Standard       Energy Minerals and Natural Resources       Reised Color 1, 2000 (2000)         Standard       Energy Minerals and Natural Resources       Reised Color 1, 2000 (2000)         Standard       Energy Minerals and Natural Resources       Standard (2000)         Standard       Color Color 1, 2000 (2000)       Standard (2000)         Standard       Color Color 1, 2000 (2000)       Standard (2000)         Standard       Color Color 1, 2000 (2000)       Standard (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color Color 1, 2000 (2000)         Name of Company       Asket (2000)       Color Color 1, 2000 (2000)       Color Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color Color 1, 2000 (2000)       Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color 1, 2000 (2000)       Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color 1, 2000 (2000)       Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color 1, 2000 (2000)       Color 1, 2000 (2000)         Standard (2000)       Color Color 1, 2000 (2000)       Color 1, 2000 (2000)       Color 1, 2000 (2000)         Type o	District I	State of	New Mexico					
Description       Oil Conservation Division       MAY - 5 2008       Subtract 2008 to burger to burger of the intercent of the intercen	1625 N. French Dr., Hobbs, NM 88240 District II 1201 W. Grand Augurn, Artania, NM 88210			rces		Revi		
Interest Dr.       1220 Stuff NS. Francis Dr.       with Rule 116 on back side of form         Santa Fe, NM 87505       COD-ARTESIA       with Rule 116 on back side of form         Receiver State Fe, NM 87505       COD-ARTESIA       with Rule 116 on back side of form         Receiver State Fe, NM 87505       COD-ARTESIA       with Rule 116 on back side of form         Name of Company       Ashee Fe, NM 87505       Contact       Kelling Conce       Initial Report       Final Report         Address       12703 Loc (16 no Loc (12 no Lo	District III	Oil Conser	vation Division	ΜΔΥ -	5 2008	Submit 2 Co	pies to appropriate	
Release Notification and Corrective Action         OPERATOR       Initial Report       A Final Report         Name of Company       Askers       Contast:       Kelles       Notice Contast:       Kelles       Notice Contast:       Volume Resource!         Notice Contast:       Notice Contast:       Notice Contast:       <	District IV					with	Rule 116 on back	
OPERATOR       Initial Report       Final Report         Name of Company Asher Enter Property       Contact Ketwe Prope       Kether Prope       Contact Ketwe Prope       Kether Prope       Kether Prope       Contact Ketwe Prope       Kether Prope       Kether Prope       Contact Ketwe Prope       Kether Prope       Contact Ketwe Prope       Kether Prope       Contact Ketwe Prope       Kether Prope       Sufface Owner       Lease No. 30 0/5 - 328 33         LOCATION OF RELEASE         Unit Latter Section Township Range Feet from the North/South Line Feet from the East/West Line County         Attitude Longitude         NATURE OF RELEASE         Type of Release       Volume Recovered         Source of Release       Volume Recovered         Unit Latter Longitude         Volume of Release       Volume Recovered         Volume of Release       Volume of Release       Volume of Release         Volume of Release       Volume of Release         Volume of Release <th colsp<="" td=""><td></td><td></td><td></td><td></td><td></td><td></td><td><u></u></td></th>	<td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td><u></u></td>							<u></u>
Name of Company       As by Ender prive 2       Contact       Kelling Name       Kelling Name         Address       12 2001       Lorien (Waw)       Telephone Na.       Kelling Name       Telephone						l Report	<b>M</b> Final Report	
Facility Name       Gat burg Jackson (and totAL) Facility Type       Image of the second of			Contact KPII	velon	25		A	
Surface Owner       Lease No. 30 015 - 228 33         LOCATION OF RELEASE         Unit Letter       Section       Township       Range   Feet from the       North/South Line       Feet from the       East/West Line       County         A       Difference       Nature OF RELEASE       Volume of Release       Volume of Release       Volume of Release         Source of Release       Volume of Release       Volume of Release       Volume of Release         Source of Release       Volume of Release       Volume of Release       Volume of Release         By Whom?       Use and Hour of Discovery       If YES, To Whom?         By was materourse Reached?       Ves       No       Not Required         By Whom?       Date and Hour       If YES, Volume Impacting the Watercourse.       If a Watercourse was Impacted, Describe Fully.*         Describe Cause of Problem and Remedial Action Taken.*       Discribe Area Affected and Champ Action Taken.*       Discribe Area				015 735	5644	·]		
LOCATION OF RELEASE         Unit Letter       Section       Township       Range       Feet from the       North/South Line       Feet from the       East/West Line       County         A       Distribute       Longitude       Image: County       County       County       County         A       Distribute       Longitude       Image: County       North/South Line       Feet from the       East/West Line       County         Value       Interview       Distribute       Distribute       Volume of Release         Source of Release       Oppoint       Ves       No       No Required       If YES, Volume Impacting the Watercourse.         By Whom?       Date and Hour       Date and Hour       Mass and attrocourse Reached?       Yes       No       If YES, Volume Impacting the Watercourse.         If a Watercourse was Impacted, Describe Fully.*       Describe Cause of Problem and Remedial Action Taken*       Discribe Area Affected and Champ Action Taken*       Discrif Source of Problem and Remedial Action Taken*					Lease N	· 20.0	5-108 27	
Unit Letter       Section       Township       Range       Feet from the       East/West Line       County         A       INS       304       Instance       Latitude       Longitude       Instance       County         Image: Instance       Instance       Instance       Instance       Volume of Release       Volume Recovered         Source of Release       Instance       Instance       Volume of Release       Volume Recovered         Source of Release       Instance       Velocity       Date and Hour of Occurrence       Date and Hour of Discovery         Was immediate Notice Grivent       Yes       Yes       Not Required       If YES, To Whom?         Was as Watercourse Reached?       Yes       No       Not Required       If YES, Volume Impacting the Watercourse.         If a Watercourse was Impacted, Describe Fully.*       Describe Cause of Problem and Remedial Action Taken.*       Describe Area Affected and Clemup Action Taken.*       Describe Area Affected and Clemup Action Taken.*         J.P. Jest       J.Y.H.A. A finced Soil 1       A fince J Soil 1       A fince J Soil 1       A fince J Soil 1         J.P. J.P. J.A. A finced and Clemup Action Taken.*       J.S. J.P. A. A finced Soil 1       Soil 4       Soil 4       A soil 4			N OF DELEASE		Eedse IV	0. 000	J 180 J J	
Latitude       Longitude         NATURE OF RELEASE       Volume Recovered         Type of Release       Quote of Release       Volume Recovered         Was Immediate Notice Offense       Date and Hour of Occurrence       Date and Hour of Occurrence         Was Immediate Notice Offense       Yes No       Not Required       Date and Hour of Occurrence         By Whom?       Date and Hour       Date and Hour of Occurrence       Date and Hour of Discovery         Was a Watercourse Reached?       If YES, To Whom?       Date and Hour         If a Watercourse was Impacted, Describe Fully.*       Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.         Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.       If YES, Volume Impacting the Watercourse.         Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.       If YES, Yolume Impacting the Watercourse.         Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.       If YES, Yolume Impacting the Watercourse.         Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.       Joint Discovery.         Describe Cause of Problem and Remedial Action Taken.*       Date and Hour of Discovery.       Joint Discovery.         Describe Cause of Problem and Remedial Action Taken.*       Date and Ho		Feet from the North			West Line	County		
