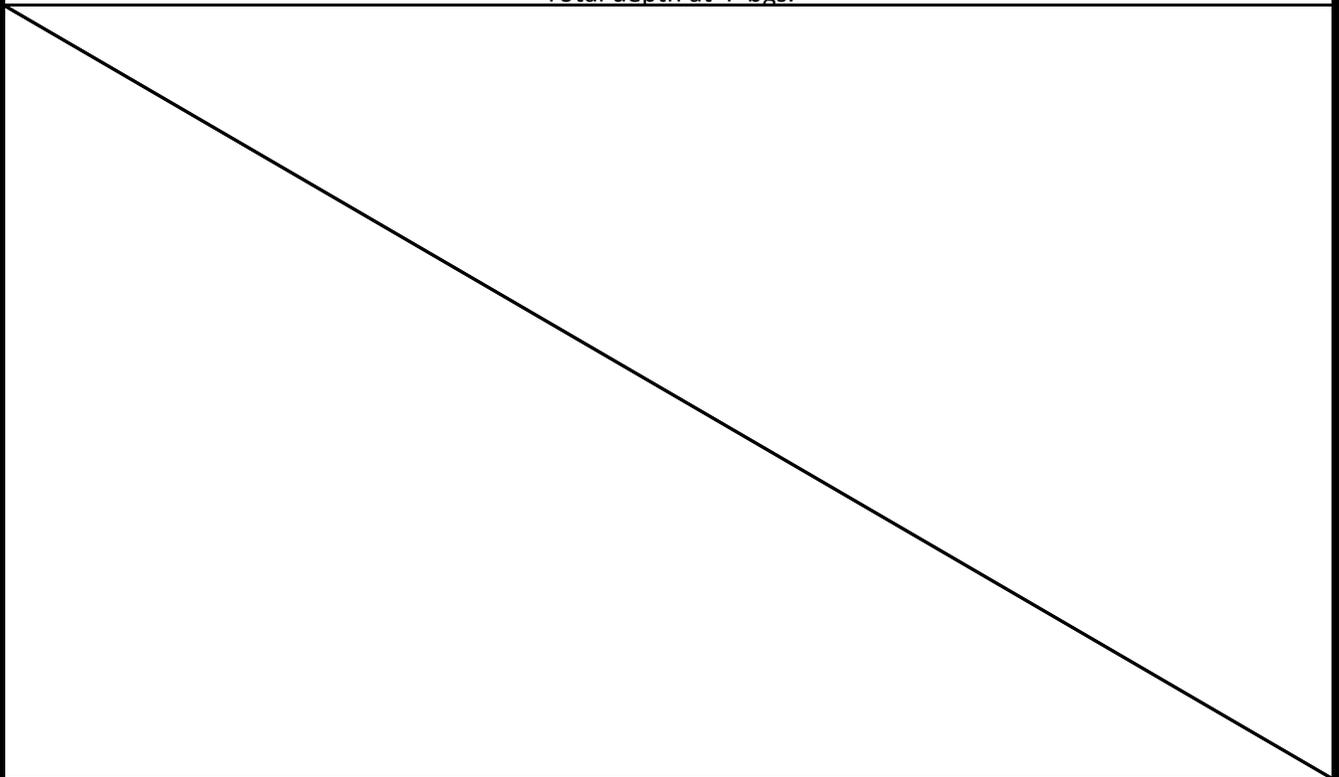


APPENDIX B

Lithologic Soil Sampling Logs

					Sample Name: PH01		Date: 10/21/2024	
					Site Name: Nash Unit SWD 53			
					Incident Numbers: nAPP2406163532 & nAPP2430437322			
					Job Number: 03C1558505			
LITHOLOGIC / SOIL SAMPLING LOG					Logged By: JD		Method: Backhoe	
Coordinates: 32.3079423, -103.9334382					Hole Diameter: 2.5'		Total Depth: 4'	
Comments: Field screening conducted with HACH Chloride Test Strips and PID for chloride and vapor, respectively. Chloride test performed with 1:4 dilution factor of soil to distilled water. A 40% correction factor for chloride is included.								
Moisture Content	Chloride (ppm)	Vapor (ppm)	Staining	Sample ID	Sample Depth (ft bgs)	Depth (ft bgs)	USCS/Rock Symbol	Lithologic Descriptions
D	9,296	0.0	Y	PH01	0.5	0	CCHE	0-2' CALICHE, tan silty, indurated. Stain, no odor.
D	6,261	0.0	Y		1	1		
D	4,088	0.0	Y		2	2	SC	2-4' CLAYEY SAND, brown, very fine, poorly graded. Stain, no odor.
D	3,388	0.0	Y		3	3		
D	5,309	0.0	Y	PH01A	4	4		
Total depth at 4' bgs.								
								

						Sample Name: PH02		Date: 10/21/2024	
						Site Name: Nash Unit SWD 53			
						Incident Numbers: nAPP2406163532 & nAPP2430437322			
						Job Number: 03C1558505			
LITHOLOGIC / SOIL SAMPLING LOG						Logged By: JD		Method: Backhoe	
Coordinates: 32.3078180, -103.9334654						Hole Diameter: 2.5'		Total Depth: 4'	
Comments: Field screening conducted with HACH Chloride Test Strips and PID for chloride and vapor, respectively. Chloride test performed with 1:4 dilution factor of soil to distilled water. A 40% correction factor for chloride is included.									
Moisture Content	Chloride (ppm)	Vapor (ppm)	Staining	Sample ID	Sample Depth (ft bgs)	Depth (ft bgs)	USCS/Rock Symbol	Lithologic Descriptions	
D	4,088	0.0	Y	PH02	0.5	0	CCHE	0-1' CALICHE, tan silty, indurated. Stain, no odor.	
D	1,954	0.0	N		1	1	SC	1-4' CLAYEY SAND, brown, very fine, poorly graded. No stain, no odor.	
D	823	0.0	N		2	2			
D	1,159	0.0	N		3	3		3-4' No stain, no odor.	
D	442	0.0	N	PH02A	4	4			
Total depth at 4' bgs.									
									

					Sample Name: PH03		Date: 10/21/2024	
					Site Name: Nash Unit SWD 53			
					Incident Numbers :nAPP2406163532 & nAPP2430437322			
					Job Number: 03C1558505			
LITHOLOGIC / SOIL SAMPLING LOG					Logged By: JD		Method: Backhoe	
Coordinates: 32.3077228, -103.9336469					Hole Diameter: 2.5'		Total Depth: 4'	
Comments: Field screening conducted with HACH Chloride Test Strips and PID for chloride and vapor, respectively. Chloride test performed with 1:4 dilution factor of soil to distilled water. A 40% correction factor for chloride is included.								
Moisture Content	Chloride (ppm)	Vapor (ppm)	Staining	Sample ID	Sample Depth (ft bgs)	Depth (ft bgs)	USCS/Rock Symbol	Lithologic Descriptions
D	3,388	0.0	Y	PH03	0.5	0	CCHE	0-1' CALICHE, tan silty, indurated. Stain, odor.
D	1,820	0.0	Y		1	1	SC	1-4' CLAYEY SAND, brown, very fine, poorly graded. No stain, no odor.
D	498	0.0	N		2	2		
D	<168	0.0	N		3	3		
D	<168	0.0	N	PH03A	4	4		
Total depth at 4' bgs.								
								



APPENDIX C
Photographic Log



APPENDIX D

Disposal Manifests



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Roth

Phone No. _____

GENERATOR

NO. **HW-725954**

Generator Manifest # XTO

Location of Origin NASH UNIT 53 2nd

Generator Name _____

Name & No. _____

Address _____

County _____

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 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)	<u>BELLY</u>
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
Gas Plant Waste	YES NO	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 Two Water/Water Transport

Driver's Name Jean Kuo

Address 231 W. 1st St

Print Name _____

Phone No. 575 706 9148

Phone No. _____

Transporter Ticket # _____

Truck No. L-03

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. 08

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/BLS 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 Reston
Phone No. _____

GENERATOR

NO. **HW-730216**

Generator Manifest # X70

Location of Origin NASH UNIT 53 SW

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) _____	<u>BEU</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
Gas Plant Waste _____				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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/21/25

SIGNATURE Jesus Roon

TRANSPORTER

Transporter's Name Two Waters Fuel Transfer

Driver's Name Jesus Roon

Address 23 Wagon St

Print Name _____

Phone No. 525 706 9148

Phone No. _____

Transporter Ticket # _____

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 01/21/25

DRIVER'S SIGNATURE Jesus Roon

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

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 If YES, was reading > 50 micro roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Guage _____	Feet _____	Inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Guage _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one):

ACCEPTED

DENIED

If denied, why? _____

NAME (PRINT) Regan P

DATE 1/25

TITLE DOM

SIGNATURE AR

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



Company Man Contact Information
Name KEVIN RICE
Phone No. _____

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-7039966**

Generator Manifest # XTO
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin WASH UNIT 53 SWD
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 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 2/21/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATION/PIA Transport LLC
Address 23 WINDY ST
Phone No. 675 706 9148
Transporter Ticket # _____

Driver's Name Jess Rios
Print Name _____
Phone No. _____
Truck No. L-03

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 2/19/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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 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) MS/LO

DATE 1/21/25

TITLE Adm

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Ryan

Phone No. _____

GENERATOR

NO. HW-730217

Generator Manifest # XTO Location of Origin NAH/S3/SWD
 Generator Name _____ Lease/Well _____
 Address _____ Name & No. _____
 _____ 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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>BELLY</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 01/21/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONAL / VIA TRANSPORT Driver's Name Kent Ryan
 Address 23 Wagon ST Print Name _____
 Phone No. 575 706 9148 Phone No. _____
 Transporter Ticket # _____ Truck No. 1-03

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 01/21/25

DRIVER'S SIGNATURE Kent Ryan

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 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) Alexandra K DATE 1/21/25 TITLE ADM SIGNATURE AK

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



Company Name: Enviro-1000
Name: [Signature]
Phone No.: 505 984 4159

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-725934**

Generator Manifest # _____
Generator Name X10
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin STUD
Lease/Well _____
Name & No. Nash 53 Unit
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 _____	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 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

DISPOSAL QUANTITY 17 B - BARRELS 2 L - LIQUID 0 Y - YARDS 0 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 Waste Solutions Group
Address 318 11001 St
Phone No. 505 984 4159
Transporter Ticket # _____

Driver's Name Marco Lopez
Print Name _____
Phone No. _____
Truck No. L-04

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. 28

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) Meyanda P

DATE 1-21-25

TITLE ADM

SIGNATURE [Signature]

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information
Name Kent DeLoe
Phone No. 575 488 4489



(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-721994**

Generator Manifest # _____ Location of Origin _____
Generator Name Xto Lease/Well _____
Address _____ Name & No. Nash 53 Unit
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 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 <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 Two Nations Driver's Name Marco Lozano
Address 318 N. 1st St. Hobbs, NM Print Name _____
Phone No. 575 306 5138 Phone No. _____
Transporter Ticket # _____ Truck No. 1-04

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. 101

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 Kurt Keltz
Phone No. 505 988 4481

GENERATOR

NO. **HW -721486**

Generator Manifest # _____
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well Name & No. Nash 53
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	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations LLC
Address 2318 Vireo St
Phone No. 505 206 5438
Transporter Ticket # _____

Driver's Name Marco lozano
Print Name _____
Phone No. _____
Truck No. L-04

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 1-21-25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

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

	Feet	Inches
1st Guage	_____	_____
2nd Guage	_____	_____
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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Ken [unclear] Phone No: 575-982-4484

GENERATOR

NO. HW-731007

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)

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 E&P WASTE STREAMS, 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 analysed and be below threshold limits for toxicity (TCLP), Ignitability, Corrosivity and Reactivity.

Non-Exempt Other: [unclear] *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 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

DISPOSAL FACILITY

RECEIVING AREA

IN: [unclear] OUT: [unclear]

Name/No. [unclear]

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

TANK BOTTOMS

Table with columns: Feet, Inches, 1st Gauge, 2nd Gauge, Received, 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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent

Phone No. 575-988-4887

GENERATOR

NO. **HW-731006**

Generator Manifest # _____

Location of Origin _____

Generator Name XTD

Lease/Well Name & No. Wash Unit #53 SWD

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) _____	<u>Beny</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) _____	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 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

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 AGENTS SIGNATURE

DATE 01/21/25

SIGNATURE

TRANSPORTER

Transporter's Name Trans nation

Driver's Name FUSA PORTINO

Address 2318 Violet St

Print Name _____

Phone No. 575-988-4887

Phone No. _____

Transporter Ticket # _____

Truck No. 1-10

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. 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 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/BLS 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) MSD

DATE 1/21/25

TITLE ADM

SIGNATURE [Signature]



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Leslie P. [unclear]

Phone No. 505-322-4479

GENERATOR

NO. **HW-731008**

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. Nash unit #53 own

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) _____	<u>Drilling</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 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

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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Twin [unclear]

Driver's Name Leslie P. [unclear]

Address 2315 [unclear]

Print Name _____

Phone No. 505-607-9198

Phone No. 4-10

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. 26

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 (X) NO
PASS THE PAINT FILTER TEST? (Circle One) YES (X) NO

If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W/BLS 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) Alexandros P.

DATE 1/21/25

TITLE APM

SIGNATURE AP.



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-726592**

Generator Manifest # 110

Location of Origin
Lease/Well Name & No. NASH UNIT 53 SWD

Generator Name _____

County _____

Address _____

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 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	_____				
E&P Contaminated Soil	_____	INTERNAL USE ONLY	_____	TOP SOIL & CALICHE SALES	_____
Gas Plant Waste	_____	Truck Washout (exempt waste)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	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 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

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 AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Two Nations

Driver's Name Luis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L11

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. 28

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? AP

NAME (PRINT)

DATE

TITLE

SIGNATURE



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **HW-726593**

Generator Manifest # X70

Location of Origin

Generator Name _____

Lease/Well NASH UNIT 53 SWD

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 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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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)

12125 Luis Aguirre

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Two Nations

Driver's Name Luis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L-11

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. 28

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



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-726591**

Generator Manifest # X10

Location of Origin _____

Generator Name _____

Name & No. NASH UNIT #53 SWD

Address _____

County _____

City, State, Zip _____

API No. API #30-015-39400

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) _____	<u>20 Yards</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"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations LPA

Driver's Name Louis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L11

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. 20

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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Petz Phone No. 575-988-4489

GENERATOR

NO. HW-7039965

Generator Manifest # Generator Name XTO Address City, State, Zip Phone No.