NATURE OF RELEASE         Type of Release       Volume Recovered         Date and Hour of Occurrence       Date and Hour of Discovery       If a Was Immediate Notice Given?         Was Immediate Notice Given?       Yes No       Not Required       If YES, To Whom?         By Whom?       Yes No       Not Required       If YES, To Whom?         Was a Watercourse Reached?       Yes No       If Yes, Volume Impacting the Watercourse.         If a Watercourse was Impacted, Describe Fully.*       Describe Cause of Problem and Remedial Action Taken.*       Jeg Schwich A Content Schwicz, Jost Tormek & Jeg Schwicz, Jeg			Longitude	<u>_</u>				
Type of Release       You Y. N.       You Wold Release       Volume Recovered         Source of Release       You Y. N.       Date and Hour of Occurrence       Date and Hour of Discovery         Was Immediate Notice Given?       Yes       Yes       No       No       Date and Hour of Occurrence       Date and Hour of Discovery         Was Immediate Notice Given?       Yes       Yes       No       No       Date and Hour of Discovery         Was a Watercourse Reached?       Yes       No       If YES, Yourne Impacting the Watercourse.         If a Watercourse was Impacted. Describe Fully.*       Describe Cause of Problem and Remedial Action Taken.*       Jest Stand Cander Stand Cander Stand       Jest Stand Cander Stand         Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand         Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand         Jest Stand Stand       Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand         Jest Stand Stand       Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand         Describe Area Affected and Cleanup Action Taken.*       Jest Stand Cander Stand       Jest Stand Cander Stand       Jest Stand Cander Stand         Jest Stand Stand Stand Stand St								
Was Immediate Notice Given?       □ Yes			Volume of Release					
By Whom?       Date and Hour         Was a Watercourse Reached?       If Yes No         If a Watercourse was Impacted, Describe Fully.*         Describe Cause of Problem and Remedial Action Taken.*       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. S. W. Sharo firm 1 Cerk       Jeg Schen Jed Content for the Action Taken.*         J. J. Sharo fir	Was Immediate Notice Given?	<u></u>		currence	Date and F	four of Disco	very	
Was a Watercourse Reached?       If Yes D No         If a Watercourse was Impacted, Describe Fully.*         Describe Cause of Problem and Remedial Action Taken.*         J; J; S w d w d for a d fore d for a d for a d fore d for a d for a d for a d for a d fore d		Y No 🗌 Not Required	-					
Image: Signature:       Im				acting the Wa	tercourse.			
Describe Cause of Problem and Remedial Action Taken.* J. 15 Wester from the net leak deg & hawled (enternit wested 501) Jess Lyng G 11 Red 501 lead by Candenal Labs. Joil 75 mpt Describe Area Affected and Cleanup Action Taken.* J. 234, 920 pounds 04 contamingted 5011 Was hawled to Lealandfill A final S011 Sample passed RRALs standords Lealandfill A final S011 Sample passed RRALs standords thereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCDAles and bear public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other relevant. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other relevant. Signature: Welly Messed Signature: Welly Messed Printed Name: Kelly & Jone S Title: a gert A E-mail Address: Kelly & Jone S Phone: 405735-5645 Phone: 405735-5645 NLA		No	r					
J. 13       Water of Dew Timin Leak       User State PA (13 Addition NATHE Still         J. 13       Water Additional Sheets If Necessary       State PA (13 Additional Sheets If Necessary	If a Watercourse was Impacted, Describe Fully.	*						
J. 13       Water of Dew Timin Leak       User State PA (13 Addition NATHE Still         J. 13       Water Additional Sheets If Necessary       State PA (13 Additional Sheets If Necessary								
J. 13       Water of Dew Timin Leak       User State PA (13 Addition NATHE Still         J. 13       Water Additional Sheets If Necessary       State PA (13 Additional Sheets If Necessary								
Describe Area Affected and Cleanup Action Taken.* Describe Area Affected and Cleanup Action Taken.* Discribe Area Action Action Action Taken.* Discribe Area Action Actio	Describe Cause of Problem and Remedial Actio	n Taken.*	a 5 handre	A Con	fant.	noted	55:1	
Describe Area Affected and Cleanup Action Taken.* 2,234,920 pounds Of Contaminated SOIL was havited to Lealandfill Afinal SOIL sample passed RRALS standards and permission was given above is true and complete to the best of my knowledge and understand that pursuant to NMOCDalles and bear regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations. Signature: Kellye Jone 3 Title: a gent E-mail Address: Kellye Jone 5 Date: 4-29-08 Phone: 405735-5645 Netach Additional Sheets If Necessary	Jer hand f= 11 fic		v					
Interference       Interference <td< td=""><td>Describe Area Affected and Cleanup Action Tal 2,234,920 pounds</td><td>of contar</td><td>ningled :</td><td>5011 4</td><td>ias I</td><td>hauile</td><td>6 40</td></td<>	Describe Area Affected and Cleanup Action Tal 2,234,920 pounds	of contar	ningled :	5011 4	ias I	hauile	6 40	
Interference       Interference <td< td=""><td>Lealandf:11. Af:</td><td>inal soil s</td><td>ample pass</td><td>sed K</td><td>KHLS</td><td>stan a</td><td>toros to</td></td<>	Lealandf:11. Af:	inal soil s	ample pass	sed K	KHLS	stan a	toros to	
public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.          Signature:       With the state, or local laws and/or regulations.         Signature:       With the state, or local laws and/or regulations.         Printed Name:       Weth the state, or local laws and/or regulations.         Printed Name:       Weth the state, or local laws and/or regulations.         Printed Name:       Weth the state, or local laws and/or regulations.         Approved by District Supervisor:       Image: State, or local laws and/or regulations.         Printed Name:       Weth the state, or local laws and/or regulations.         Approved by District Supervisor:       Image: State, or local laws and/or regulations.         Final Address:       Keth the state, or local laws and/or regulations.         Approval Date:       State, or local laws and/or regulations.         Ital:       Approval Date:       State, or local laws and/or regulations.         E-mail Address:       Keth the state laws and laws and/or regulations.       Conditions of Approval:         Date:       Home:       Home:       Home:	Thereby certify that the information given above	is the and complete to the	ie best of my knowledg	e and anderste	and mut puise		Duries and Duck	
should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations. Signature: Welly Mones Printed Name: Kenye Jone 3 Title: a gent E-mail Address: Kenye Jone 5 Date: 4-29-08 Phone: 405735-5645 Max Additional Sheets If Necessary								
Signature: Willing   Signature: Willing   Printed Name: Kenne   Vertice One   Approved by District Supervisor: Ichane   Ite: a Gent   Approval Date: 5-6-08   E-mail Address: Kenne   Vertice Jone   Phone: 105735-5645   Mattach Additional Sheets If Necessary	should their operations have failed to adequately	investigate and remediate	e contamination that po	se a threat to g	round water,	surface wate	r, human health	
Signature:       Refue Jone 3       Approved by District Supervisor:       Icm h SB         Printed Name:       Refue Jone 3       Approved by District Supervisor:       Icm h SB         Title: $agent$ Approval Date: 5-6-08       Expiration Date: $n/a$ E-mail Address: $Kellye Jone 5$ Conditions of Approval:       Attached $n/a$ Date: $4-29-08$ Phone: $405735-5645$ $n/a$	federal, state, or local laws and/or regulations.				· · · · · · · · · · · · · · · · · · ·			
Printed Name:       Kenve Jone 3       Approved by District Supervisor:       Gum by SB         Title: $agent$ Approval Date: 5-6-08       Expiration Date: $n/a$ E-mail Address:       Kenve Jone 5       Conditions of Approval:       Attached $n/a$ Date: $4-29-08$ Phone: $405735-5645$ $N/a$ Attached Additional Sheets If Necessary $n/a$ $n/a$	(12000)		OIL	CONSERV	ATION I	DIVISION	<u> </u>	
Printed Name:       Prive Sones         Title:       Q Q C M       Approval Date: 5-6-08       Expiration Date: $M/A$ E-mail Address:       Kellye Jones       Conditions of Approval:       Attached       M/A         Date:       Q-08       Phone:       405-735-5645       M/A	Signature: Ally March		A					
E-mail Address: Kellye Jones Conditions of Approval: Date: $4 - 29 - 08$ Phone: $405735 - 5645$ N/A Attached N/A	Printed Name: Kenve Jone	3^			Sum by	SB		
Date: 4-29-08 Phone: 405-735-5645 NLA	Title: a gent		Approval Date: 5-6-	୦୪	Expiration D	ate: MA		
Date: 4-29-08 Phone: 405-735-5645 MLA	E-mail Address: KEILVE Jone	5	Conditions of Approval	:		Attached [	٦.	
Attach Additional Sheets If Necessary	· · · · ·		n la	:		Anacheu [	N/A	
	Attach Additional Sheets If Necessary	¥ - F			·····	2RF	2-137	