Location of Origin Wash 53 SWD Name & No. Eddy 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, INTERNAL USE ONLY, and OTHER EXEMPT E&P WASTE STREAMS. Includes checkboxes for drilling, completion, production, and 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

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 AGENTS SIGNATURE DATE SIGNATURE

TRANSPORTER

Transporter's Name Halo Services Address Hobbs RD Loving NM Phone No. Transporter Ticket #

Driver's Name David Palmer Print Name Phone No. Truck No. TSI / BDO5

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 1/22/25 DRIVER'S SIGNATURE DELIVERY DATE 1/22/25 DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT: 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 roentgens? (Circle One) YES NO PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Table for Tank Bottoms with columns for Feet, Inches, BS&W/BBLS 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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Retz Phone No. 575 988 4489

GENERATOR

NO. HW-7039964

Generator Manifest # Generator Name XTO Address City, State, Zip Phone No.

Location of Origin Wash 53 SWD Lease/Well Name & No. Eddy 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, 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 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

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.
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 Halo Services Address Jeters Rd Phone No. Transporter Ticket #

Driver's Name David Palmer Print Name Phone No. Truck No. T51/BDO3

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 1/22/25 DRIVER'S SIGNATURE DELIVERY DATE 1/22/25 DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT: Name/No. 28

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 roentgens? (Circle One) YES NO PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Table for Tank Bottoms with columns for Feet, Inches, BS&W/BBLS 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 Kent Ratz
Phone No 575 988 4189

GENERATOR

NO. **HW-7037619**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin P Nash 53 SWID
Lease/Well _____
Name & No. _____
County Eddy
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	<input checked="" type="checkbox"/>	Truck Washout (exempt waste)	YES	NO	QUANTITY	<u>20</u>	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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Halo Services
Address Jeders Rd Loving NM
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. T51

I hereby certify 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 1/22/25 DRIVER'S SIGNATURE David Palmer DELIVERY DATE 1/22/25 DRIVER'S SIGNATURE David Palmer

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. 28

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/BLS 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 1-22-25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Kent Retz

Phone No: 575 988 4489

GENERATOR

NO. **HW-7037620**

Generator Manifest # _____
Generator Name X70
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Nash 53 SWD
Lease/Well _____
Name & No. _____
County Eddy
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	<u>✓</u>	Truck Washout (exempt waste)	YES	NO	QUANTITY	<u>20</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 70 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 Halo Services
Address Jaders Rd Loving NM
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. 751

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 1/22/25 DRIVER'S SIGNATURE David Palmer DELIVERY DATE 1/22/25 DRIVER'S SIGNATURE David Palmer

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 78

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 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) Alexandra P. DATE 1/22/25 TITLE ADDA SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man C



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Ritz

Phone No. _____

GENERATOR

NO. **HW-7038023**

Generator Manifest # XTO

Location of Origin _____

Generator Name _____

Lease/Well Name & No. Nosh 53 SW D

Address _____

County Lincoln

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 _____		Rally Damf			
Water Based Muds _____					
Water Based Cuttings _____					
Produced Formation Solids _____	INTERNAL USE ONLY Truck Washout (exempt waste) YES _____ NO _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		QUANTITY	TOP SOIL	CALICHE	
E&P Contaminated Soil <input checked="" type="checkbox"/> _____					
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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Taw Nations LLC / Zeus Transport Driver's Name Severio G

Address _____ Print Name _____

Phone No. _____ Phone No. _____

Transporter Ticket # _____ Truck No. 413

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 Severio G DRIVER'S SIGNATURE _____ DELIVERY DATE 1/22/25 DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. 28

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 1/22/25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man C
Name KONTRETO
Phone No. _____



(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-7038024**

Generator Manifest # X70
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash S3 SW P
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	_____	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)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Severo G

TRANSPORTER

Transporter's Name Tuo Transport/Leas Transport Driver's Name Severo G
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. L13

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 Severo G DRIVER'S SIGNATURE _____ DELIVERY DATE 1/22/25 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? _____
NAME (PRINT) Richard D. Gaudin DATE 1/22/25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man C
Name Kent Reitz
Phone No. _____



(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-7038022**

Generator Manifest # 270
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nagh 53 SWD
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 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

DISPOSAL QUANTITY B - BARRELS 20 L - LIQUID 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)
- 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 Law Notions LLC / Houston TX Driver's Name Severo S
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. L13

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 1/22/25 DRIVER'S SIGNATURE Severo S DELIVERY DATE _____ DRIVER'S SIGNATURE _____

TRUCK TIME STAMP IN: _____ OUT: _____	DISPOSAL FACILITY	RECEIVING AREA Name/No. <u>25</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/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) Severo S DATE 1/22/25 TITLE Driver SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



Company Man Contact Information
Name _____
Phone No. _____

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-7038529**

Generator Manifest # X70
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Redondo
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 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 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

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 AGENTS SIGNATURE _____ DATE 2-20-25 SIGNATURE _____

TRANSPORTER

Transporter's Name _____ Driver's Name Alvin
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. 1-02

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. <u>28</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/BBLs Received	Free Water	Total Received	BS&W (%)
1st Gauge	_____	_____	_____	_____	_____	_____
2nd Gauge	_____	_____	_____	_____	_____	_____
Received	_____	_____	_____	_____	_____	_____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____
NAME (PRINT) _____ DATE 2-20-25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW-7038530

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 _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		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 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

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 AGENTS 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	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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-7038531**

Generator Manifest # 570

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 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

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 AGENTS 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 _____	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) Alexandra P DATE 1/22/25 TITLE ADM SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Ritz

Phone No. _____

GENERATOR

NO. HW-730218

Generator Manifest # XTO
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin NAVAL UNIT 53 SWD
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 E&P WASTE STREAMS			
Oil Based Cuttings _____		Completion Fluid/Flow Back (Non-Injectable) _____	<u>Belly</u>			
Water Based Muds _____		Produced Water (Non-Injectable) _____				
Water Based Cuttings _____		Gathering Line Water/Waste (Non-Injectable) _____				
Produced Formation Solids _____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES				
Tank Bottoms _____		Truck Washout (exempt waste)	YES	NO	QUANTITY	TOP SOIL
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO WARRIOR / VIRA TRANSPORT LLC
Address 23 WILLOW ST
Phone No. 505 706 9148
Transporter Ticket # _____

Driver's Name Abel Villalobos
Print Name _____
Phone No. _____
Truck No. 1-07

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 01/22/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Feet _____ Inches _____

1st Gauge _____	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? AP

NAME (PRINT) Allegria P.

DATE 1/22/25

TITLE Abm

SIGNATURE _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Rotz

Phone No. _____

GENERATOR

NO. HW-731420

Generator Manifest # X70

Location of Origin North Unit 53 500

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) _____	<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) _____	INTERNAL USE ONLY	
Tank Bottoms _____	Truck 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 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

DISPOSAL QUANTITY 22 yards 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 AGENTS SIGNATURE _____

DATE 01-22-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations / Vixie Transport

Address _____

Phone No. _____

Transporter Ticket # _____

Driver's Name Luis Jaramila

Print Name _____

Phone No. _____

Truck No. L-18

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 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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken ROTE

Phone No. _____

GENERATOR

NO. **HW-7038568**

Generator Manifest # XTO

Location of Origin NASH UNIT 53 SWO

Generator 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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	Drilling - Waste generated while drilling the well _____			
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	Initial Completion - Waste generated in the initial completion process _____			
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	Production - Waste generated during the production process _____			
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____				
Tank Bottoms _____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES			
E&P Contaminated Soil <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20Y - 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 2/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONS / VIVA TANKER

Driver's Name Jesus Rom

Address 23 VIOLET ST

Print Name _____

Phone No. 575 7069198

Phone No. _____

Transporter Ticket # _____

Truck No. L-03

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 2/22/25

DRIVER'S SIGNATURE Jesus Rom

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 _____	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 2/22/25

TITLE _____

SIGNATURE _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Veneta Rott

Phone No. _____

GENERATOR

NO. **HW-725952**

Generator Manifest # XTO

Location of Origin NASH UNIT 53 SWD

Generator 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 E&P WASTE STREAMS	
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>Barrel</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 <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 2/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONS / Vipat Rausor

Address 23 WILLOW ST

Phone No. 505 706 9148

Transporter Ticket # _____

Driver's Name Ken

Print Name _____

Phone No. _____

Truck No. L-03

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 2/22/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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) Hyandra P DATE 2/22/25 TITLE APM SIGNATURE _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Bell

Phone No.

GENERATOR

NO. HW-725953

Generator Manifest # XTO
Generator Name
Address
City, State, Zip
Phone No.

Location of Origin WASH UNIT 53 SWID
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, 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 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
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 01/21/25

SIGNATURE

TRANSPORTER

Transporter's Name Two women/via tarrier L
Address 23 Wagon ST
Phone No.
Transporter Ticket # 575 7069148

Driver's Name Jess Ryan
Print Name
Phone No.
Truck No. L-03

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Table with columns for 1st Gauge, 2nd Gauge, 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



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Vani Patel

Phone No. _____

GENERATOR

NO. **HW-723051**

Generator Manifest # XTO

Location of Origin NADH UNIT 53 SWA
Lease/Well _____

Generator 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 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations/Vista Transport
Address 23 VICTORY ST
Phone No. 575 706 9148
Transporter Ticket # _____

Driver's Name Jean Rios
Print Name _____
Phone No. _____
Truck No. L-63

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 01/22/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 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? None
Name (Print) Halfway Facility Date 1/22/25 Title NM Signature _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Rife

Phone No. _____

GENERATOR

NO. HW-731423

Generator Manifest # X70

Location of Origin Wash Unit 53 SWO

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) _____	OTHER EXEMPT E&P WASTE STREAMS <u>Belly Corp.</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	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 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

DISPOSAL QUANTITY 22 Yards 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 AGENTS SIGNATURE _____

DATE 2-21-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Jazz Nation / Waste Transport

Driver's Name Luis Jarama

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 2-18

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. 27

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/BLS 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 1/27/25

TITLE _____

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken Root

Phone No. _____

GENERATOR

NO. **HW-7038561**

Generator Manifest # 110

Location of Origin WASH UNIT 53 SWD

Generator 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 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>Belly Oil</u>			
Oil Based Cuttings _____					
Water Based Muds _____					
Water Based Cuttings _____					
Produced Formation Solids _____					
Tank Bottoms _____					
E&P Contaminated Soil <input checked="" type="checkbox"/>					
Gas Plant Waste _____					
INTERNAL USE ONLY		TOP SOIL & CALICHE SALES			
Truck Washout (exempt waste)		YES	NO <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY 80 B - BARRELS 200 L - LIQUID 200 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 01/22/25

SIGNATURE [Signature]

TRANSPORTER

Transporter's Name TWO NATION / CB AAAS SERV

Driver's Name KEVIN BAEZA

Address 73 Violet St

Print Name _____

Phone No. 575 706 9148

Phone No. _____

Transporter Ticket # _____

Truck No. L-09

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 01/22/25

DRIVER'S SIGNATURE [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 _____	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 1/22/25

TITLE _____

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken - Ken

Phone No.

GENERATOR

NO. HW-721962

Generator Manifest # XTO
Generator Name
Address
City, State, Zip
Phone No.

Location of Origin NASH OIL # 53 340
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, 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
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 TAD NATIONAL / CB AASJ SERVICE Driver's Name Ken - Ken
Address 2000 ... Print Name
Phone No. 505 ... Phone No.
Transporter Ticket # Truck No. 1-09

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. 28

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

Table with columns for Tank Bottoms (Feet, Inches) and 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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Name: Kent Retz
Name: Kent Retz
Phone No.:



(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. HW-721961

Generator Manifest # X70
Generator Name
Address
City, State, Zip
Phone No.

Location of Origin Nash Unit 53 SWD
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 E&P WASTE STREAMS			
Oil Based Cuttings	_____	Washout Water (Non-Injectable)	_____	<u>Belly Dope</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATION / CB AAG SERVICES
Address 23 Violet St
Phone No. 575 706 91 48
Transporter Ticket # _____

Driver's Name Keoni Baez
Print Name _____
Phone No. _____
Truck No. L-209

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 01/22/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 88

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Feet _____ Inches _____

1st Gauge	_____	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) Alexander R

DATE 1/22/25

TITLE ADM

SIGNATURE _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

Name Kent Booz

Phone No. 575-988-4459

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-731010**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash 53 SWD
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)	_____	<u>Belly 17</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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Two nation V&A
Address 2316 Vindicator
Phone No. 575-706-8438
Transporter Ticket # _____

Driver's Name Euseo Portillo
Print Name _____
Phone No. _____
Truck No. 1-10

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. AD

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 Guage	Feet _____	Inches _____	BS&W/BBLs Received	BS&W (%)
2nd Guage	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? ADM
NAME (PRINT) Allyson R DATE 1/22/25 TITLE _____ SIGNATURE AD



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Peltz
Phone No. _____

GENERATOR

NO. HW-731422

Generator Manifest # X70
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Wash Unit 53 5470
Lease/Well Name & No. U.N. #
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) _____	<u>Belly Comp</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) _____	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 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

DISPOSAL QUANTITY 22 yards 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 AGENTS SIGNATURE _____

DATE 01-19-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations / Vipe Transport
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Luis Jaramilla
Print Name _____
Phone No. _____
Truck No. L-18

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 _____	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 _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Quint

Phone No. 575-988-5134

GENERATOR

NO. **HW-730697**

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. Nash S3 SW10

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) _____	<u>Benny</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 <u>></u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 70 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)
- 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 1/22/25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations - VRA

Driver's Name Eusebio Padilla

Address 2318 Wood St

Print Name _____

Phone No. 575-706-5134

Phone No. _____

Transporter Ticket # _____

Truck No. 1-10

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	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 _____



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Peltz

Phone No. 575-655-4489

GENERATOR

NO. HW-731009

Generator Manifest #
Generator Name XTO
Address
City, State, Zip
Phone No.

Location of Origin
Lease/Well Name & No. Natch 53 SWD
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, 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 E&P WASTE STREAMS, INTERNAL USE ONLY, 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS E - EACH

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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 Two Nations - USA
Address 23411 1st St
Phone No. 975-706-5438
Transporter Ticket #

Driver's Name Euseo Peltz
Print Name
Phone No.
Truck No. L-10

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
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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Table with columns for Feet, Inches, 1st Gauge, 2nd Gauge, Received, 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



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

Name Kentz Edz

Phone No. 575-288-4119

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. HW- 684707

Generator Manifest # _____ Location of Origin _____
 Lease/Well _____
 Generator Name XTO Name & No. Nish 53 SWD
 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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>Berry</u>			
Waste 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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Two nations - VQA Driver's Name Edz Kentz
 Address 2311 V. Rd Print Name _____
 Phone No. 575-706-5438 Phone No. _____
 Transporter Ticket # _____ Truck No. L-10

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 Guage	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Guage			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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-7039967**

Generator Manifest # X10

Location of Origin

Generator Name _____

Lease/Well Name & No. Nash Unit 53 SWD

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) _____	<u>20 Yards</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"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
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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 Two Nations

Driver's Name Luis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 211

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. 28

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? _____

Alexandra R
NAME (PRINT)

1/22/05
DATE

Ann
TITLE

AR
SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. **HW-7039968**

Generator Manifest # X70

Location of Origin

Generator Name _____

Lease/Well Name & No. Nash Unit 53 SWD

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) _____	<u>20 Yards</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*
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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)

1 22 25 Luis Aguirre

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Two Nations

Driver's Name Luis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L 11

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 _____	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? _____

Kyle D. Gorton
NAME (PRINT)

DATE

TITLE

SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW-730985

Generator Manifest # XTO

Location of Origin
Lease/Well Name & No. Nash Unit 53 SWD

Generator Name _____

County _____

Address _____

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 E&P WASTE STREAMS		
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>20 Yards</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 <u>(X)</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations

Driver's Name Luis

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L 11

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 1/22/25

DRIVER'S SIGNATURE Luis Aguirre

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/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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW-7037632

Generator Manifest # X10

Location of Origin
Lease/Well Name & No. Nash Unit 53 SW

Generator Name
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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>20 yards</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) _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____	INTERNAL USE ONLY		QUANTITY	TOP SOIL	CALICHE
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Luis
Print Name _____
Phone No. _____
Truck No. L11

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. 28

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 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 1/20/25 DENIED non If denied, why? AK
NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Benz
Phone No. _____

GENERATOR

NO. **HW-7037532**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. WASH 53 SWD
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) _____	<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 <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 Tow Nation LLC / Zeus Transport
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Oscar
Print Name _____
Phone No. _____
Truck No. L-12

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.

01-22-25 SHIPMENT DATE Oscar DRIVER'S SIGNATURE 01-22-25 DELIVERY DATE Oscar DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Guage _____	Feet	Inches	BS&W/BBLS Received	BS&W (%)
2nd Guage _____			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 1-27-25 TITLE _____ SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Ketz
Phone No. _____

GENERATOR

NO. **HW-7037531**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. Nash 53 SWD
County W/T
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)	_____	<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)	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Tax Nations LLC / Zeus Transport
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Oscar Q.
Print Name _____
Phone No. _____
Truck No. 412

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 01-22-25 DRIVER'S SIGNATURE Oscar Q. DELIVERY DATE 22-01-25 DRIVER'S SIGNATURE Oscar Q.

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. 28

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 1-22-25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Pete

Phone No. _____

GENERATOR

NO. HW-731421

Generator Manifest # XJU

Location of Origin Wash Unit 53 Pool

Generator Name _____

Name & No. _____

Address _____

County _____

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 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 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

DISPOSAL QUANTITY 22 Yards 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)

01-27-25

(PRINT) AUTHORIZED AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Tus Nations / Yipeo Transport

Driver's Name Lois Jaramillo

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L-18

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

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 Kent Rotz
Phone No. _____

GENERATOR

NO. **HW-7037529**

Generator Manifest # _____
Generator Name Hab Service Inc.
Address XTO
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. XTO Nash 53 SWD
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) _____	<u>Belly Demo.</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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.

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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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Low National / Zeng Transport
Address 601 S Woody Dr
Phone No. _____
Transporter Ticket # _____

Driver's Name Oscar @
Print Name _____
Phone No. _____
Truck No. 6-12

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 01-22-25

DRIVER'S SIGNATURE Oscar @

DELIVERY DATE 01-22-25

DRIVER'S SIGNATURE Oscar @

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Feet _____ Inches _____

1st Guage _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Guage _____	Free Water _____	
Received _____	Total Received _____	

I hereby certify that the above load material has been (circle one):

ACCEPTED 1/22/25

_____ DENIED

If denied, why? APM

NAME (PRINT) Alexandra V.

DATE _____

TITLE _____

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Reitz
Phone No. 575-988-9489

GENERATOR

NO. **HW-7037623**

Generator Manifest # _____ Location of Origin NASH 53 SWD
Generator Name XJO Name & No. _____
Address _____ County Eddy
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)	_____	<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)	_____	INTERNAL USE ONLY			
Tank Bottoms	_____	Truck Washout (exempt waste)	YES _____ NO _____	QUANTITY	<u>30</u>	TOP SOIL	CALICHE
E&P Contaminated Soil	<input checked="" type="checkbox"/>	TOP SOIL & CALICHE SALES					
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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 70 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 Hals Services Driver's Name David Palmer
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. 751

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 1/23/25 DRIVER'S SIGNATURE Du DELIVERY DATE 1/23/25 DRIVER'S SIGNATURE Du

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. 8

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 Guage	_____	BS&W/BLS Received	_____	BS&W (%)	_____
2nd Guage	_____	Free Water	_____		
Received	_____	Total Received	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

NAME (PRINT) David Palmer DATE 1/23 TITLE Du SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Retz
Phone No. 575-988-4489

GENERATOR

NO. **HW-7037623**

Generator Manifest # _____
Generator Name XJO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin NASH 53 SWD
Lease/Well Name & No. _____
County Eddy
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)	_____	<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	<input checked="" type="checkbox"/>	Truck Washout (exempt waste)	YES _____ NO _____	QUANTITY	<u>30</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 70 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 Halo Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. 751

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.

1/23/25 David Palmer 1/23/25 David Palmer
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

	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? _____

David Palmer 1/23 _____
NAME (PRINT) DATE TITLE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Kutz

Phone No. _____

GENERATOR

NO. **HW-7037622**

Generator Manifest # _____

Location of Origin Nash 53 CTB

Generator Name XTO

Name & No. _____

Address _____

County Eddy

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. N/A

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)	YES	NO	QUANTITY	TOP SOIL
Gas Plant Waste _____				<u>20</u>	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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Halo Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. T51

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.

1/23/25 David Palmer 1/23/25 David Palmer
SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 78

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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ked Retz

Phone No. 575 988 4489

GENERATOR

NO. **HW-7037621**

Generator Manifest # _____

Location of Origin Negh 53 SWD

Generator Name X10

Name & No. _____

Address _____

County _____

City, State, Zip _____

Rig Name & No. _____

Phone 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)	_____		
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 <u>✓</u>	QUANTITY	<u>70</u>
Gas Plant Waste	_____			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 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

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.

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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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Halo Services

Driver's Name David Palmer

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. T57

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 1/23/25

DRIVER'S SIGNATURE David Palmer

DELIVERY DATE 1/23/25

DRIVER'S SIGNATURE David Palmer

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 _____	BS&W/BLS 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) Richard D. Gaston

DATE 1/23/25

TITLE REC

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Retz

Phone No. 788-4489

GENERATOR

NO. HW-7037624

Generator Manifest #

Location of Origin Nash 53 SWO

Generator Name XTO

Name & No.

Address

County Eddy

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)

Table with columns for waste types (Oil Based Muds, Water Based Muds, etc.), categories (NON-INJECTABLE WATERS, INTERNAL USE ONLY), and disposal details (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 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

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.
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 Hob Services
Address
Phone No.
Transporter Ticket #

Driver's Name David Palmer
Print Name
Phone No.
Truck No. T51

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 1/23/25 DRIVER'S SIGNATURE DRIVER'S SIGNATURE DELIVERY DATE 1/23/25 DRIVER'S SIGNATURE DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT: 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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) 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 (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT) DATE TITLE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken Reitz

Phone No. 575 988 4489

GENERATOR

NO. **HW-7037625**

Generator Manifest # _____

Location of Origin Nash 53 SWP

Generator Name XTD

Name & No. _____

Address _____

County Eddy

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 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)	YES	NO	QUANTITY	TOP SOIL	CALICHE
Gas Plant Waste				<u>20</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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Halo Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. 751

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 1/23/25

DRIVER'S SIGNATURE [Signature]

DELIVERY DATE 1/23/25

DRIVER'S SIGNATURE [Signature]

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 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? AP
NAME (PRINT) Alexander DATE 1/23/25 TITLE ADM SIGNATURE [Signature]



NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information

(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Kots

Phone No. _____

GENERATOR

NO. **HW-725991**

Generator Manifest # _____

Location of Origin _____

Generator Name X76

Lease/Well Name & No. dash way 053

Address _____

County SWP

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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Waste Services
Address _____
Phone No. 94 0794
Transporter Ticket # _____

Driver's Name Walter Cisneros
Print Name _____
Phone No. _____
Truck No. 147 ADM

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 1-23-25 DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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/BLS 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? ADM
NAME (PRINT) Heptadca P DATE 1/23/25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Karl Hefz

Phone No. _____

GENERATOR

NO. **HW-725992**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well Name & No. nashua 53 SWV
County _____
API No. _____
Rig Name & No. DIA
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	QUANTITY	_____
Gas Plant Waste	_____			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 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

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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Halo Services
Address _____
Phone No. 28 794 1111
Transporter Ticket # _____

Driver's Name John Peterson
Print Name _____
Phone No. _____
Truck No. 743 180-03

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

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 98

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) John Peterson DATE 1/23 TITLE Driver SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Burt

Phone No. (575) 233-1111

GENERATOR

NO. HW-725988

Generator Manifest #
Generator Name XTO
Address
City, State, Zip
Phone No.

Location of Origin
Lease/Well Name & No. Nash 053 SWB
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.), categories (NON-INJECTABLE WATERS, INTERNAL USE ONLY), and quantities (QUANTITY, TOP SOIL, CALICHE).

WASTE GENERATION PROCESS: [] DRILLING [] COMPLETION [] PRODUCTION [x] 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

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.
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 Halo Services
Address
Phone No.
Transporter Ticket #

Driver's Name Jason Cunningham
Print Name
Phone No.
Truck No. T-43 Baby dump

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
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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Feet Inches

Table for Tank Bottoms with columns for Gauges (1st, 2nd) and Received (BS&W/BBLs, Free Water, Total Received) and percentages.

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why?

NAME (PRINT)

DATE

TITLE

SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Vent Retz Phone No.

GENERATOR

NO. HW-725989

Generator Manifest # Generator Name XTC Address City, State, Zip Phone No.

Location of Origin Lease/Well Name & No. Nash US3 SWB 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: 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 E&P WASTE STREAMS, INTERNAL USE ONLY, 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 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

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.
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 Holo Services Address 28 Jaylois Rd Phone No. Transporter Ticket #

Driver's Name Jason Cunningham Print Name Phone No. F-43 Belladump 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 1-23-25

DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: OUT:

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 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?

NAME (PRINT)

DATE

TITLE

SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kurt Ritz

Phone No. _____

GENERATOR

NO. HW- 720575

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well Name & No. North unit 500 053
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	<input checked="" type="checkbox"/>	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 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

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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Halfway Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Josue Gonzalez
Print Name _____
Phone No. (505) 998-2571
Truck No. 7-43 Betty dump

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 1-23-25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

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 _____
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 _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name K... +2
Phone No. _____

GENERATOR

NO. **HW -721115**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. Mash unit 53-56-D
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)	_____	<u>Ball Demo</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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.

- 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 Tom H. Lane / 1-32-25 Driver's Name _____
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. 1-02

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. 28

Site Name/ **Halfway Facility / NM1-006** Phone No. **575-392-6368**
Permit No. _____
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 Guage	Feet _____	Inches _____	BS&W/BBLs Received	_____	BS&W (%)	_____
2nd Guage	_____	_____	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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information Page 83 of 220
Name Karl Hill
Phone No. _____



(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW -721114**

Generator Manifest # _____
Generator Name XTC
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. North Unit 5351D
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)	<u>Bell 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)	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 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

DISPOSAL QUANTITY: _____ B - BARRELS _____ L - LIQUID 200 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 Ken Hutchins/Vista Truck Driver's Name Scott Anderson
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. 6-2-2

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 1-22-25 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	BS&W/BBLs Received	BS&W (%)
1st Guage	_____	_____	_____	_____
2nd Guage	_____	_____	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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Rat

Phone No. _____

GENERATOR

NO. **HW-721964**

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. WACH Unit S3-50D

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. 110

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)	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 700 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 1-23-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations / Viva Trucking LLC

Driver's Name Jose Madrigal

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 1-00

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 1-23-25

DRIVER'S SIGNATURE Jose M.

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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			Free Water	
2nd Gauge			Total Received	
Received				

I hereby certify that the above load material has been (circle one):

ACCEPTED 1/23/25

DENIED

If denied, why? _____

Alexandra P.
NAME (PRINT)

DATE

TITLE ADM

SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Rouse

Phone No. _____

GENERATOR

NO. **HW-721963**

Generator Manifest # _____
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. NASH UNIT SB 5UD
County _____
API No. _____
Rig Name & No. UD
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>BAH 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)	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 1-23-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations / Uiaa Transport LLC
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Jorge Madrigal
Print Name _____
Phone No. _____
Truck No. 2-07

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 1-23-25

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Gauge	Feet _____	Inches _____	BS&W/BLS 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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent RATS

Phone No. _____

GENERATOR

NO. **HW-722195**

Generator Manifest # _____
Generator Name X70
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash Unit 53 SWD
County _____
API No. _____
Rig Name & No. W/A
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>BEH 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)	_____	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 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

DISPOSAL QUANTITY: _____ B - BARRELS _____ L - LIQUID 70 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)
- 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 1-23-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Terra Solutions / Uipa Transport LLC
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Jorge Madrigal
Print Name _____
Phone No. _____
Truck No. L-02

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 1-23-25

DRIVER'S SIGNATURE Jorge M.