MAY - 5 2008 OCD-ARTESIA

đ

12808 Lorien Way • Oklahoma City, Oklahoma 73170 Office (405) 735-5645 • Fax (405) 735-8497

April 28, 2008

Sherry Bonham Oil Conservation Division District II 1301 W Grand Ave Artesia, NM 88210

Sherry

Enclosed you will find the following items:

- 1) Report Summarizing all Actions taken
- 2) Analytical data
- 3) Disposal Receipts
- 4) Final C-141 Report

## SUMMARY REPORT

On Feb 28, 2008 a soil sample was taken and it did not meet RRALS standards. On March 19, 2008 JC Trucking from Loco Hills NM was called to dig and haul contaminated soil to Lea Landfill. See enclosed disposal receipts. BBC International Inc. Worldwide environmental specialists were hired to collect soil samples which were taken to Cardinal Laboratories for analytical analysis. On March 25, 2008 soil sample were taken again and did not meet RRALS standards. JC Trucking once again hauled off contaminated soil to Lea Landfill. The last test taken on 4-10-08 met RRALS standards. Sherry Bonham gave Mark Hope verbal approval to backfill excavated area on 4-11-08. On 4-19-08 excavated area was backfilled.

Kellye Jones Encls.

BBC INTERNATIONAL



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

ANALYTICAL RESULTS FOR BBC INTERNATIONAL, INC. ATTN: CLIFF BRUNSON P.O. BOX 805 HOBBS, NM 66241 FAX TO: (575) 397-0397

Receiving Date: 04/10/08 Reporting Date: 04/10/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM

Analysis Date: 04/10/08 Sampling Date: 04/10/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: KS Analyzed By: KS

	C
LAB NUMBER SAMPLE ID	(mg/kg)
H14623-1 SP1@41/2	576
Quality Control	500
True Value QC	500
% Recovery	100
Relative Percent Difference	< 0.1

METHOD: Standard Methods

4500-CFB

~~

Note: Analysis performed on a 1.4 w:v aqueous extract.

Bust Superto

04/1/08 Date

#### H14623 BBC

PLEASE NOTE: Lisbility and Damages. Cardinal's jiebility and clean's exclusive remady for any claim arbing, whether based in contract or ton. shall be finited to the amount paid by client for analyses. All calma, including those for negligence and any other cause wheteoever shall be dearned waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable agrices. In no event shall Cardinal to lebit for incidental or consequential damages, including, without limitation, business litterruptions, loss of use, or loss of profile incurred by client, its substitutions, afflights or successions atisfing out of or related to the performance of services hateunder by Cardinal, regardless or whether 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 approvel of Cardinal Laboratories.

	DINAL LABOR 101 East Mariand, Ho (505) 393-2326 FAX	bbs, NM 8824	10	211	180	ech 3-7(	WOO	od, FA	Abil X (3	ene 78)(	5, T) 873	K 79603	<u>CHAIN</u>	1-0	<u>F-C</u>	UST	<u>.00</u>	<u>Y A</u>	ND	<u>AN</u>	ALY	<u>(SIS</u>	RE	QUE	ST	
Company Name:		Notion a		02	<u>, , , , , , , , , , , , , , , , , , , </u>			Ť				LLTO		:		-										
Project Manager		SON						-†/	P.O.									-AN	IALY	SIS	REC	UES	T			
Address: 132	4 N. Mar						·		Com	on m	v: 1	0	····	1	1			1			ſ		T		1	
City: Halle	<	State:	Zin:	\$	82	4	0	- 1	Attn:		<u>.</u>	50	~~~~~~~ <u>~~~</u> ~~~~				1			1	- [			1		
	392-6388	Fax #: (3)	19-	Ŧ -	039	12		-+	Addr				$\overline{\mathbf{x}}$	-												
Project #:		Project Owner:	A	Te	-6	Z	sa.	. 1	Oity:				•	1									1	1		
Project Name: G		~ #11							State	:		Zlp:	· · ·	1		ſ				{		1				
Project Location	11 2011	NIM	<i>i</i>						Phor		 :			1		{			1		- [			1	·	
Sampler Name:	pler Name: 104 Orne/25							-	Fax (		·			1								ļ				
Sampier Name: 1974 Orne >>								PRESERV. SAMPL					ING	17	N.	1			1	1						ł
Lab i.D.	Lab I.D. Sample I.D. Burners							SI UDGE	OTHER : ACID/RACC:	ICE / COOL	OTHER:	DATE	TIME	r lala le												
H14623-1	Spla	41/2	4	1	Τ		ğ		Τ	X	T	4-19-08	1:04	X	1-	+	+		+				+		1	
	-/ -			_		Ĺ		-		L					Γ		1	$\uparrow$	+		+	+	+	- <u> </u>	1	]
				_		1		4		-	1		<u> </u>					Τ	1	+	+	+	1	+	ł	-
						1-	┝╌┼	-+		+	+		ļ	ļ	ļ					1		1-	+	<u>}</u>	<u> </u>	1
						+	++	-+		╋	+			<u> </u>	_		<u> </u>	ļ			I	1	1	<del> </del>	<u> </u>	1
} <del>}</del>						+-	$\vdash$	+		+	-	h	<u> </u>	<b> </b>	<b>{</b>		f	f	1			T	t			ł
	·····			-+	+	+	┝╼┾	-	+	╋	+			ŀ			<u> </u>	f		<u> </u>						{
	······································			-+	-+-	+-	++	4		+	$f \rightarrow$			<u> </u>	──	+	<u> </u>	}	<b> </b>	<u> </u>		1				
					+-			-1		+	+-					+					<b> </b>					ļ
PLEASE ROTE: Lober an	6 Deensgen Caldina) a farbilly court chevi 19 Union fur angligence und any other ca	Ca sochades curante for an	y ci si m	adates,	vitetas	buied	in cont	A fair	r lort, alt	al to t	uited i	to the secoust pe	t by no close for	t Via	<b>1</b>		1		I		L					
sendos, la no eveni situli Ca alibeita er successora alian	ndisal be liable for Incidental ar contexp Ig out of ar related to the performance o	Including angene including	viliau Minu,	tirelati (equat	ion, buot Iose of w	1814 Ini (1814 Ini	anuple	na, to	<b>80 CÍ</b> U M	101 101	et of cr	NACES SHOP UP AND DO I	chard de mindefei	. مما	21a											
Relinguistred 8)		Date: 4-10-08	Re	ceiv L	ed By	к 		ł	F		,		Phone Re				No No	Add']	Phone	#:	~~~~		-			•
Liff (	Vreelst	Tima:	] -	B	võ	t	,	Ű	л	le	log	)	REMARKS		- <u></u>			Addi	ax e:							
Relinguished By	/:	Date:	Re	celv	ed By	1:			1				1													
Time:																										
Dellvered By: (Circle One) Eample Condition						CH		ED BY:	1																	
Delivered By: (Circle One) Sampler - UP5 - Bus - Other: No No No								Intert (Inituals) I Yaa KS																		

† Cardinal cannot accept verbal changes. Please fax written changes to 505-383-2478

BBC INTERNATIONAL

.04/11/2008

BBC INTERNATIONAL



04/11/2008 00:44

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

ANALYTICAL RESULTS FOR BBC INTERNATIONAL, INC. ATTN: CLIFF BRUNSON P.O. BOX 805 HOBBS, NM 88241 FAX TO: (575) 397-0397

Receiving Date: 03/25/08 Reporting Date: 03/26/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM

Sampling Date: 03/25/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: ML Analyzed By: BC/HM

LAB NUMBER SAMPLE ID	GRO (C <sub>6</sub> -C <sub>10</sub> ) (mg/kg)	DRO (>C <sub>10</sub> -C <sub>28</sub> ) (mg/kg)	Ci* (mg/kg)
ANALYSIS DATE	03/26/08	03/26/08	03/26/08
H14508-1 SP1@21/2	<10.0	<10.0	2480
H14508-2 SP2@21/2	<10.0	<10.0	560
H14508-3 SP3 @ 2 1/2	<10.0	<10.0	144
H14508-4 SP4 @ 2 1/2	<10.0	<10,0	32
H14508-5 SP5@71/2	<10.0	<10.0	1260
Quality Control	797	735	500
True Value QC	800	800	500
% Recovery	99.6	91.9	100
Relative Percent Difference	4,8	1.3	<0.1

METHODS: TPH GRO & DRO: EPA SW-846 8015 M; CI": Std. Methods 4500-CI"B \*Analyses performed on 1:4 w:v aqueous extracts.

par faloch

3/14/155

H14508A BBC

PLEASE NOTE: Liability and Damages. Cardinal's liability and dicat's exclusive remedy for any daim atleng, whether based in contract or lon, shall be limited to the amount paid by diant for analyses. All dating, including those for negligence and any other cause wheteoever shall be deemed waived unless made in writing and received by Cardinal within thity (30) deve wher completion of the applicable service. In no event shall Cardinal be liable for incubated or consequential demages, including, without limitation, business interruptions, loss of use, or loss of use or the spotte by cardinal within the approval of or related to the performance of services hereunder by Cardinals, without initiation, business interruptions, is not use of the above-stated reasons or otherwise. Results affiliates or successors arising out of or related to the performance of services hereunder by Cardinal performance. Results only to the samples identified above. This report shall not be repreduced except in full with written approval or Cardinal Laborationes.