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 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 1-23-25

TITLE JMS

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Reis

Phone No. _____

GENERATOR

NO. **HW-7038569**

Generator Manifest # XTO

Location of Origin NASH UNIT 53 SWD

Generator 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 E&P WASTE STREAMS				
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>BELLY</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 <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/23/25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two women/Via Transport

Address Unit 23 ST

Phone No. 575 706 9148

Transporter Ticket # _____

Driver's Name Jessie Rose

Print Name _____

Phone No. _____

Truck No. L-03

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 01/23/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 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? AE

Kloppner P NAME (PRINT) 1/23/25 DATE Adam TITLE AE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Port

Phone No. _____

GENERATOR

NO. **HW-7038754**

Generator Manifest # X70

Location of Origin NASH UNIT 53 SWD

Generator 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 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	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20 Y - YARDS E - EACH

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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 01/23/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONS / VISA TRANSPORT

Driver's Name Aras Khan

Address 23 VILLOT ST

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L-03

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 01/23/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. df

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? AF

NAME (PRINT) Alexandra P.

DATE 1/23

TITLE Atom

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken Pott

Phone No. _____

GENERATOR

NO. **HW-7038753**

Generator Manifest # VTO

Location of Origin NASH UNIT 53 DWID

Generator 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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>BELLY</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) _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____	INTERNAL USE ONLY		QUANTITY	TOP SOIL	CALICHE
E&P Contaminated Soil _____	Truck Washout (exempt waste) YES _____ NO <u>NO</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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.

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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 AGENTS SIGNATURE _____

DATE 01/23/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONS / KUPA TRANSPORT

Address 23 WILSON ST

Phone No. _____

Transporter Ticket # _____

Driver's Name Juan Rucan

Print Name _____

Phone No. _____

Truck No. L-03

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 01/25/25

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

1st Guage _____	Feet _____	Inches _____	BS&W/BLS Received _____	BS&W (%) _____
2nd Guage _____	_____	_____	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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Port

Phone No. _____

GENERATOR

NO. **HW-7038752**

Generator Manifest # X70

Location of Origin NASH UNIT 53 SWD

Generator 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 E&P WASTE STREAMS			
Oil Based Cuttings _____		Washout Water (Non-Injectable) _____	<u>BULLY</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) _____	INTERNAL USE ONLY			
Tank Bottoms _____	Truck 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20 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)
- 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 TWO NATIONS / UTA TRAILER

Driver's Name Jose Ruan

Address 23 VIOLET ST

Print Name _____

Phone No. 575 706 9148

Phone No. _____

Transporter Ticket # _____

Truck No. L-03

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 Guage _____	Feet	Inches	BS&W/BBLs Received	BS&W (%)
2nd Guage _____			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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Betz

Phone No.

GENERATOR

NO. HW-7038570

Generator Manifest # 470

Location of Origin WASH UNIT 53 DWD

Generator 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)

Table with columns for waste types (Oil Based Muds, Water Based Muds, etc.), 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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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.

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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)
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 01/23/25

SIGNATURE

TRANSPORTER

Transporter's Name Two men/women

Driver's Name Hans Koon

Address

Print Name

Phone No.

Phone No.

Transporter Ticket #

Truck No. L-08

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 01/23/25

DRIVER'S SIGNATURE

TRUCK TIME STAMP

IN: OUT:

DISPOSAL FACILITY

RECEIVING AREA

Name/No. JB

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

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 (circle one):

ACCEPTED

DENIED

If denied, why?

NAME (PRINT) Algarda P

DATE 1/23/25

TITLE AOM

SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Petz

Phone No. 575-988-9457

GENERATOR

NO. **HW-7038763**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well
Name & No. Nash S3 sub
County _____
API No. _____
Rig Name & No. Nash
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</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)	_____	INTERNAL USE ONLY	TOP SOIL & CALICHE SALES
Tank Bottoms	_____	Truck Washout (exempt waste)	YES _____ NO <u>_____</u>	QUANTITY	TOP SOIL
E&P Contaminated Soil	<u>_____</u>				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 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

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 AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations - VIGA
Address 2318 Violet St
Phone No. 575-706-5438
Transporter Ticket # _____

Driver's Name EISCO PORTUO
Print Name _____
Phone No. _____
Truck No. L-10

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

	Feet	Inches	BS&W/BLS Received	BS&W (%)
1st Guage	_____	_____	Free Water	_____
2nd Guage	_____	_____	Total Received	_____
Received	_____	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

Michael D. Galtan 1/23/25 _____
NAME (PRINT) DATE TITLE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kentz Patz

Phone No. _____

GENERATOR

NO. HW-7038762

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. Nash S3 SWD

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) _____	<u>Belly</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) _____	INTERNAL USE ONLY					
Tank Bottoms _____	Truck Washout (exempt waste)		YES	NO	QUANTITY	TOP SOIL	CALICHE
E&P Contaminated Soil <input checked="" type="checkbox"/>							
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

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.

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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 Two Nations - VLA
Address 2318 Violet St
Phone No. 505-706-9148
Transporter Ticket # _____

Driver's Name Eliso Portino
Print Name _____
Phone No. _____
Truck No. 4-10

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. 28

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? AD
NAME (PRINT) Alexandra DATE 1/23/25 TITLE NOM SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Reiz

Phone No. _____

GENERATOR

NO. **HW-726562**

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. Nash 53 SWD

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)	_____	Belly	_____
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 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

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.

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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 Two Nations - VLA

Address 2318 11th St

Phone No. 575-306-9148

Transporter Ticket # _____

Driver's Name Enisco Portino

Print Name _____

Phone No. _____

Truck No. L-10

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. 28

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 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) Alexandra

DATE 1/23/25

TITLE ADM

SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Reitz

Phone No.

GENERATOR

NO. HW-726564

Generator Manifest #
Generator Name XTO
Address
City, State, Zip
Phone No.

Location of Origin
Lease/Well
Name & No. Natch 53 SW
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, 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 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

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.

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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 Two Nations - V & A
Address 2318 VICTORY ST
Phone No. 575-706-9148
Transporter Ticket #

Driver's Name ELLSON POLIPIO
Print Name
Phone No.
Truck No. L-10

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. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

Table with columns for Feet, Inches, 1st Gauge, 2nd Gauge, Received, 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) ALEXANDRA P. DATE 1/23/25 TITLE ADM SIGNATURE AP.

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW-7037636

Generator Manifest # X70
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash Unit 53 SW
County _____
API No. _____
Rig Name & No. WIN
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>20 yards</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 <u>(X)</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20 Y - YARDS E - EACH

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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 Two Nations
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Luis
Print Name _____
Phone No. _____
Truck No. L 11

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. 78

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 (X) 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 (X) DENIED _____ If denied, why? _____

NAME (PRINT)

DATE

TITLE

SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR NO. **HW-7038764**

Generator Manifest # XTO Location of Origin Lease/Well Name & No. Nash Unit 53 SWD

Generator Name _____ County _____

Address _____ 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 E&P WASTE STREAMS	
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>20 yards</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"/>	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 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

DISPOSAL QUANTITY B - BARRELS _____ L - LIQUID 20 Y - YARDS _____ E - EACH _____

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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)

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)

1/23/25 Luis Aguirre

(PRINT) AUTHORIZED AGENTS SIGNATURE _____ DATE _____ SIGNATURE _____

TRANSPORTER

Transporter's Name Two Services Driver's Name Luis

Address _____ Print Name _____

Phone No. Two Nations Phone No. _____

Transporter Ticket # _____ Truck No. 211

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 1/23/25 DRIVER'S SIGNATURE Luis Aguirre

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. <u>28</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/BBLs Received	BS&W (%)
1st Gauge			Free Water	
2nd Gauge			Total Received	
Received				

I hereby certify that the above load material has been (circle one):

Alexander P. 1/23/25 NOM AP.

NAME (PRINT) _____ DATE _____ TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____

Phone No. _____

GENERATOR

NO. HW-7037635

Generator Manifest # X TO
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash Unit 53 SW
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) _____	<u>20 yards</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 <u>(X)</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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.

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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 Two Nations
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Luis
Print Name _____
Phone No. _____
Truck No. L11

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 NO If YES, was reading > 50 micro roentgens? (Circle One) YES NO NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO 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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

GENERATOR

NO. **HW-7037634**

Generator Manifest # XTO Location of Origin Lease/Well Name & No. Nash Unit 53 SWD

Generator Name _____ County _____

Address _____ 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 E&P WASTE STREAMS
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>20 Yards</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"/>	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 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

DISPOSAL QUANTITY B - BARRELS _____ L - LIQUID 70 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 1/23/25 SIGNATURE Luis Aguirre

TRANSPORTER

Transporter's Name Two Nations Driver's Name Luis

Address _____ Print Name _____

Phone No. _____ Phone No. _____

Transporter Ticket # _____ Truck No. 211

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 1/23/25 DRIVER'S SIGNATURE Luis Aguirre

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____ Name/No. 78

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

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name _____
Phone No. _____

Generator Manifest # XTO **GENERATOR** NO. **HW-7037633**

Generator Name _____ Location of Origin _____
 Address _____ Lease/Well Name & No. Nash Unit 53 SWD
 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 E&P WASTE STREAMS
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	Drilling - Waste generated while drilling the well	
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	Initial Completion - Waste removed on the initial completion	
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	Production - Waste removed during the production	
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"/>	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 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

DISPOSAL QUANTITY: B - BARRELS _____ L - LIQUID 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)
- 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 Two Nations Driver's Name Luis
 Address _____ Print Name _____
 Phone No. _____ Phone No. _____
 Transporter Ticket # _____ Truck No. L 11

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	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? _____
Alyxandra P 1/23/25 ADM AP
 NAME (PRINT) DATE TITLE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Retz

Phone No. 575-988-9489

GENERATOR

NO. **HW-7037626**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Wash 53 SWD
Lease/Well _____
Name & No. _____
County Eddy
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 E&P WASTE STREAMS					
Oil Based Cuttings	_____		Completion Fluid/Flow Back (Non-Injectable)	_____		<u>Belly Dump</u>				
Water Based Muds	_____		Produced Water (Non-Injectable)	_____						
Water Based Cuttings	_____		Gathering Line Water/Waste (Non-Injectable)	_____						
Produced Formation Solids	_____		INTERNAL USE ONLY				TOP SOIL & CALICHE SALES			
Tank Bottoms	_____	Truck Washout (exempt waste)	YES	<input checked="" type="checkbox"/> NO	QUANTITY	<u>70</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 70 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 Halo Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. TS1

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.

1/24/25 David Palmer 1/24/25 David Palmer
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

	Feet	Inches	BS&W/BBLs Received	BS&W (%)
1st Gauge	_____	_____	Free Water	_____
2nd Gauge	_____	_____	Total Received	_____
Received	_____	_____		

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

David Palmer 1/24/25 David Palmer
NAME (PRINT) DATE TITLE SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken Rott
Phone No. 575 888 1989

GENERATOR

NO. **HW-7037627**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Nash 53 SWD
Lease/Well Name & No. _____
County Eddy
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) _____	<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) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	QUANTITY	<u>20</u>	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 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

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 AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Half Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. 751

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.

1/24/25 David Palmer 1/24/25 David Palmer
SHIPMENT DATE DRIVER'S SIGNATURE DELIVERY DATE DRIVER'S SIGNATURE

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Guage _____	Feet	Inches	BS&W/BLS Received	BS&W (%)
2nd Guage _____			Free Water	
Received _____			Total Received	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____
NAME (PRINT) [Signature] DATE 1/24 TITLE [Signature] SIGNATURE [Signature]

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Rote
Phone No. 505 968 4189

GENERATOR

NO. **HW-7037628**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Nash 53 SWH
Lease/Well _____
Name & No. _____
County Eddy
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) _____	<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) YES _____ NO _____	QUANTITY <u>20</u>	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 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

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 AGENTS SIGNATURE

DATE

SIGNATURE

TRANSPORTER

Transporter's Name Halo Services
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name David Palmer
Print Name _____
Phone No. _____
Truck No. 751

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 1/24/25

DRIVER'S SIGNATURE David Palmer

DELIVERY DATE 1/24/25

DRIVER'S SIGNATURE David Palmer

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 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 AOM If denied, why? AP
NAME (PRINT) Alexandra P DATE 1/24/25 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Bert Netz

Phone No. _____

GENERATOR

NO. **HW-730230**

Generator Manifest # _____

Location of Origin North unit # 53

Generator Name AXTO

Name & No. _____

Address _____

County _____

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 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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 18 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 01-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO Principals LLC / UIRA Transport

Driver's Name Joselmo

Address 1101st St

Print Name _____

Phone No. 575-706-9148

Phone No. _____

Transporter Ticket # _____

Truck No. E-1

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 20250124

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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/BBL'S 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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Best West

Phone No. _____

GENERATOR

NO. **HW-730229**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Wash unit 53 sub D
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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>DUMP 78005</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 18 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 01-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Associates LLC / Viper Transport
Address Wash unit 53
Phone No. 928 575 766 9148
Transporter Ticket # _____

Driver's Name Joselito V
Print Name _____
Phone No. _____
Truck No. 2-1

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 20250207

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Guage _____	Feet _____	Inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Guage _____			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 1-24-25

TITLE _____

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Heit Retz

Phone No. _____

GENERATOR

NO. **HW-730228**

Generator Manifest # _____

Location of Origin Nash unit 53

Generator Name XTO

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) _____	<u>dump truck</u>	
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"/>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 18 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 01-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NACIONAL DE TRANSPORTE

Address 2310 Via 1st St

Phone No. 575 706 9148

Transporter Ticket # _____

Driver's Name Lorenzo

Print Name _____

Phone No. _____

Truck No. 4-1

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. 28

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 Guage _____	Feet _____	Inches _____	BS&W/BBLS Received _____	BS&W (%) _____
2nd Guage _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one): **ACCEPTED** **DENIED** If denied, why? _____

NAME (PRINT) [Signature] DATE 1/24 TITLE [Signature] SIGNATURE [Signature]

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Bent Rete

Phone No. _____

GENERATOR

NO. **HW- 723100**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin XTO Wash 53 SWP
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 E&P WASTE STREAMS		
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	TOP SOIL & CALICHE SALES				
Tank Bottoms	_____		Truck Washout (exempt waste)	YES	NO	QUANTITY	TOP SOIL
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID Y - YARDS 18 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 01-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATIONAL US/VIPIA Transport
Address 2318 VIOLET ST
Phone No. 575 706 9198
Transporter Ticket # _____

Driver's Name Lorenzo
Print Name _____
Phone No. _____
Truck No. L-1

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. [Signature]

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 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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Retz

Phone No. _____

GENERATOR

NO. **HW-7038416**

Generator Manifest # _____

Location of Origin _____

Generator Name X TO _____

Lease/Well Name & No. nash 53 SWD

Address _____

County WALL

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) _____	Drilling - Washout _____			
Water Based Muds _____	Completion Fluid/Flow Back (Non-Injectable) _____	Initial Completion - Washout _____			
Water Based Cuttings _____	Produced Water (Non-Injectable) _____	Production - Waste generated during the _____			
Produced Formation Solids _____	Gathering Line Water/Waste (Non-Injectable) _____	Production - Waste generated during the _____			
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20Y 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 Two Nations LLC / V. P. Transport LLC

Driver's Name Julio Gomez

Address 2318 Violet St

Print Name _____

Phone No. 575 706 9148

Phone No. _____

Transporter Ticket # _____

Truck No. L01

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 1-21-25

DRIVER'S SIGNATURE Julio A

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 928

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 Guage _____	Feet _____	Inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Guage _____			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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



Company Name: Kent
Name: Kent
Phone No.:

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-730116**

Generator Manifest # _____
Generator Name X to
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well Name & No. Wash 538WD
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 E&P WASTE STREAMS
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)	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations LLC / Viper Transport LLC Driver's Name Julio Gomez
Address 2318 Violet Ct Print Name _____
Phone No. 575 206 9148 Phone No. _____
Transporter Ticket # _____ Truck No. 601

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 1-24-25

DRIVER'S SIGNATURE Julio Gomez

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 28

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) Aceyanda P Date 1/24/25 Title ADM Signature AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken 712

Phone No. _____

GENERATOR

NO. **HW-725960**

Generator Manifest # _____

Location of Origin _____

Generator Name X10

Lease/Well Name & No. WASH 53-SWD

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>✓</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 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

DISPOSAL QUANTITY B - BARRELS _____ L - LIQUID _____ 70 (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 Two Nations LLC / Viper Transport LLC

Driver's Name Julia Gomez

Address 7318 Viper St

Print Name _____

Phone No. 575 706 9148

Phone No. _____

Transporter Ticket # _____

Truck No. 601

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 1-29-25

DRIVER'S SIGNATURE Julia A

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 08

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? AP

NAME (PRINT) Alexandra P.

DATE 1/29/25

TITLE ADM

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Bentley

Phone No. _____

GENERATOR

NO. **HW-7037208**

Generator Manifest # _____

Location of Origin _____

Generator Name XTO

Lease/Well Name & No. NASH UNIT 5350D

Address _____

County _____

City, State, Zip _____

API No. _____

Phone No. _____

Rig Name & No. N.A.

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>B-11X 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) _____	INTERNAL USE ONLY	
Tank Bottoms _____	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 1-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations/Upa Group LLC

Driver's Name Jorge Madrigal

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 2-02

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 1-24-25

DRIVER'S SIGNATURE Jorge M

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. 80

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) Allyson P

DATE 1/24

TITLE NOM

SIGNATURE _____



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent Kel
Phone No. _____

GENERATOR

NO. **HW-7037207**

Generator Manifest # _____
Generator Name X70
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Nash cont S3 SWD
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)	_____	<u>Belly Damp</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 <u>_____</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 1-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations/liga transport
Address _____
Phone No. _____
Transporter Ticket # _____

Driver's Name Jorge Madrigal
Print Name _____
Phone No. _____
Truck No. 1-02

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 1-24-25

DRIVER'S SIGNATURE Jorge Madrigal

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

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 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 Guage	_____	_____	_____	_____
2nd Guage	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? _____

Rachael D. Gordon NAME (PRINT) 1-24-25 DATE KCC TITLE KG SIGNATURE

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



(PLEASE PRINT) *REQUIRED INFORMATION*

Name K. M. R. L.
Phone No. _____

GENERATOR

NO. **HW -721116**

Generator Manifest # _____
Generator Name X10
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. Muell Unit 53 SWD
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 _____	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 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

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 AGENTS SIGNATURE _____ DATE 1-24-25 SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nations Waste Driver's Name Jorge Rodriguez
Address _____ Print Name _____
Phone No. _____ Phone No. _____
Transporter Ticket # _____ Truck No. 2-02

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 1-24-25 DRIVER'S SIGNATURE _____

TRUCK TIME STAMP	DISPOSAL FACILITY	RECEIVING AREA
IN: _____ OUT: _____	Name/No. <u>JR</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 Guage	Feet _____	Inches _____	BS&W/BBLS Received	BS&W (%) _____
2nd Guage	_____	_____	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 1/24 TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name KENT POT

Phone No. _____

GENERATOR

NO. **HW-7038785**

Generator Manifest # X70

Location of Origin WASH UNIT 53 SWO

Generator 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 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 <u>(circled)</u>	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/24/25

SIGNATURE _____

TRANSPORTER

Transporter's Name TWO NATURAL VISA

Driver's Name John Kuran

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. L-03

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 01/24/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. (Signature)

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 (circled) 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 1/24

TITLE _____

SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kevin Rose

Phone No. _____

GENERATOR

NO. **HW-7038755**

Generator Manifest # XTO

Location of Origin NASH UNIT 53 SWD

Generator Name _____

Name & No. _____

Address _____

County _____

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 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 _____		<u>Belly</u>				
Water Based Muds _____						
Water Based Cuttings _____						
Produced Formation Solids _____	INTERNAL USE ONLY Truck Washout (exempt waste) YES _____ NO _____	TOP SOIL & CALICHE SALES		QUANTITY	TOP SOIL	CALICHE
Tank Bottoms _____						
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 01/29/25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two women / Val + Amber Driver's Name Kevin Rose

Address _____ Print Name _____

Phone No. _____ Phone No. _____

Transporter Ticket # _____ Truck No. L-03

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 01/29/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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) Alexandra P

DATE 1/29/25

TITLE ROM

SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name KEVIN VETZ

Phone No. _____

GENERATOR

NO. **HW-7038932**

Generator Manifest # _____
Generator Name XTO ENVIRONMENTAL
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. ROSH 53 4WD
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	QUANTITY	_____
Gas Plant Waste	_____			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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 Two Nations LLC (SONIX)
Address 2718 Woodst St
Phone No. 505 706 9148
Transporter Ticket # _____

Driver's Name Benjamin Felix
Print Name _____
Phone No. _____
Truck No. SS

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 01/14/25

DRIVER'S SIGNATURE Felix

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. [Signature]

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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name NEW 1212

Phone No. _____

GENERATOR

NO. **HW-7038928**

Generator Manifest # _____

Location of Origin _____

Generator Name X10

Lease/Well Name & No. Rush C3 CWP

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) _____	<u>BELY</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) _____	INTERNAL USE ONLY	
Tank Bottoms _____	Truck Washout (exempt waste) YES _____ NO <u>(circled)</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 70 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 Two Valleys LLC (fem) Driver's Name Benjamin Celix

Address 2318 Violet St Print Name _____

Phone No. 575 706 9148 Phone No. _____

Transporter Ticket # _____ Truck No. Two 35

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 01/24/25

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. (Signature)

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 (circled) NO _____ If YES, was reading > 50 micro roentgens? (Circle One) YES _____ NO _____

PASS THE PAINT FILTER TEST? (Circle One) YES _____ NO _____

TANK BOTTOMS

1st Guage _____	Feet _____	Inches _____	BS&W/BBLs Received _____	BS&W (%) _____
2nd Guage _____			Free Water _____	
Received _____			Total Received _____	

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED _____ If denied, why? _____

NAME (PRINT) (Signature) DATE _____ TITLE _____ SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Ken Letz
Phone No. _____

GENERATOR

NO. **HW-7038933**

Generator Manifest # _____ Location of Origin _____
 Generator Name XTO Lease/Well _____
 Address _____ Name & No. nash 53 SWD
 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 Liquids _____	INTERNAL USE ONLY Truck Washout (exempt waste) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOP SOIL & CALICHE SALES			
Tank Bottoms _____		QUANTITY		TOP SOIL	CALICHE
E&P Contaminated Soil _____ <u>1</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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20 Y - YARDS E - EACH

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- 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 TWO NATIONAL LLC (Phoenix) Driver's Name Luis Moreno
 Address 2318 North Print Name _____
 Phone No. 575 705 9148 Phone No. _____
 Transporter Ticket # _____ Truck No. 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 01-24-25

DRIVER'S SIGNATURE Luis Moreno

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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) [Signature] DATE 1/24 TITLE [Signature] SIGNATURE [Signature]

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST



Company Man Contact Information
Name Kent Retz
Phone No. _____

(PLEASE PRINT) *REQUIRED INFORMATION*

GENERATOR

NO. **HW-7038929**

Generator Manifest # _____
Generator Name X+O
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well
Name & No. nash⁵³ SWD
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 E&P WASTE STREAMS	
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	TOP SOIL & CALICHE SALES			
E&P Contaminated Soil	<u>X</u>		Truck Washout (exempt waste)	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	QUANTITY _____
Gas Plant Waste	_____				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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 TWO National (Fenit) LLC
Address 2318 Norte
Phone No. 575 706 9148
Transporter Ticket # _____

Driver's Name Luis Moreno
Print Name _____
Phone No. _____
Truck No. 410

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 01-24-25

DRIVER'S SIGNATURE Luis Moreno

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING-AREA

Name/No. 08

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 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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name: Scott West

Phone No. _____

GENERATOR

NO. **HW-7037217**

Generator Manifest # X70
Generator Name _____
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin
Lease/Well Name & No. Ac 3340
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 _____		TOP SOIL & CALICHE SALES				
Water Based Muds _____		INTERNAL USE ONLY				
Water Based Cuttings _____		Truck Washout (exempt waste)	YES	NO	QUANTITY	TOP SOIL
Produced Formation Solids _____						
Tank Bottoms _____						
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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Brothers LLC
Address 2318 Violet St
Phone No. 573 206 9198
Transporter Ticket # _____

Driver's Name Edmond
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. 28

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 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) Alyson P DATE 1/24 TITLE ADW SIGNATURE _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Kent retz

Phone No. _____

GENERATOR

NO. **HW-7038930**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin _____
Lease/Well _____
Name & No. Nash 53 SWD
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	QUANTITY	_____
Gas Plant Waste	_____			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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 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)
- 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 Two Nations (Fenix) LLC
Address 2318 Violet St
Phone No. 575 706 9148
Transporter Ticket # _____

Driver's Name Edmundo F
Print Name _____
Phone No. _____
Truck No. 5

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 1-24-25 DRIVER'S SIGNATURE Edmundo F

TRUCK TIME STAMP

DISPOSAL FACILITY

RECEIVING AREA

IN: _____ OUT: _____

Name/No. [Signature]

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 _____

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT) *REQUIRED INFORMATION*

Name Brett Netz

Phone No. _____

GENERATOR

NO. **HW-7038443**

Generator Manifest # _____
Generator Name XTO
Address _____
City, State, Zip _____
Phone No. _____

Location of Origin Wash 001st 53
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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>20</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) _____	TOP SOIL & CALICHE SALES			
Tank Bottoms _____	INTERNAL USE ONLY				
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 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

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 AGENTS SIGNATURE _____

DATE 01-24-25

SIGNATURE _____

TRANSPORTER

Transporter's Name Two Nacional LLC
Address Violet St
Phone No. 975 706 9148
Transporter Ticket # _____

Driver's Name [Signature]
Print Name _____
Phone No. _____
Truck No. 128

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. 28

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 roentgens? (Circle One) YES NO
PASS THE PAINT FILTER TEST? (Circle One) YES NO

TANK BOTTOMS

1st Guage	Feet _____	Inches _____	BS&W/BBLs Received	BS&W (%)
2nd Guage	_____	_____	Free Water	_____
Received	_____	_____	Total Received	_____

I hereby certify that the above load material has been (circle one): ACCEPTED DENIED If denied, why? ADM
NAME (PRINT) Alexandra DATE 1/24/25 TITLE _____ SIGNATURE AP

NEW MEXICO NON-HAZARDOUS OILFIELD WASTE MANIFEST

Company Man Contact Information



(PLEASE PRINT)

REQUIRED INFORMATION

Name Xent Letz

Phone No. _____

GENERATOR

NO. **HW-7038951**

Generator Manifest # X70

Location of Origin Lease/Well _____

Generator Name _____

Name & No. NASH 53 SWD

Address _____

County _____

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 E&P WASTE STREAMS			
Oil Based Cuttings _____	Washout Water (Non-Injectable) _____	<u>Belly</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 <u>(circled)</u>	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 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

DISPOSAL QUANTITY B - BARRELS L - LIQUID 20 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 AGENTS SIGNATURE _____

DATE _____

SIGNATURE _____

TRANSPORTER

Transporter's Name Fenix Trucking, LLC

Driver's Name Alfredo

Address _____

Print Name _____

Phone No. _____

Phone No. _____

Transporter Ticket # _____

Truck No. 128

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 *1-24-25*

DRIVER'S SIGNATURE _____

TRUCK TIME STAMP

IN: _____ OUT: _____

DISPOSAL FACILITY

RECEIVING AREA

Name/No. 28

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 Guage _____	Feet _____	Inches _____	BS&W/BLS Received _____	BS&W (%) _____
2nd Guage _____			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 _____



APPENDIX E

Laboratory Analytical Reports & Chain of Custody Documentation



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

October 30, 2024

TACOMA MORRISSEY
ENSOLUM
3122 NATIONAL PARKS HWY
CARLSBAD, NM 88220

RE: NASH UNIT 53 SWD

Enclosed are the results of analyses for samples received by the laboratory on 10/22/24 13:30.

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:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
--	---	------------------------------

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
PH 01 .5	H246432-01	Soil	21-Oct-24 09:45	22-Oct-24 13:30
PH 01A 4	H246432-02	Soil	21-Oct-24 10:05	22-Oct-24 13:30
PH 02 .5	H246432-03	Soil	21-Oct-24 10:35	22-Oct-24 13:30
PH 02A 4	H246432-04	Soil	21-Oct-24 10:55	22-Oct-24 13:30
PH 03 .5	H246432-05	Soil	21-Oct-24 12:03	22-Oct-24 13:30
PH 03A 4	H246432-06	Soil	21-Oct-24 12:15	22-Oct-24 13:30

10/30/24 - Client changed the project name and cost center (see COC). This is the revised report and will replace the one sent on 10/24/24.