BBC INTERNATIONAL



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

ANALYTICAL RESULTS FOR BBC INTERNATIONAL, INC. ATTN: CLIFF BRUNSON P.O. BOX 805 HOBBS, NM 88241 FAX TO: (575) 397-0397

Receiving Date: 03/25/08 Reporting Date: 03/26/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM

Sampling Date: 03/25/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: ML Analyzed By: BC

LAB NUMBER	Sample ID	BENZENE (mg/kg)	TOLUENE (mg/kg)	ETHYL BE <b>NZENE</b> (mg/kg)	TOTAL XYLENES (mg/kg)
ANALYSIS DAT	ſE	03/25/08	03/25/08	03/25/08	03/25/08
H14508-1	SP1 @ 2 1/2	< 0.002	< 0.002	<0.002	<0.006
H14508-2	SP2 @ 2 1/2	<0,002	<0.002	<0.002	<0.006
H14508-3	SP3 @ 2 1/2	< 0.002	<0.002	<0.002	<0.006
H14508-4	SP4 @ 2 1/2	<0.002	<0.002	< 0.002	<0.006
H14508-5	SP5@71/2	<0.002	<0.002	<0.002	<0.006
Quality Control		0.094	0.106	0.107	0.308
True Value QC		0.100	0.100	0.100	0,300
% Recovery		93.7	106	107	103
Relative Percer	nt Difference	3.6	3.0	3.3	0.8

METHOD: EPA SW-846 8260

Burjess Ja Cooke

3/2/2/04

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim axiaing, whether based in contract or torl, shall be limited to the amount paid by client for analyses. All claims, including those for negotigence and any other cause wayspewer shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after compation of the explorable service, **in Cardinal's Lability and Electric analyses**, including, without intestion, business interruptions, loss of origon days after compation of the explorable service, **in Cardinal's DataGenesis** be fable for incidentat or consequential damages, including, without intestion, business interruptions, loss of use, or loss of profits forumed by client, its subsidiaries, afflights or successors arising cut of or related to the performance of services hereunder by Cardinal, regardless of whethar such client is based upon any of the above-stated reasons or otherwise. Results relate anly to the settiples itentified above. This report shall not be reproduced except in full with written approval of Cardinal Laboratories.

	Company Nan Project Manag		FAX (506) 393		3/	J 01	3-70		T <sup>AA</sup>	320	BI	LL TO					A	NAL	ISIS	REQI	UEST		
	Address: /3	The Chiff Br	rnson						P.C	), #:				· T				T					
	City: HL	ET W. A	adard						Co	mpa	ny: (	$\rho_{-}$											
	Phone # 505	) 397-638	State:	Zia	: 8	82	£	0	Att	n:		Har	l									}	}
	Project #: 5	+011 000		-139	7.	- 0	<u>39</u>	2	-	dres	<b>6</b> :		$\Delta_{-}$								1		1
	Project Name:	Grayburg V	Project Dwn	81 1		E.	teq.	10.2	1													}	
	Project Locatio	n: Leco H:	ISINM	17_	<b></b>		- <u>`</u>		-	ita:		Zlp:		$\{ \mid $							{		
	Sampler Name:	Vett Or.	10/85							010 x #:	₩:											Į	
	FOR LAS USE ONLY	1	the for the second				MAT	'FIX			SERV	SAMPLI	NG	ί χ									
}				d We		2	Π	Τ		Π	Τ	1			~				{		1		
	Lab I.D.	Sample	.) m	(C)OMP	CONTAINERS	MASTEWATER					1			1	2								
1			ولسادة	K S	<b>TAIL</b>			ц	اترا،	ASK.	يز اق			1.00		4							1
6	Due			Ð	8	GROUNDWATE WASTEWATER	ģ	Of Survey		ACID/BASE	CE / COD	DATE	TIME			し							
μ	414508-1	-Spi Q	21/2	A	1	212	X	214		≤	<u>ұ</u> р	3.25.	91/2	X	×	X			+			+	1-
ŀ	2	-Sp2Q	21/2	G	1		K				X	8-25.05	9:22	<b>İ</b>	X	X							
F	-41	-593	2/2	Å	1		X		Γ		X	8-25-01	19:26	4	X	X							
Ē	-3	10513	2/2	0	:+	4-	K	-	$\perp$		X	8-15-00	9:30	X	X	X							+
-		of	1/2	G	4		X	-	+	-	Kļ_	2.750	12:39	Ye	14	X							
1				1-1	-	+	$\vdash$	+	+		+		<u> </u>		<u> </u>				+				+
+				$\uparrow \uparrow$	+	1-		-	+-1				<u>├</u>	1		+			-+				1
									$\Box$			1											_
PCE	ASE KOTE: Lakey and D	amegas. Cardinal's lability and of tone for negligance and any attack well be fitable for incidential pressor	ant's exclusive remark int						Д												ind.		1
60111	ice. In as oversi blat Canfin Nes of Succession Tribing on	aningues, Candical's Biblity and d home for negligence and sory atour set he fields for incidential at equine ut of a returned to the centum and	cause subamagen also be sported damagen, locisting	deemed a without it	milation	Alfine en 1. built a		niling si miling si	a or on ad iscal	, Kraiby Victory	Cantinei Cantinei	Apple 20 to a local billing and a local billing of the local billing of	it by the class i is completion of	r fui Lite spylice	<b>DH</b>								
Rø	Inquished By:	er de Hacie ar incluentel of equin 10 of ar celuces do the certain and	Date:	anting), n	di che	d By	efur e	ach tials		dupa	n ery pi	ha abore sisted re	esone or other	day,			No	LAJAN	Phone				
1	1ATO.		3-25-08	{	/	77.	/.	1	1	l	1	3:400	Phone R Fax Res	ull:			No		Fax #:	n.			
Re	linguished By:		4:32	<u> </u>	$\underline{\Lambda}$	14	And in	X	e D	U	1 3	125/08	REMARI	(9:									
-			f Date:	Rec	olva	6 By	J						1										

2053970397 88:44 8007./TT /ba Reporting Date: 03/04/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM

Sampling Date: 02/28/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: ML Analyzed By: AB

LAB NUMBER	SAMPLE ID	BENZENE (mg/kg)	TOLUENE (mg/kg)	ETHYL BENZENE (mg/kg)	TOTAL XYLENES (mg/kg)
ANALYSIS DA	TE	02/29/08	02/29/08	02/29/08	02/29/08
H14346-1	SP1 @ 6-8 IN	< 0.020	1.84	5.32	9.48
H14346-2	SP1 @ 14 IN	< 0.002	0.015	0.026	0.407
H14346-3	SP2 @ 6-8 IN	< 0.001	0.014	0.180	0.395
H14346-4	SP2 @ 14 IN	< 0.005	0.077	1.00	2.29
H14346-5	SP3 @ 6-8 IN	< 0.005	0.059	0.425	1.01
H14346-6	SP3 @ 14 IN	<0.001	<0.001	0.001	0.004
Quality Control		0.104	0.099	0.093	0.293
True Value QC	······	0.100	0.100	0.100	0.300
% Recovery		104	99.0	92.5	97.8
<b>Relative Percel</b>	nt Difference	3.0	5.0	5.5	5.3

METHOD: EPA SW-846 8021B

4

\_ \_

leene Chemist

03/04/07 Date

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim ansing, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In 14346BaBBBBChall be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, effluates or successors arising out of or related to the performance of services hareunder 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.