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 or 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 damage 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:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
--	---	------------------------------

**PH 01 .5
H246432-01 (Soil)**

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

Cardinal Laboratories

Inorganic Compounds

Chloride	2600		16.0	mg/kg	4	4102302	HM	23-Oct-24	4500-Cl-B	
-----------------	-------------	--	------	-------	---	---------	----	-----------	-----------	--

Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			111 %		71.5-134	4102233	JH	22-Oct-24	8021B	
---------------------------------------	--	--	-------	--	----------	---------	----	-----------	-------	--

Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

Surrogate: 1-Chlorooctane			104 %		48.2-134	4102232	MS	22-Oct-24	8015B	
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Surrogate: 1-Chlorooctadecane			94.2 %		49.1-148	4102232	MS	22-Oct-24	8015B	
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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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**PH 01A 4
H246432-02 (Soil)**

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

Inorganic Compounds

Chloride	2760		16.0	mg/kg	4	4102302	HM	23-Oct-24	4500-Cl-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			108 %	71.5-134		4102233	JH	22-Oct-24	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

<i>Surrogate: 1-Chlorooctane</i>			89.3 %	48.2-134		4102232	MS	22-Oct-24	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			78.1 %	49.1-148		4102232	MS	22-Oct-24	8015B	
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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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**PH 02 .5
H246432-03 (Soil)**

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

Inorganic Compounds

Chloride	4000		16.0	mg/kg	4	4102302	HM	23-Oct-24	4500-Cl-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			98.5 %	71.5-134		4102233	JH	22-Oct-24	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

<i>Surrogate: 1-Chlorooctane</i>			91.4 %	48.2-134		4102232	MS	22-Oct-24	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			78.5 %	49.1-148		4102232	MS	22-Oct-24	8015B	
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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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**PH 02A 4
H246432-04 (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	4102302	HM	23-Oct-24	4500-Cl-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			107 %	71.5-134		4102233	JH	22-Oct-24	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

<i>Surrogate: 1-Chlorooctane</i>			113 %	48.2-134		4102232	MS	22-Oct-24	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			99.9 %	49.1-148		4102232	MS	22-Oct-24	8015B	
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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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**PH 03 .5
H246432-05 (Soil)**

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

Inorganic Compounds

Chloride	2800		16.0	mg/kg	4	4102302	HM	23-Oct-24	4500-CI-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

<i>Surrogate: 4-Bromofluorobenzene (PID)</i>			108 %	71.5-134		4102233	JH	22-Oct-24	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

<i>Surrogate: 1-Chlorooctane</i>			101 %	48.2-134		4102232	MS	22-Oct-24	8015B	
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<i>Surrogate: 1-Chlorooctadecane</i>			92.8 %	49.1-148		4102232	MS	22-Oct-24	8015B	
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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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**PH 03A 4
H246432-06 (Soil)**

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

Inorganic Compounds

Chloride	48.0		16.0	mg/kg	4	4102302	HM	23-Oct-24	4500-Cl-B	
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Volatile Organic Compounds by EPA Method 8021

Benzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Toluene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Ethylbenzene*	<0.050		0.050	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total Xylenes*	<0.150		0.150	mg/kg	50	4102233	JH	22-Oct-24	8021B	
Total BTEX	<0.300		0.300	mg/kg	50	4102233	JH	22-Oct-24	8021B	

Surrogate: 4-Bromofluorobenzene (PID)			104 %	71.5-134		4102233	JH	22-Oct-24	8021B	
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Petroleum Hydrocarbons by GC FID

GRO C6-C10*	<20.0		20.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	R-07
DRO >C10-C28*	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	
EXT DRO >C28-C36	<10.0		10.0	mg/kg	1	4102232	MS	22-Oct-24	8015B	

Surrogate: 1-Chlorooctane			97.9 %	48.2-134		4102232	MS	22-Oct-24	8015B	
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Surrogate: 1-Chlorooctadecane			84.7 %	49.1-148		4102232	MS	22-Oct-24	8015B	
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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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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
Batch 4102302 - 1:4 DI Water										
Blank (4102302-BLK1)										
Prepared & Analyzed: 23-Oct-24										
Chloride	ND	16.0	mg/kg							
LCS (4102302-BS1)										
Prepared & Analyzed: 23-Oct-24										
Chloride	448	16.0	mg/kg	400		112	80-120			
LCS Dup (4102302-BSD1)										
Prepared & Analyzed: 23-Oct-24										
Chloride	432	16.0	mg/kg	400		108	80-120	3.64	20	

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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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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 4102233 - Volatiles

Blank (4102233-BLK1)

Prepared & Analyzed: 22-Oct-24

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)	0.0527		mg/kg	0.0500		105	71.5-134			

LCS (4102233-BS1)

Prepared & Analyzed: 22-Oct-24

Benzene	1.89	0.050	mg/kg	2.00		94.6	82.8-130			
Toluene	2.03	0.050	mg/kg	2.00		101	86-128			
Ethylbenzene	2.07	0.050	mg/kg	2.00		104	85.9-128			
m,p-Xylene	4.13	0.100	mg/kg	4.00		103	89-129			
o-Xylene	2.08	0.050	mg/kg	2.00		104	86.1-125			
Total Xylenes	6.21	0.150	mg/kg	6.00		103	88.2-128			
Surrogate: 4-Bromofluorobenzene (PID)	0.0509		mg/kg	0.0500		102	71.5-134			

LCS Dup (4102233-BSD1)

Prepared & Analyzed: 22-Oct-24

Benzene	2.05	0.050	mg/kg	2.00		103	82.8-130	8.23	15.8	
Toluene	2.24	0.050	mg/kg	2.00		112	86-128	9.70	15.9	
Ethylbenzene	2.32	0.050	mg/kg	2.00		116	85.9-128	11.1	16	
m,p-Xylene	4.63	0.100	mg/kg	4.00		116	89-129	11.5	16.2	
o-Xylene	2.33	0.050	mg/kg	2.00		116	86.1-125	11.2	16.7	
Total Xylenes	6.96	0.150	mg/kg	6.00		116	88.2-128	11.4	16.3	
Surrogate: 4-Bromofluorobenzene (PID)	0.0517		mg/kg	0.0500		103	71.5-134			

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Analytical Results For:

ENSOLUM 3122 NATIONAL PARKS HWY CARLSBAD NM, 88220	Project: NASH UNIT 53 SWD Project Number: 03C1558505 Project Manager: TACOMA MORRISSEY Fax To:	Reported: 30-Oct-24 13:07
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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 4102232 - General Prep - Organics

Blank (4102232-BLK1)		Prepared & Analyzed: 22-Oct-24								
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							
<i>Surrogate: 1-Chlorooctane</i>	57.6		mg/kg	50.0		115	48.2-134			
<i>Surrogate: 1-Chlorooctadecane</i>	52.6		mg/kg	50.0		105	49.1-148			
LCS (4102232-BS1)		Prepared & Analyzed: 22-Oct-24								
GRO C6-C10	203	10.0	mg/kg	200		102	81.5-123			
DRO >C10-C28	201	10.0	mg/kg	200		101	77.7-122			
Total TPH C6-C28	405	10.0	mg/kg	400		101	80.9-121			
<i>Surrogate: 1-Chlorooctane</i>	62.1		mg/kg	50.0		124	48.2-134			
<i>Surrogate: 1-Chlorooctadecane</i>	58.5		mg/kg	50.0		117	49.1-148			
LCS Dup (4102232-BSD1)		Prepared & Analyzed: 22-Oct-24								
GRO C6-C10	211	10.0	mg/kg	200		106	81.5-123	3.86	13	
DRO >C10-C28	211	10.0	mg/kg	200		105	77.7-122	4.46	15.6	
Total TPH C6-C28	422	10.0	mg/kg	400		106	80.9-121	4.16	18.5	
<i>Surrogate: 1-Chlorooctane</i>	67.3		mg/kg	50.0		135	48.2-134			S-05
<i>Surrogate: 1-Chlorooctadecane</i>	61.9		mg/kg	50.0		124	49.1-148			

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Celey D. Keene, Lab Director/Quality Manager



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Notes and Definitions

- S-05 The surrogate recovery is outside of lab established statistical control limits but still within method limits. Data is not adversely affected.
- R-07 The Reporting Limit for this analyte has been raised to account for target analyte concentration in the solvent.
- 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



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: Ensolum, LLC
 Project Manager: Tacoma Morrissey
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 337-257-8307 Fax #:
 Project #: 03C1558505 Project Owner: XTO
 Project Name: JRW-DI-11 Battery Wash Unit 53
 Project Location: 32,307893, -103,933313
 State: NM Zip: 88220
 City: Carlsbad
 P.O. #:
 Company: XTO Energy Inc.
 Attn: Colton Brown
 Address: 3104 E. Green St.
 State: NM Zip: 88220
 City: Carlsbad
 P.O. #:
 Fax #:
 Sample Name: Jesse Dorman
 FOR LAB USE ONLY

Lab I.D.	Sample I.D.	Sample Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	BTEX	TPH	CHLORIDE
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
<u>H246432</u>	PH01	0.5	(G)	1							10/28/24	045			
	PH01A	4	(C)	1								1005			
	PH02	0.5	(C)	1								1035			
	PH03A	4	(C)	1								1055			
	PH03	0.5	(C)	1								1203			
	PH03A	4	(C)	1								1215			
	510														

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Relinquished By: [Signature] Date: 10-22-24 Received By: [Signature] Date: 10-28-24
 Relinquished By: [Signature] Date: 10-22-24 Received By: [Signature] Date: 10-28-24

Delivered By: (Circle One) Observed Temp. °C: 0.3 Sample Condition: Cool Intact
 Corrected Temp. °C: 0.3 Yes No
 Checked By: [Signature] Turnaround Time: 440 Standard Rush
 Bacteria (only) Sample Condition: Cool Intact Observed Temp. °C:
 Corrected Temp. °C:
 Verbal Result: Yes No Add'l Phone #:
 All Results are emailed. Please provide Email address:
 REMARKS: * Customer requested same
 Cost Center: 0558505 API 36015-39400
 Incident ID: NAPP2406163532

FORRA-006 R 3 2 10/07/21
 † Cardinal cannot accept verbal changes. Please email changes to celey.keene@cardinallabs.com



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

January 28, 2025

TRACY HILLARD

ENSOLUM

3122 NATIONAL PARKS HWY

CARLSBAD, NM 88220

RE: NASH UNIT 53 SWD

Enclosed are the results of analyses for samples received by the laboratory on 01/27/25 11:44.

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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 02 4' (H250466-01)

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	1.87	93.7	2.00	6.17		
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08		
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19		
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21		
Total BTEX	<0.300	0.300	01/28/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 93.9 % 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	432	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16		
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69		
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND						

Surrogate: 1-Chlorooctane 96.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 94.6 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 03 4' (H250466-02)

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	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.8 % 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	112	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 97.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 92.1 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received: 01/27/2025
 Reported: 01/28/2025
 Project Name: NASH UNIT 53 SWD
 Project Number: 03C1558505
 Project Location: XTO 32.307893-103.933313

Sampling Date: 01/23/2025
 Sampling Type: Soil
 Sampling Condition: Cool & Intact
 Sample Received By: Shalyn Rodriguez

Sample ID: FS 04 4' (H250466-03)

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	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.8 % 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	128	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 89.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 87.2 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 05 4' (H250466-04)

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	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.2 % 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	80.0	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 98.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 97.9 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 06 4' (H250466-05)

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	1.87	93.7	2.00	6.17		
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08		
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19		
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21		
Total BTEX	<0.300	0.300	01/28/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 94.3 % 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	144	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16		
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69		
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND						

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 97.9 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 09 4' (H250466-06)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.0 % 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	480	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 97.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 95.8 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 11 4' (H250466-07)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.2 % 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	368	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.0 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 12 4' (H250466-08)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.0 % 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	160	16.0	01/28/2025	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	01/27/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/27/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/27/2025	ND					

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.2 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 13 4' (H250466-09)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.7 % 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	144	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 99.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 96.7 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received: 01/27/2025
 Reported: 01/28/2025
 Project Name: NASH UNIT 53 SWD
 Project Number: 03C1558505
 Project Location: XTO 32.307893-103.933313

Sampling Date: 01/23/2025
 Sampling Type: Soil
 Sampling Condition: Cool & Intact
 Sample Received By: Shalyn Rodriguez

Sample ID: FS 14 4' (H250466-10)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.8 % 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	144	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 88.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 84.4 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 15 4' (H250466-11)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.0 % 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	208	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 79.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 76.2 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 18 4' (H250466-12)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.7 % 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	320	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 78.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 75.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 01 0-4' (H250466-13)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.6 % 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	240	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 86.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 83.3 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 02 0-4' (H250466-14)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.2 % 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	96.0	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 89.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 84.9 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 03 0-4' (H250466-15)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.4 % 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	80.0	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 87.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 82.1 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/27/2025	Sampling Date:	01/23/2025
Reported:	01/28/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Shalyn Rodriguez
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 04 0-4' (H250466-16)

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	01/28/2025	ND	1.87	93.7	2.00	6.17	
Toluene*	<0.050	0.050	01/28/2025	ND	1.97	98.5	2.00	6.08	
Ethylbenzene*	<0.050	0.050	01/28/2025	ND	1.90	94.8	2.00	6.19	
Total Xylenes*	<0.150	0.150	01/28/2025	ND	5.56	92.7	6.00	6.21	
Total BTEX	<0.300	0.300	01/28/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.3 % 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	144	16.0	01/28/2025	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	01/28/2025	ND	217	109	200	2.16	
DRO >C10-C28*	<10.0	10.0	01/28/2025	ND	211	106	200	2.69	
EXT DRO >C28-C36	<10.0	10.0	01/28/2025	ND					

Surrogate: 1-Chlorooctane 95.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 90.7 % 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, Lab Director/Quality Manager



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

2 of 2

BILL TO

ANALYSIS REQUEST

Company Name: Ensolum, LLC
 Project Manager: Tracy Hillard
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 575 437 3906 Fax #: Project Owner: XTO
 Project #: 03C1558585
 Project Name: NASH UNIT 53 SWP
 Project Location: 32.309183, -103.930661 3313
 Sample Name: Joshua Boxley
 P.O. #: Company: XTO Energy Inc
 Attn: Colton Brown
 Address: 3104 E Green St
 City: Carlsbad State: NM Zip: 88220
 Phone #: Fax #:

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
H850410	FS02	41	C1								1/23/25	0955	X	X	X
	FS03											1005			
	FS04											1006			
	FS05											1007			
	FS06											1008			
	FS09											1016			
	FS11											1030			
	FS18											1032			
	FS13											1034			
	FS14											1036			

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Relinquished By: [Signature]
 Date: 1/23/25
 Time: 1144
 Received By: [Signature]
 Date: 1/23/25
 Time: [Blank]

Delivered By: (Circle One) Observed Temp.: 30.0°C
 Corrected Temp.: 24.1°C
 Sample Condition: Cool Intact Yes [X] No []
 Checked By: [Signature]

FORM-006 R.3.2 10/07/21

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

REMARKS: Turnaround Time: Standard Rush [X]
 Incident: NAAP 246163532
 Cost Center: [Blank]
 Verbal Result: Yes [] No [X] Add'l Phone #: [Blank]
 All Results are emailed. Please provide Email address:
 Hillard @ensolum.com, TMorrissey@ensolum.com, KThomason@ensolum.com



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

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

1 of 2

BILL TO

ANALYSIS REQUEST

Company Name: Ensolum, LLC
 Project Manager: Tracy Hillard
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 575 437 3906 Fax #: Project Owner: XTO
 Project #: 0301558505
 Project Name: NASH Unit 53 SWD
 Project Location: 32.300893, -103.030667 3313
 Sampler Name: Joshua Boxley
 P.O. #: Company: XTO Energy Inc
 Attn: Colton Brown
 Address: 3104 E Green St
 City: Carlsbad State: NM Zip: 88220
 Phone #: Fax #:

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
H504040																
11	FS15	4'	C	1							1.23.25	1037	X	X	X	
12	FS18	4'	C	1									X	X	X	
13	SW01	0-4'											X	X	X	
14	SW02	0-4'											X	X	X	
15	SW03	0-4'											X	X	X	
16	SW04	0-4'											X	X	X	

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Relinquished By: [Signature]
 Date: 1/23/25
 Time: 1:44
 Received By: [Signature]
 Date: [Blank]
 Time: [Blank]

Delivered By: (Circle One) Observed Temp. °C: 3.0
 Corrected Temp. °C: 2.4
 Sample Condition: Cool Intact
 Checked By: [Signature]
 Remarks: NAPP 2406163532
 Incident: @ensolum.com, TMorrissey@ensolum.com, KThomason@ensolum.com
 Cost Center: [Blank]

FORM-006 R 3.2 10/07/21

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

January 30, 2025

TRACY HILLARD

ENSOLUM

3122 NATIONAL PARKS HWY

CARLSBAD, NM 88220

RE: NASH UNIT 53 SWD

Enclosed are the results of analyses for samples received by the laboratory on 01/29/25 11:22.

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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 01 4' (H250525-01)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.9 % 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	80.0	16.0	01/30/2025	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	01/29/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/29/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/29/2025	ND					

Surrogate: 1-Chlorooctane 89.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 81.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 07 4' (H250525-02)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.7 % 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	80.0	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 86.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 78.7 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 08 4' (H250525-03)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.1 % 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	64.0	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 104 % 48.2-134

Surrogate: 1-Chlorooctadecane 96.6 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 10 4' (H250525-04)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.7 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 106 % 48.2-134

Surrogate: 1-Chlorooctadecane 99.5 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 16 4' (H250525-05)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.4 % 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	64.0	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 86.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 82.2 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 17 4' (H250525-06)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.6 % 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	352	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 91.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 83.9 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 19 4' (H250525-07)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.6 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 93.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 87.0 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 20 4' (H250525-08)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 94.0 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 96.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 88.4 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 21 4' (H250525-09)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.8 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 105 % 48.2-134

Surrogate: 1-Chlorooctadecane 95.6 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 22 4' (H250525-10)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.9 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 102 % 48.2-134

Surrogate: 1-Chlorooctadecane 96.5 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 23 4' (H250525-11)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.5 % 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	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 87.2 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 24 4' (H250525-12)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.2 % 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	320	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 103 % 48.2-134

Surrogate: 1-Chlorooctadecane 94.8 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 25 4' (H250525-13)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.2 % 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	128	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 89.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 84.8 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 26 4' (H250525-14)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.1 % 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	128	16.0	01/30/2025	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 97.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 89.6 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 27 4' (H250525-15)

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	01/29/2025	ND	2.04	102	2.00	0.209		
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542		
Total BTEX	<0.300	0.300	01/29/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 92.9 % 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	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	01/30/2025	ND	231	116	200	0.476		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 85.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 78.3 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 28 4' (H250525-16)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.1 % 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	80.0	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 87.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 80.4 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 29 4' (H250525-17)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.7 % 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	80.0	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 92.0 % 48.2-134

Surrogate: 1-Chlorooctadecane 84.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 30 4' (H250525-18)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 92.7 % 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	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 95.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 89.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/27/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 31 4' (H250525-19)

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	01/29/2025	ND	2.04	102	2.00	0.209		
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542		
Total BTEX	<0.300	0.300	01/29/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 92.8 % 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	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	01/30/2025	ND	231	116	200	0.476		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 98.6 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 32 4' (H250525-20)

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	01/29/2025	ND	2.04	102	2.00	0.209	
Toluene*	<0.050	0.050	01/29/2025	ND	2.12	106	2.00	0.0555	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.03	101	2.00	0.256	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	5.96	99.3	6.00	0.542	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 93.0 % 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	112	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	01/30/2025	ND	231	116	200	0.476	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	206	103	200	0.858	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 91.7 % 48.2-134

Surrogate: 1-Chlorooctadecane 86.6 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 33 4' (H250525-21)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 104 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.5 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 34 4' (H250525-22)

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	01/29/2025	ND	2.17	109	2.00	1.21		
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478		
Total BTEX	<0.300	0.300	01/29/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 112 % 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	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	01/30/2025	ND	220	110	200	1.31		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 104 % 48.2-134

Surrogate: 1-Chlorooctadecane 101 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 35 4' (H250525-23)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	112	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 98.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 95.8 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 36 5' (H250525-24)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	288	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 109 % 48.2-134

Surrogate: 1-Chlorooctadecane 108 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 37 5' (H250525-25)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	208	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 101 % 48.2-134

Surrogate: 1-Chlorooctadecane 98.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 38 5' (H250525-26)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 112 % 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	288	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 110 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 39 5' (H250525-27)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	224	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 93.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 90.1 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 40 5' (H250525-28)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 112 % 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	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 105 % 48.2-134

Surrogate: 1-Chlorooctadecane 104 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 41 5' (H250525-29)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 109 % 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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 113 % 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:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 42 5' (H250525-30)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 112 % 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	464	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 111 % 48.2-134

Surrogate: 1-Chlorooctadecane 108 % 49.1-148

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

Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 43 5' (H250525-31)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	336	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 108 % 48.2-134

Surrogate: 1-Chlorooctadecane 103 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 44 5' (H250525-32)

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	01/29/2025	ND	2.17	109	2.00	1.21		
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478		
Total BTEX	<0.300	0.300	01/29/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 109 % 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	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	01/30/2025	ND	220	110	200	1.31		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 90.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 80.5 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 45 5' (H250525-33)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 98.3 % 48.2-134

Surrogate: 1-Chlorooctadecane 93.0 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 46 5' (H250525-34)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 108 % 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	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 97.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 91.4 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 47 5' (H250525-35)

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	01/29/2025	ND	2.17	109	2.00	1.21		
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478		
Total BTEX	<0.300	0.300	01/29/2025	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	416	16.0	01/30/2025	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	01/30/2025	ND	220	110	200	1.31		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 89.2 % 48.2-134

Surrogate: 1-Chlorooctadecane 88.5 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 48 5' (H250525-36)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 109 % 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	01/30/2025	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 86.4 % 48.2-134

Surrogate: 1-Chlorooctadecane 82.9 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 49 5' (H250525-37)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	288	16.0	01/30/2025	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 91.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 93.1 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 50 5' (H250525-38)

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	01/29/2025	ND	2.17	109	2.00	1.21		
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478		
Total BTEX	<0.300	0.300	01/29/2025	ND						

Surrogate: 4-Bromofluorobenzene (PID) 109 % 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	01/30/2025	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	01/30/2025	ND	220	110	200	1.31		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 96.1 % 48.2-134

Surrogate: 1-Chlorooctadecane 94.5 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 51 5' (H250525-39)

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	01/29/2025	ND	2.17	109	2.00	1.21		
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12		
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710		
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478		
Total BTEX	<0.300	0.300	01/29/2025	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	224	16.0	01/30/2025	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	01/30/2025	ND	220	110	200	1.31		
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577		
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND						

Surrogate: 1-Chlorooctane 98.6 % 48.2-134

Surrogate: 1-Chlorooctadecane 96.0 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: FS 52 5' (H250525-40)

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	01/29/2025	ND	2.17	109	2.00	1.21	
Toluene*	<0.050	0.050	01/29/2025	ND	2.23	112	2.00	1.12	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.26	113	2.00	0.710	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.87	114	6.00	0.478	
Total BTEX	<0.300	0.300	01/29/2025	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	128	16.0	01/30/2025	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	01/30/2025	ND	220	110	200	1.31	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	209	105	200	0.577	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 85.9 % 48.2-134

Surrogate: 1-Chlorooctadecane 82.3 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 05 (H250525-41)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	01/30/2025	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	01/29/2025	ND	218	109	200	3.32	
DRO >C10-C28*	<10.0	10.0	01/29/2025	ND	214	107	200	5.92	
EXT DRO >C28-C36	<10.0	10.0	01/29/2025	ND					

Surrogate: 1-Chlorooctane 109 % 48.2-134

Surrogate: 1-Chlorooctadecane 118 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 06 (H250525-42)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	ND					

Surrogate: 4-Bromofluorobenzene (PID) 103 % 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	256	16.0	01/30/2025	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	01/29/2025	ND	218	109	200	3.32	
DRO >C10-C28*	<10.0	10.0	01/29/2025	ND	214	107	200	5.92	
EXT DRO >C28-C36	<10.0	10.0	01/29/2025	ND					

Surrogate: 1-Chlorooctane 96.8 % 48.2-134

Surrogate: 1-Chlorooctadecane 101 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 07 (H250525-43)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	256	16.0	01/30/2025	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	01/29/2025	ND	218	109	200	3.32	
DRO >C10-C28*	<10.0	10.0	01/29/2025	ND	214	107	200	5.92	
EXT DRO >C28-C36	<10.0	10.0	01/29/2025	ND					

Surrogate: 1-Chlorooctane 112 % 48.2-134

Surrogate: 1-Chlorooctadecane 118 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 08 (H250525-44)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	256	16.0	01/30/2025	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	01/30/2025	ND	208	104	200	1.41	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	210	105	200	1.16	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 124 % 48.2-134

Surrogate: 1-Chlorooctadecane 146 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 09 (H250525-45)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	240	16.0	01/30/2025	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	01/30/2025	ND	208	104	200	1.41	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	210	105	200	1.16	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 116 % 48.2-134

Surrogate: 1-Chlorooctadecane 134 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 10 (H250525-46)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	176	16.0	01/30/2025	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	01/30/2025	ND	208	104	200	1.41	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	210	105	200	1.16	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 115 % 48.2-134

Surrogate: 1-Chlorooctadecane 128 % 49.1-148

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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 11 (H250525-47)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	176	16.0	01/30/2025	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	01/30/2025	ND	208	104	200	1.41	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	210	105	200	1.16	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 125 % 48.2-134

Surrogate: 1-Chlorooctadecane 141 % 49.1-148

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Celey D. Keene, Lab Director/Quality Manager



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Analytical Results For:

ENSOLUM
 TRACY HILLARD
 3122 NATIONAL PARKS HWY
 CARLSBAD NM, 88220
 Fax To:

Received:	01/29/2025	Sampling Date:	01/28/2025
Reported:	01/30/2025	Sampling Type:	Soil
Project Name:	NASH UNIT 53 SWD	Sampling Condition:	Cool & Intact
Project Number:	03C1558505	Sample Received By:	Tamara Oldaker
Project Location:	XTO 32.307893-103.933313		

Sample ID: SW 12 (H250525-48)

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	01/29/2025	ND	2.07	104	2.00	1.71	
Toluene*	<0.050	0.050	01/29/2025	ND	2.14	107	2.00	0.378	
Ethylbenzene*	<0.050	0.050	01/29/2025	ND	2.11	106	2.00	0.187	
Total Xylenes*	<0.150	0.150	01/29/2025	ND	6.35	106	6.00	0.214	
Total BTEX	<0.300	0.300	01/29/2025	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	160	16.0	01/30/2025	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	01/30/2025	ND	208	104	200	1.41	
DRO >C10-C28*	<10.0	10.0	01/30/2025	ND	210	105	200	1.16	
EXT DRO >C28-C36	<10.0	10.0	01/30/2025	ND					

Surrogate: 1-Chlorooctane 105 % 48.2-134

Surrogate: 1-Chlorooctadecane 116 % 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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Celey D. Keene, Lab Director/Quality Manager



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(575) 393-2326 FAX (575) 393-2476

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

1 of 5

Company Name: Ensolum, LLC
Project Manager: Tracy Hillard

Address: 3122 National Parks Hwy
City: Carlsbad State: NM Zip: 88220

Phone #: 575 937 3906 Fax #: Project Owner: XTO

Project #: 03C1558505 Project Name: Nash Unit 53 SWP

Project Location: 32.302883, -103.930004 3313

Sampler Name: Joshua Boxley

FOR LAB USE ONLY

BILL TO

P.O. #: Company: XTO Energy Inc

Attn: Colton Brown

Address: 3104 E Green St

City: Carlsbad State: NM Zip: 88220

Phone #: Fax #:

ANALYSIS REQUEST

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
AS0525	FS01	4	C	1								1/27/25	1150	X	X	X
	FS07	4	C	1								1/27/25	1155	X	X	X
	FS08	4	C	1								1/27/25	1200	X	X	X
	FS10	4	C	1								1/27/25	1205	X	X	X
	FS16	4	C	1								1/27/25	1215	X	X	X
	FS17	4	C	1								1/27/25	1220	X	X	X
	FS20	4	C	1								1/27/25	1225	X	X	X
	FS21	4	C	1								1/27/25	1230	X	X	X
	FS22	4	C	1								1/27/25	1245	X	X	X
												1/27/25	1300	X	X	X

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Relinquished By: [Signature] Date: 1-29-25 Received By: [Signature] Date: 1-29-25

Delivered By: (Circle One) Observed Temp. °C: 1.7 Sample Condition: Cool Intact Yes [X] No [] Checked By: [Signature]

Sampler - UPS - Bus - Other: Corrected Temp. °C: 1.1

FORM-006 R 3.2 10/07/21

Turnaround Time: Standard Rush Bacteria (only) Sample Condition Cool Intact Yes [X] No [] Observed Temp. °C Corrected Temp. °C

REMARKS: APP 2406163532 Incident: 1055491001 All Results are emailed. Please provide Email address: @ensolum.com, TMorrissey@ensolum.com, KThomason@ensolum.com