ANALYTICAL RESULTS FOR BBC INTERNATIONAL, INC. ATTN: CLIFF BRUNSON P.O. BOX 805 HOBBS, NM 88241 FAX TO: (575) 397-0397

Receiving Date: 02/29/08 Reporting Date: 03/04/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM Sampling Date: 02/28/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: ML Analyzed By: AB

LAB NUMBER	SAMPLE ID	BENZENE (mg/kg)	TOLUENE (mg/kg)	ETHYL BENZENE (mg/kg)	TOTAL XYLENES (mg/kg)
ANALYSIS DA	TE	03/03/08	03/03/08	03/03/08	03/03/08
H14346-7	SP4 @ 6-8 IN	<0.020	0.218	0.740	2.20
H14346-8	SP4 @ 14 IN	<0.020	0.099	0.021	0.099
H14346-9	SP5 @ 6-8 IN	< 0.001	<0.001	<0.001	< 0.003
H14346-10	SP5 @ 14 IN	<0.001	< 0.001	< 0.001	<0.003
H14346-11	SP6 @ 6-8 IN	< 0.033	0.717	0.387	2.44
H14346-12	SP6 @ 14 IN	0.030	0.320	0.203	3.70
Quality Control		0.100	0.100	0.093	0.298
True Value QC		0.100	0.100	0.100	0.300
% Recovery		99.5	100	92.8	99.3
<b>Relative Percer</b>	nt Difference	3.2	4.0	4.6	4.4

METHOD: EPA SW-846 8021B

<u>03/04/08</u> Date

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remody for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thinty (30) days after completion of the applicable service, in the contract or tort, shall be limited to the performance of 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.



ANALYTICAL RESULTS FOR BBC INTERNATIONAL, INC. ATTN: CLIFF BRUNSON P.O. BOX 805 HOBBS, NM 88241 FAX TO: (575) 397-0397

GRO

Receiving Date: 02/29/08 Reporting Date: 03/04/08 Project Owner: ASHER ENTERPRISES Project Name: GRAYBURG JACKSON #114 Project Location: LOCO HILLS, NM

Sampling Date: 02/28/08 Sample Type: SOIL Sample Condition: COOL & INTACT Sample Received By: ML Analyzed By: CK/AB

-----

DRO

		(C <sub>6</sub> -C <sub>10</sub> )	(>C <sub>10</sub> -C <sub>28</sub> )	CI*
LAB NUMBE	R SAMPLE ID	(mg/kg)	(mg/kg)	(mg/kg)
ANALYSIS D	ATE	02/29/08	02/29/08	02/29/08
H14346-1	SP1 @ 6-8 IN	378	8,780	1,920
H14346-2	SP1 @ 14 IN	170	8,330	608
H14346-3	SP2 @ 6-8 IN	50.2	461	2,500
H14346-4	SP2 @ 14 IN	116	880	2,430
H14346-5	SP3 @ 6-8 IN	39.2	836	592
H14346-6	SP3 @ 14 IN	<10.0	<10.0	432
H14346-7	SP4 @ 6-8 IN	197	10,700	1,260
H14346-8	SP4 @ 14 IN	31.5	1,660	544
H14346-9	SP5 @ 6-8 IN	<10.0	191	624
H14346-10	SP5 @ 14 IN	<10.0	75.1	1,010
H14346-11	SP6 @ 6-8 IN	723	12,100	1,420
H14346-12	SP6 @ 14 IN	1,360	19,600	1,500
Quality Contr	ومناقبته والمراجل والمرجلة والمنبية المرجل المتحد والمستقل والمحالي والمسترك والمحاد المحاد والمحاد والمحاد	458	541	490
True Value Q	C	500	500	500
% Recovery		91.6	108	98
Relative Perc	ent Difference	6.2	4.4	2.1

METHODS: TPH GRO & DRO: EPA SW-846 8015 M; Std. Methods 4500-CFB \*Analyses performed on 1:4 w:v aqueous extracts.

Chemist

### H14346TCL BBC

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the opplicable service. In no event shall Cardinal be liable for incidential or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of 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.

		HAIN-	OF-	CUS	<b>JOT</b>	DY /	AND	ANA	LYSI	<u>s re</u>	QUE	ST	·						
AH	CDINAL LABORATORIES	10 91	44 8	Jaaphuraa	اه ام	hilana TV	70603												
	(505) 393-2326 FAX (505) 393-24																		
Company Name:	المحبب المحد والركب الكرية بالكرية والمتراب المترابل والراكا المترك المحبين والمحب والمحب والمحب والمحب		201		<u> </u>	نواراها وتتقريب فيعاد	LTO					4	NALY	SIS F	FOU	FST			7
Project Manager	- We - we we we we	k_l_			P	0. #:					T	—i	Ţ	<u> </u>		Ť		T	
	Cliff Brunson						0	{											
Address: 3	14 W. MARIDA			Ala		ompany:	12					- {			1			1	1
City: Hobb		Zip: S	52	170		tn:	H			}		1			1				
Phone # 505	) 377-6388 Fax #(55)	39.7	(- C	2397	_	ldress;	- <sub>[</sub> X	<u> </u>		}	•		1		ł				
Project #:	Project Owner	Ashe	4	( terpo)		ty:					-4	- 1		{					
Project Name:	stayburg vactson #1/4		SI	late:	Zip:			1	19	1									
Project Location	" Loco Hills, NM				PI	hone #:					- J	~	·						
Sampler Name:	Vett Omolas				Fa	ax #:					K								1
FOR LAB USE ONLY			-	MATRIX		PRESERV. SAMPL		NG	2		2								
Lab I.D.	Sample I.D.	A KORA OR (C)OMP	GROUNDWATER	WASTEWATER SOIL OIL	SLUDGE	ACID/BASE: ICE / COOL	DATE	ТІМЕ	chloride	8-tex	8015	-							
H14346.7	Sp1 @ 6-8 in			X		X	1.18-08	10:15	X	<	X								
-2	Sol @ Min	61		X		K	2.28.08	10:30	X	Ŷ	$\boldsymbol{\checkmark}$								
-3	507 @ 6-8:2	GI		X		X	2.28-05	10:47	X	X	X								
-4	5p2 @ 14 :-	G		K		X	2.28 00	11:00	X	X	X					T			
-5	303 Q 6-8 in	GI		K		X	7-28-02	11:16	1	4	2								
-10	6030 14 in	C,		4		X	2-26 0	11:30	4	X	X					1	1		
-7	504 @ 6-8 17	6	T	1		X	1.08-00	11:41	X	X	X						+		
-8	SOA @ A in	61		X		X	7-25-57	11:55	×	X	X								
-9	5050 65 :0	L		A		X	2-78-05	11:58	X	X	Z								
-1D	505 @ H :-	6.		N		X	2-28-08	17:18	V	×	X				- <u> </u> -		1		
analyses. All claims include service. In no event shall C	nd Daglagos. Cardina's labelity and Alient's exclusive remedy for a log those for negligence and any other cause wheteoever shall be ardinal be lable for incidental or consequential damages, includin ing out of or related to the performance of services hereunder by to be the services of the services hereunder by to be the services of the services the ser	døerned w g without lin Cardinal, re	eived un nitetion, gardles	iləsə mədə in willin businəsə interrupti	g and re ons, lass	celved by Cardinal s of use, or loss of j	within 30 days after profits incurred by c	r completion of t lient, its subsidia asoas or otherwi	he applicat des, se,			N							
	V: Date:	I Naci	31460			AA	,	Phone Re	ianic:	U Ye	<u>s D</u>	01	Add'l Pl	10ne #:					·

Relinquished By:		Received By:	Phone Result:  Yes No Add'I Phone #:
In D. I.	Time:	1 list Skit	Fax Result: [] Yes [] No  Add'I Fax #:
VAN CONERT	v:LDa	May des mi	email to mike bratcher@ state nm.us
Relinguished By:	Date:	Received By:	enor to three starters eet
	Time:		
Delivered By: (Circle One)	)	Sample Condition   CHECKED BY:	
Sampler UPS - Bus - Other:		Cool intact (ipittais) I Yes Yes JUB No No No	

† Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476

.

.

1072

٠

`

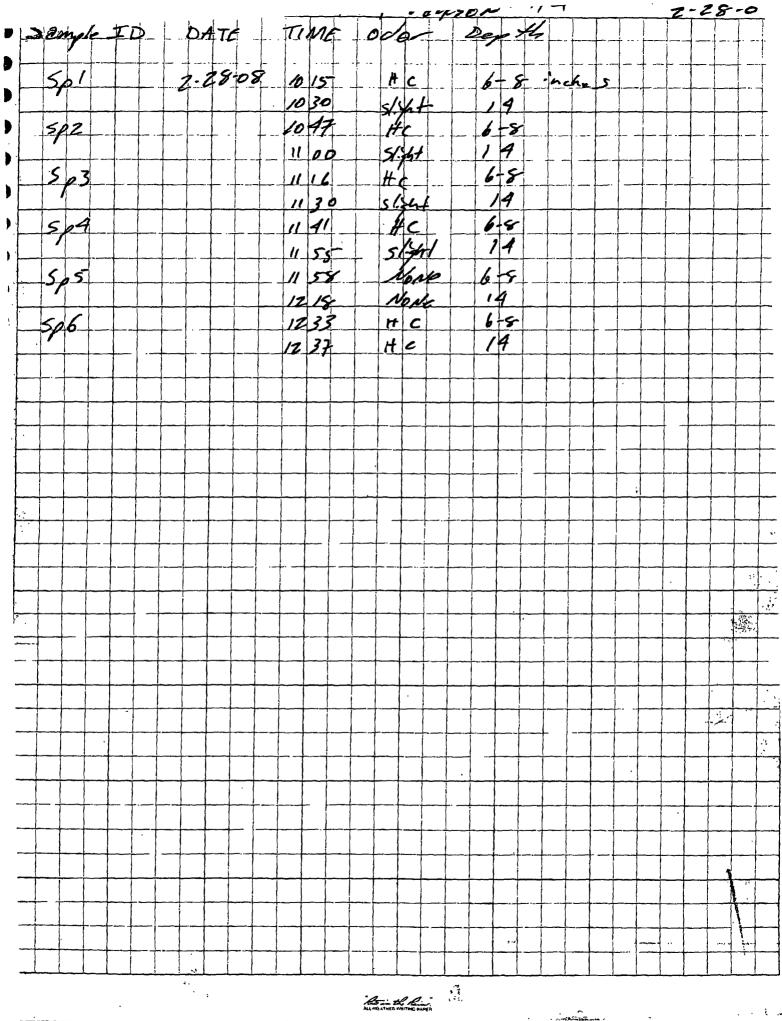
CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

AR	DINAL LABC	RATORIES												<u>u</u>	nain-	<u>Ur-1</u>	100	211		AN		<u>VAI</u>	_10	10	<u>NE</u>		.01	•
	01 East Marland,	Hobbs, NM 882	40																									
Company Name:	(505) 393-2326 F	endtion	_	(32	0/0	13-	100			(32			-	. <b>TO</b>		<del></del>				ΔΝΔ	LYSI	SR		UES	T			1
Project Manager		NTAN NTAN	21						P.(	), #	-				·1				1			<u>T</u>	T	T	-T		T	
Address: 13	24 W. MA	chald							Co	mo	any	1:1		0												1		
City: Labor		State: NM	Zip:	8	80	41	,		Att			1	J	1						}								
Phone #: (505)	392-625 8	Fax # (905)				93	¥		<b>—</b>		38:	:	-	TN]				1	0								-	
Project #:		Project Owner					101.	1505	CI	ty:				1					8									
Project Name:	Frayburg V	adson \$	14	-		7	7		St	ate:			ZI	p:				1	T.								,	
Project Location	Leas Hills	MM	<u> </u>						Pł	ion	e #:								X,									
Sampler Name:	Jatt Oca	elas	_		_				Fa	іх #	_								Š.									
FOR LABUSE ONLY						N	ATR	1X T	T	PF	RES	ERV.	-	SAMPLIN	IG	2			J							1		
~			OR (C)OMP	S	臣	~										건		l						1				
Lab I.D.	Sample		10	NER	WAT	A				۱. ښ	il _					5	X		3	1	1							
Lab I.D.	Jampie		ê	MAN	DND.	N.		E E		/BAS						1	Ś											
			B	<b>1</b> 8	# Containers Groundwater Wastewater Soil Oil Sludge				STUDGE OTHER: OTHER: OTHER:			DATE	TIME															
H14346 - 11	506 @	6-8 13	B	11			X				Ĵ	7	12	-18-5	12:33	X	+		F			1						
-12	5060	4 in	2	ic.			ス	1		L	1	<	1	-28-8	12.57	P	t	17		_								
		•	<b>[</b>		<b> </b>		_		+-	1		_	1_					<b> </b>										
				Ļ				+	4-	-	╞	4	┦╌			<b> </b>		<b> </b>										
			+		┨		-+-	╉	╋	╀	+-		╀															ļ
	· · · · · · · · · · · · · · · · · · ·	·····	-	╆╌	┢		-+-	-{-	+	╋	╋	+-	╀╴					╂──										
			+	1-	┼╌	$\left  - \right $	-+	+	+-	╀	╉	-{	╎╴												******			
			1-	1-	┢	$\left  - \right $	-†	+	$\uparrow$	┢	$\uparrow$	-†	╈			1		<u> </u>										
		-									T		T			1		1	1			+	-					1
enalyses. All claims includ	nd Damages. Caldinal's lisbildy an ing those for negligence and any o	ilher cause whethoover shall be	deem-	iaw be	nu hev	1444 m	ade in v	witing a	Ind co	calvac	1 by C	(andina)	l with	hin 30 days afte	r campiolion of	the applica	ola											
service. In no event shall (	Cardinal be itable for incidental or o ing out of or related to the perform	onsequental damages, includir	ig witho	out limit	tation,	bustine	ra jujo.	ruption	s, 1065	alus	e, or i	loss of (	profit	its incurred by c	tiont, its subsidia	erios,		_										
Relinquished B	۲.) ا	Data - 09-09	R	ece	vec	By:					,				Phone Rest				D No		ri Phor fi Fax i							
VAT CL	h	Time: 3:454	٦	Χ	Л.	nt.	L	Y		ĸ		$\mathcal{A}$	-		REMARK							<u>.</u>						
Relinquished E	ly:	Date:	R	808	Vec	By	4		æ		5				1													
		Time:	-				-																					
Delivered By	: (Circie One)		_ <u>_</u>		$\mathbf{T}$		iple l			nŢ	- 0	HEC	KE	ED BY:	1													
	- Bus - Other:					Cod	ai t	ntaci	ł			(In	ultia A	als)	1													
						Ē	Yes No	Õ.	Na	1		М	1	NU														