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



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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

285

BILL TO

ANALYSIS REQUEST

Company Name: Ensolum, LLC
 Project Manager: Tracy Hillard
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 575 437 3906 Fax #:
 Project #: 03C1558585 Project Owner: XTO
 Project Name: Nash Unit 53 SWP
 Project Location: 32.309233, -103.938884
 Sampler Name: Joshua Boxley

P.O. #:
 Company: XTO Energy Inc
 Attn: Colton Brown
 Address: 3104 E Green St
 City: Carlsbad State: NM Zip: 88220
 Phone #:
 Fax #:
 Matrix: GROUNDWATER, WASTEWATER, SOIL, OIL, SLUDGE, OTHER:
 Preserv: ACID/BASE: ICE / COOL OTHER:
 Sampling: DATE TIME

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
HS0585	FS23	4	C	1							1-27-25	1305	X	X	X
	FS24										1-27-25	1310			
	FS25										1-27-25	1320			
	FS26										1-27-25	1335			
	FS27										1-27-25	1400			
	FS28										1-27-25	1415			
	FS29										1-27-25	1415			
	FS30										1-27-25	1415			
	FS31										1-27-25	1415			
	FS32										1-27-25	1415			

PLEASE NOTE: Liability and damages...
 Relinquished By: [Signature]
 Date: 1/22/25
 Received By: [Signature]
 Date: 1/22/25
 Turnaround Time: Standard
 Incident: APP 2406163532
 Cost Center: 1055491001
 Verbal Result: Yes No Add'l Phone #:
 All Results are emailed. Please provide Email address:
 Hillard @ensolum.com, TMorrissey@ensolum.com, KThomason@ensolum.com
 Bacteria (only) Sample Condition: Intact Cool Yes No Observed Temp. °C
 Corrected Temp. °C



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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

3 of 5

Company Name: Ensolum, LLC

BILL TO

ANALYSIS REQUEST

Project Manager: Tracy Hillard
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 575 437 3906 Fax #:
 Project #: 03C1558505 Project Owner: XTO
 Project Name: Nash Unit 53 SWP
 Project Location: 32.302893, -103.032893
 Sampler Name: Joshua Boxley
 P.O. #:
 Company: XTO Energy Inc
 Attn: Colton Brown
 Address: 3104 E Green St
 City: Carlsbad
 State: NM Zip: 88220
 Phone #:
 Fax #:
 FOR LAB USE ONLY

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						PRESERV	DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :						
H50525	F533	4	C	1								12825	1205	X	X	X
	F534	4	C	1								1210	1210	X	X	X
	F535	4	C	1								1215	1215	X	X	X
	F536	4	C	1								1220	1220	X	X	X
	F537	4	C	1								1225	1225	X	X	X
	F538	4	C	1								1240	1240	X	X	X
	F539	4	C	1								1245	1245	X	X	X
	F540	4	C	1								1250	1250	X	X	X
	F541	4	C	1								1255	1255	X	X	X
	F542	4	C	1								1310	1310	X	X	X

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Relinquished By: [Signature]
 Date: 1-29-25
 Time: 11:23
 Received By: [Signature]
 Date:
 Time:
 Verbal Result: Yes No Add'l Phone #:
 All Results are emailed. Please provide Email address:
 Hillard @ensolum.com, TMorrissey@ensolum.com, KThomason@ensolum.com
 Incident: APP2406163532
 Cost Center: 65249101

Delivered By: (Circle One) UPS Bus Other
 Observed Temp. °C: 1.7
 Corrected Temp. °C: 1.1
 Sample Condition: Cool Intact Yes No
 Checked By: [Signature]
 Turnaround Time: Standard Rush
 Thermometer ID: 24hr High
 Correction Factor: -0.06
 Bacteria (only) Sample Condition: Cool Intact Yes No
 Corrected Temp. °C:
 FORM-006 R.3.2 10/07/21
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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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Company Name: Ensolum, LLC

BILL TO

ANALYSIS REQUEST

4 of 5

Project Manager: Tracy Hillard
 Address: 3122 National Parks Hwy
 City: Carlsbad State: NM Zip: 88220
 Phone #: 575 437 3906 Fax #:
 Project #: 03C1558505 Project Owner: XTO
 Project Name: Nash Unit 53 SWP
 Project Location: 32.309283 -103.930667
 Sampler Name: Joshua Boxley

P.O. #:
 Company: XTO Energy Inc
 Attn: Colton Brown
 Address: 3104 E Green St
 City: Carlsbad
 State: NM Zip: 88220
 Phone #:
 Fax #:

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :					
AS0525	F543	5	C	1	X						1-28-25	1315	X	X	X
	F544											1320			
	F545											1325			
	F546											1330			
	F547											1335			
	F548											1350			
	F549											1355			
	F550											1400			
	F551											1440			
	F552											1445			

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Relinquished By: [Signature] Date: 1-29-25 Received By: [Signature] Date: 1-28-25

Delivered By: (Circle One) Observed Temp. °C: 1.7 Sample Condition: Cool Intact [X] Bacteria (only) Sample Condition: Cool Intact [X]
 Corrected Temp. °C: 1.1 No [X] Yes []

Turnaround Time: Standard [X] Rush []
 Incident: APP2406163532
 Cost Center: 1052491001

Thermometer ID: #148
 Correction Factor: -0.6

FORM-006 R.3.2 10/07/21
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CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

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Company Name: Ensolum, LLC

Project Manager: Tracy Hillard

Address: 3122 National Parks Hwy

City: Carlsbad State: NM Zip: 88220

Phone #: 575 937 3906 Fax #:

Project #: 03C1558505 Project Owner: XTO

Project Name: Wash Unit 53 SWD

Project Location: 32.309283 -103.930661

Sampler Name: Joshua Boxley

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BILL TO

ANALYSIS REQUEST

5 of 5

P.O. #: Company: XTO Energy Inc
Attn: Colton Brown
Address: 3104 E Green St
City: Carlsbad State: NM Zip: 88220
Phone #: Fax #:

Lab I.D.	Sample I.D.	Depth (feet)	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX							DATE	TIME	Chlorides	TPH	BTEX
					GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :	ACID/BASE:					
<u>41</u>	<u>SW05</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1500</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>42</u>	<u>SW06</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1505</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>43</u>	<u>SW07</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1515</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>44</u>	<u>SW08</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1525</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>45</u>	<u>SW09</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1530</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>46</u>	<u>SW10</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1535</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>47</u>	<u>SW11</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1545</u>	<u>X</u>	<u>X</u>	<u>X</u>
<u>48</u>	<u>SW12</u>		<u>C</u>	<u>1</u>								<u>1.2825</u>	<u>1550</u>	<u>X</u>	<u>X</u>	<u>X</u>

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Relinquished By: [Signature]

Date: 1-28-25

Received By: [Signature]

Date: 1-28-25

Time: 1:32

Observed Temp. °C: 1.7

Corrected Temp. °C: 1.1

Sample Condition: Yes

Cool Intact: Yes

Checked By: [Signature]

Turnaround Time: Standard

Thermometer ID: 24140

Correction Factor: 0.02

Bacteria (only) Sample Condition: Intact

Corrected Temp. °C: 1.1

Remarks: WHP 2406163532

Cost Center: 1055491001

Verbal Result: Yes

Add'l Phone #: 503

All Results are emailed. Please provide Email address: THillard@ensolum.com

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 434029

QUESTIONS

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

QUESTIONS

Prerequisites	
Incident ID (n#)	nAPP2430437322
Incident Name	NAPP2430437322 NASH 053 SWD @ 30-015-39400
Incident Type	Produced Water Release
Incident Status	Remediation Closure Report Received
Incident Well	[30-015-39400] NASH UNIT SWD #053

Location of Release Source	
<i>Please answer all the questions in this group.</i>	
Site Name	NASH 053 SWD
Date Release Discovered	10/29/2024
Surface Owner	State

Incident Details	
<i>Please answer all the questions in this group.</i>	
Incident Type	Produced Water Release
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	Not answered.
Produced Water Released (bbls) Details	Cause: Human Error Frac Tank Produced Water Released: 7 BBL Recovered: 5 BBL Lost: 2 BBL.
Is the concentration of chloride in the produced water >10,000 mg/l	Yes
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)	Not answered.

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, Page 2

Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

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	No
Reasons why this would be considered a submission for a notification of a major release	<i>Unavailable.</i>

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	<i>Not answered.</i>

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: Colton Brown Title: Environmental Advisor Email: colton.s.brown@exxonmobil.com Date: 02/20/2025
--	--

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, Page 3

Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

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 26 and 50 (ft.)
What method was used to determine the depth to ground water	NM OSE iWaters Database Search
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 500 and 1000 (ft.)
Any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)	Between ½ and 1 (mi.)
An occupied permanent residence, school, hospital, institution, or church	Greater than 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	Greater than 5 (mi.)
A wetland	Between 1000 (ft.) and ½ (mi.)
A subsurface mine	Between 1 and 5 (mi.)
An (non-karst) unstable area	Zero feet, overlying, or within area
Categorize the risk of this well / site being in a karst geology	High
A 100-year floodplain	Between ½ and 1 (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)	480
TPH (GRO+DRO+MRO) (EPA SW-846 Method 8015M)	0
GRO+DRO (EPA SW-846 Method 8015M)	0
BTEX (EPA SW-846 Method 8021B or 8260B)	0
Benzene (EPA SW-846 Method 8021B or 8260B)	0

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	01/20/2025
On what date will (or did) the final sampling or liner inspection occur	01/28/2025
On what date will (or was) the remediation complete(d)	01/28/2025
What is the estimated surface area (in square feet) that will be reclaimed	10250
What is the estimated volume (in cubic yards) that will be reclaimed	1980
What is the estimated surface area (in square feet) that will be remediated	10250
What is the estimated volume (in cubic yards) that will be remediated	1980

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.

Sante Fe Main Office
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General Information
Phone: (505) 629-6116

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

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

QUESTIONS, Page 4

Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

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	HALFWAY DISPOSAL AND LANDFILL [FEEM0112334510]
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	Not answered.
OR is the off-site disposal site, to be used, an NMED facility	Not answered.
(Ex Situ) Excavation and on-site remediation (i.e. On-Site Land Farms)	Not answered.
(In Situ) Soil Vapor Extraction	Not answered.
(In Situ) Chemical processing (i.e. Soil Shredding, Potassium Permanganate, etc.)	Not answered.
(In Situ) Biological processing (i.e. Microbes / Fertilizer, etc.)	Not answered.
(In Situ) Physical processing (i.e. Soil Washing, Gypsum, Disking, etc.)	Not answered.
Ground Water Abatement pursuant to 19.15.30 NMAC	Not answered.
OTHER (Non-listed remedial process)	Not answered.

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: Colton Brown Title: Environmental Advisor Email: colton.s.brown@exxonmobil.com Date: 02/20/2025
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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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QUESTIONS, Page 5

Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

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	No

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QUESTIONS, Page 6

Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

QUESTIONS

Sampling Event Information	
Last sampling notification (C-141N) recorded	423920
Sampling date pursuant to Subparagraph (a) of Paragraph (1) of Subsection D of 19.15.29.12 NMAC	01/31/2025
What was the (estimated) number of samples that were to be gathered	50
What was the sampling surface area in square feet	10000

Remediation Closure Request

Only answer the questions in this group if seeking remediation closure for this release because all remediation steps have been completed.

Requesting a remediation closure approval with this submission	Yes
Have the lateral and vertical extents of contamination been fully delineated	Yes
Was this release entirely contained within a lined containment area	No
All areas reasonably needed for production or subsequent drilling operations have been stabilized, returned to the sites existing grade, and have a soil cover that prevents ponding of water, minimizing dust and erosion	Yes
What was the total surface area (in square feet) remediated	10250
What was the total volume (cubic yards) remediated	1980
All areas not reasonably needed for production or subsequent drilling operations have been reclaimed to contain a minimum of four feet of non-waste contain earthen material with concentrations less than 600 mg/kg chlorides, 100 mg/kg TPH, 50 mg/kg BTEX, and 10 mg/kg Benzene	Yes
What was the total surface area (in square feet) reclaimed	10250
What was the total volume (in cubic yards) reclaimed	1980
Summarize any additional remediation activities not included by answers (above)	"Delineation and excavation activities were conducted at the Site to address the two releases of pro-duced water. Laboratory analytical results for the confirmation soil samples, collected from the final ex-cavation extent, indicated that all COCs were compliant with the Closure Criteria. Based on the soil sample analytical results, no further remediation was required. XTO will backfill the excavation with material purchased locally and recontour the Site to match pre-existing site conditions. Excavation of impacted soil has mitigated impacts at this Site. XTO believes these remedial actions are protective of human health, the environment, and groundwater. As such, XTO respectfully requests closure for Incident Numbers nAPP2406163532 & nAPP2430437322."

The responsible party must attach information demonstrating they have complied with all applicable closure requirements and any conditions or directives of the OCD. This demonstration should be in the form of a comprehensive report (in .pdf format) including a scaled site map, sampling diagrams, relevant field notes, photographs of any excavation prior to backfilling, laboratory data including chain of custody documents of final sampling, and a narrative of the remedial activities. Refer to 19.15.29.12 NMAC.

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. The responsible party acknowledges they must substantially restore, reclaim, and re-vegetate the impacted surface area to the conditions that existed prior to the release or their final land use in accordance with 19.15.29.13 NMAC including notification to the OCD when reclamation and re-vegetation are complete.

I hereby agree and sign off to the above statement	Name: Colton Brown Title: Environmental Advisor Email: colton.s.brown@exxonmobil.com Date: 02/20/2025
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Action 434029

QUESTIONS (continued)

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
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	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

QUESTIONS

Reclamation Report	
<i>Only answer the questions in this group if all reclamation steps have been completed.</i>	
Requesting a reclamation approval with this submission	No

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CONDITIONS

Action 434029

CONDITIONS

Operator: XTO ENERGY, INC 6401 Holiday Hill Road Midland, TX 79707	OGRID: 5380
	Action Number: 434029
	Action Type: [C-141] Remediation Closure Request C-141 (C-141-v-Closure)

CONDITIONS

Created By	Condition	Condition Date
scott.rodgers	This Remediation Closure Report is approved. Areas reasonably needed for production or subsequent drilling operations will need to be reclaimed and revegetated as soon as they are no longer reasonably needed. A report for reclamation and revegetation will need to be submitted and approved prior to this incident receiving the final status of "Restoration Complete".	3/14/2025