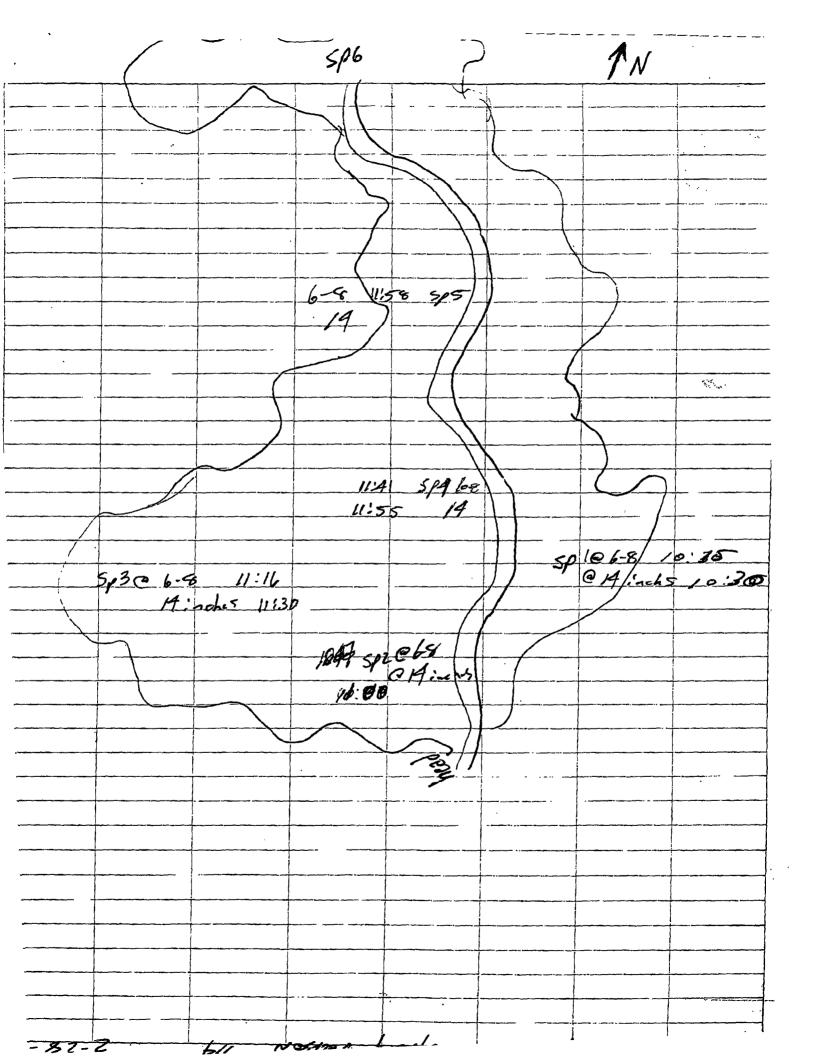
† Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476

.

2-2



Ł



No.       Type       QUANTITY       W/Wol.       WASTE I         N       Septorg Jackson       Well #14       Chance       Lance       Lance<		LEA LAND I MILE MARKER #64 US HWY						CO		
3       COMPANY NAME       4 ADDRESS         G       Asher Entroprises LTD       12808 Lorien Way         12808 Lorien Way       3. 1G. UP DATE         12808 Lorien Way       3. 1G. UP DATE         12808 Lorien Way       1. FICK UP DATE         12808 Lorien Way <td></td> <td>1300 WEST MAIN ST</td> <td></td> <td>. –</td> <td>PHONE</td> <td>(405) 236</td> <td>5-4257</td> <td></td> <td></td>		1300 WEST MAIN ST		. –	PHONE	(405) 236	5-4257			
G       Asher Enterprises LTD       12808 Lorien Way       3.14.05         CTY       STATE       ZUP         6.TNRCC ID. NO       6.TNRCC ID. NO         F       C. Diklahoma       Ok. City       73170         F       C. Diklahoma       Ok. City       73170         F       N. Marke OR DESCRIPTION OF WASTE SHIPPED:       S. CONTAINERS       9. TOTAL       IO. UNIT         N       Marke OR DESCRIPTION OF WASTE SHIPPED:       S. CONTAINERS       9. TOTAL       IO. UNIT       IV. TW. WASTE I         N       Marke OR DESCRIPTION OF WASTE SHIPPED:       S. CONTAINERS       9. TOTAL       IO. UNIT       IV. TW. WASTE I         N       Marke OR DESCRIPTION OF WASTE SHIPPED:       S. CONTAINERS       9. TOTAL       IO. UNIT       IV. TW. WASTE I         N       Marke OR DESCRIPTION OF WASTE SHIPPED:       S. CONTAINERS       9. TOTAL       IO. UNIT       IV. TW. WASTE I         R       Regulated, Non Hazardous Waste       I       DMarket A       IV. WASTE I       IV. WASTE I         R       Regulated, Non Hazardous Waste       IV. SASTE I       SASTE       IV. WASTE I       IV. WASTE I         R       IV. CASE OF ENERGENCY CONTACT       IV. SASTE I       IV. SASTE I       IV. SASTE I       IV. SASTE I <td< td=""><td>NO</td><td>N-HAZARDOUS WASTE MANIF</td><td>EST NO</td><td>049055</td><td>1. PA</td><td>AGE_C</td><td>OF 2. TRAI</td><td>ler no. <b>(</b></td><td>45</td></td<>	NO	N-HAZARDOUS WASTE MANIF	EST NO	049055	1. PA	AGE_C	OF 2. TRAI	ler no. <b>(</b>	45	
E       C       Dilanoma       Ok. City       73170         NAME OR DESCRIPTION OF WASTE SHIPPED:       8. CONTAINES       9. TOTAL       10. UNIT       11. TEX.         N       Mon. Type       QUANTITY       Weil       WasTE 1         R       C.COMMENTS OR SPECIAL INSTRUCTIONS:       Totack 1+13: 520       13. Waste PROFILE NO.         A       Intract plack Scinn Weil       Hill H       14       14         I.COMMENTS OR SPECIAL INSTRUCTIONS:       Totack 1+13: 520       24.HOUR EMERGENCY NO.         SGENERATOR'S CERTIFICATION: I Herby declare that the contents of this consignment are fully and accurately described above by providing applicable aare regulations, and ure transport by highway according to applicable interenation and anational government regulations,	G	Asher Enterprises LTD		√ay		5	5. PICK-UP DATI	-08		
7. NAME OR DESCRIPTION OF WASTE SHIPPED:       8. CONTAINERS 9. TOTAL 10. UNTT 11. TEX. No. Type QUANTITY W/Vol.       10. ENTT 11. TEX. W/Vol.         N Non-Regulated, Non Hazardous Waste       1       CM       1       10. ENTT 11. TEX. W/Vol.         B.       1       CM       1       10. ENTT 11. TEX. W/Vol.       10. ENTT 11. TEX. W/Vol.         B.       1       CM       1       10. ENTT 11. TEX. W/Vol.       10. ENTT 11. TEX. W/Vol.         B.       1       CM       1       10. ENTT 11. TEX. W/Vol.       10. ENTT 11. TEX. W/Vol.         B.       1       CM       1       10. ENTT 11. TEX. W/Vol.       10. ENTT 11. TEX. W/Vol.       10. ENTT 11. TEX. W/Vol.         R       Exeptoring Jackson Well #144 14.       14. Entropy 10. Entropy	F				7317	I.	5. TNRCC I.D. NO	C		
B.       C3       4       4       4       4       4       4       5       5       5       5       5       5       5       5       5       6       5       6       6       7		7. NAME OR DESCRIPTION OF WASTE SHIPPE	ED:						11. TEXAS WASTE ID #	
E       C3       Holder	N۸	on-Regulated, Non Hazardous Waste			1	СМ				
R       Hourdownewski         Brayburg Jackson Well #144       D 48540 48380         12. COMMENTS OR SPECIAL INSTRUCTIONS:       Total 143, 552         13. WASTE PROFILE NO.         A       Inc. : hurg lackson Well #114         14.       IN CASE OF EMERGENCY OR SPILL, CONTACT         TK       IN CASE OF EMERGENCY OR SPILL, CONTACT         14.       IN CASE OF EMERGENCY OR SPILL, CONTACT         15. GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by prosent are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable stare regulations, and are the same materials previously approved by LEA LAND II         R       R         R       If is international and national government regulations, including applicable stare regulations, and are the same materials previously approved by LEA LAND II         R       If is international and national government regulations, including applicable stare regulations, and are the same materials previously approved by LEA LAND II         R       If is international and natio	Е									
R       0.48500 48380         12. COMMENTS OR SPECIAL INSTRUCTIONS:       7442 143;522         13. WASTE PROFILE NO.         A       11. IN CASE OF EMERGENCY OR SPILL, CONTACT         14.       IN CASE OF EMERGENCY OR SPILL, CONTACT         15. GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by prosper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II         R       PRINTED/TYPED NAME         I       16.         T KASSID. NO.       IN CASE OF EMERGENCY CONTACT:         MAME:       MARE:         TEXAS LD. NO.       IN CASE OF EMERGENCY CONTACT:         MAME:       TEXAS LD. NO.         IN CASE OF EMERGENCY CONTACT:       Mark Hope         II: TRANSPORTER (1):       II: TRANSPORTER (2): Acknowledgment of receipt of material         II: RANSPORTER (1):       II: TRANSPORTER (2): Acknowledgment of receipt of material         II: REGENCY PHONE:       II: TRANSPORTER (1): Acknowledgment of receipt of material         II: REGENCY PHONE:       II: TRANSPORTER (2): Acknowledgment of receipt of material         II: REGENCY PHONE:       II: TRANSPORTER (2): Acknowledgment of receipt of material         II: REGENCY PHONE:       II: ADARES:     <		- 4664U	<u>()</u> , , , , , , , , , , , , , , , , , , ,	N - 010		ļ	_	 		
A       Image: Ima	R	1)485	Total IL	6380			13. WASTE F	PROFILE N	0.	
14.       IN CASE OF EMERGENCY OR SPILL, CONTACT         14.       Stagenter         15.GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by prospective in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II         R       PRINTED/TYPED NAME         SIGNATURE       DATE         T       16.         TRANSPORTER (1)       17.         R       NAME:         NAME:       NAME:         TEXAS ID. NO.       TEXAS ID. NO.         N       CASE OF EMERGENCY CONTACT:         Mark Hope       IN CASE OF EMERGENCY CONTACT:         MR       R         R       TEXAS ID. NO.         T       IS TRANSPORTER (1)         IN CASE OF EMERGENCY CONTACT:       Mark Hope         IN CASE OF EMERGENCY CONTACT:       Mark Hope         IN CASE OF EMERGENCY PHONE:       IS TRANSPORTER (1): Acknowledgment of receipt of material         IPRINTED/TYPED NAME       SIGNATURE         IN CASE OF EMERGENCY PHONE:       IS TRANSPORTER (1): Acknowledgment of receipt of material         IPRINTED/TYPED NAME       SIGNATURE         SIGNATURE       SIGNATURE <td>А</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	А									
1 Kn Slaughter       505-887-4048         0       15.GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described above by prospective shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same material previously approved by LEA LAND II international government regulations, including applicable state regulations, and are the same material previously approved by LEA LAND II international decimations in the same material previously approved by LEA LAND II international decimations in the same material previously approved by LEA LAND II international decimatereformer (505)	14. IN CASE OF EMERGENCY OR SPILL, CONTACT									
O       shipping and and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND II         R       PRINTED/TYPED NAME       SIGNATURE       DATE         T       16.       TRANSPORTER (1)       17.       TRANSPORTER (2)         NAME:       MAQTINEZ-       NAME:       NAME:         P       IN CASE OF EMERGENCY CONTACT:       Mark Hope       IN CASE OF EMERGENCY CONTACT:       IN CASE OF EMERGENCY CONTACT:         O       FMERGENCY PHONE:       (505)748-5629       EMERGENCY PHONE:       IS. TRANSPORTER (1): Acknowledgment of receipt of material         P       RINTED/TYPED NAME       J. TRANSPORTER (2): Acknowledgment of receipt of material       IP. TRANSPORTER (2): Acknowledgment of receipt of material         P       R       J. J	ТК	í								
R       16.       TRANSPORTER (1)       17.       TRANSPORTER (2)         N       NAME:       MARETNEZ-       NAME:         N       TEXAS I.D. NO.       TEXAS I.D. NO.       TEXAS I.D. NO.         P       IN CASE OF EMERGENCY CONTACT:       Mark Hope       IN CASE OF EMERGENCY CONTACT:         O       R       (505)748-5629       EMERGENCY PHONE:         I8. TRANSPORTER (1): Acknowledgment of receipt of material       19. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       30.       SIGNATURE       DATE         S       SIGNATURE       ADDRESS:       PHONE:         Lea Land, Inc.       Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM       505-887-4048         PERMIT NO.       20. COMMENTS       20. COMMENTS	0	shipping name and are classified, packed, marked, ar	nd labeled, and are in	all respects in proper c	ondition	for trans	port by highway a	according to	applicable	
R       NAME: MARTINEZ-       NAME:         N       TEXAS LD. NO.       TEXAS LD. NO.         N       TEXAS LD. NO.       Mark Hope         IN CASE OF EMERGENCY CONTACT:       Mark Hope         O       R       (505)748-5629         EMERGENCY PHONE:       (505)748-5629         I8. TRANSPORTER (1): Acknowledgment of receipt of material       19. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       505-887-4048         SIGNATURE       ADDRESS:         Lea Land, Inc.       Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM         PERMIT NO.       20. COMMENTS	R	PRINTED/TYPED NAME	SIGNATURE					DATE		
A     NAME:     MARTINEZ     NAME:       N     TEXAS I.D. NO.     TEXAS I.D. NO.     TEXAS I.D. NO.       S     IN CASE OF EMERGENCY CONTACT:     IN CASE OF EMERGENCY CONTACT:     IN CASE OF EMERGENCY CONTACT:       O     EMERGENCY PHONE:     (505)748-5629     EMERGENCY PHONE:       I8. TRANSPORTER (1): Acknowledgment of receipt of material     I9. TRANSPORTER (2): Acknowledgment of receipt of material       PRINTED/TYPED NAME     349-08     SIGNATURE       S     SIGNATURE     JATE       S     SIGNATURE     DATE       ADDRESS:     PHONE:       Lea Land, Inc.     Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM       J     20. COMMENTS		16. <b>TRANSPORTER (1)</b>		17.	TF	RANSP	ORTER (2)			
S       Initial ID: NO.         S       Initial ID: NO.         Mark Hope       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:         IN CASE OF EMERGENCY PHONE:       IN CASE OF EMERGENCY CONTACT:	A	NAME: MARTINEZ		NAME:						
O       (505)748-5629       EMERGENCY PHONE:         18. TRANSPORTER (1): Acknowledgment of receipt of material       19. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME	S		Mark Hope							
R       18. TRANSPORTER (1): Acknowledgment of receipt of material       19. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       9. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       9. TRANSPORTER (2): Acknowledgment of receipt of material         SIGNATURE       9. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       9. TRANSPORTER (2): Acknowledgment of receipt of material         SIGNATURE       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. TRANSPORTER (2): Acknowledgment of receipt of material         PRINTED/TYPED NAME       0. DATE         SIGNATURE       DATE         DATE       0. DATE         DATE       0. SO Material         SIGNATURE       0. COMMENTS		(505)74	8-5629			Y CONTA	ACT:			
E       PRINTED/TYPED NAME       PRINTED/TYPED NAME         S       SIGNATURE       JATE       PRINTED/TYPED NAME         S       SIGNATURE       JATE       DATE         D F       Lea Land, Inc.       ADDRESS:       PHONE:         J A       SC       PERMIT NO.       20. COMMENTS			f receipt of material			(2): Ack	nowledgment of r	eceipt of m	aterial	
R     Signature     Date     Signature     Date       Signature     Date     Signature     Date       ADDRESS:     ADDRESS:     PHONE:       D F     ADDRESS:     Signature       J F     ADDRESS:     Signature       J F     ADDRESS:     Signature       J ADDRESS:     Signature     Signature       J PERMIT NO.     20. COMMENTS     Signature	Е	PRINTED/TYPED NAME	•	PRINTED/TYPED	NAME					
D FLea Land, Inc.Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM505-887-4048I A20. COMMENTS		SIGNATURE MAN -	5-19-08 DATE	SIGNATURE			D	ATE		
D F     30 Miles East of Carlsbad, NM       I A     20. COMMENTS			ADDRESS:	L			PHONE:			
I A S C PERMIT NO. 20. COMMENTS	חד	Lea Land, Inc.				•	80,	505-88	7-4048	
	ΙA		<u> </u>		rlsbad	, NM			ı	
P I SWM #131401 - New Mexico	ΡΙ		exico	20. COMMENTS						
S I 21 DISPOSAL FACILITY'S CERTIFICATION: I Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.	S I A T	21.DISPOSAL FACILITY'S CERTIFICA facility is authorized and permitted to receive such wa	ATION: I Hereby of astes.	ertify that the above de	escribed	wastes w	ere delivered to the	nis facility, i	that the	
L Y AUTHORIZED SIGNATURE $h + i / h +$	LY	AUTHORIZED SIGNATURE	. h	CELL NO.			т Б С Л С		<sup>в</sup> 15	
GENERATOR: COPIES 1 & 6 DISPOSAL SITE: COPIES 2 & 3 TRANSPORTERS: COPIES 4 &	GENER	TOR: COPIES 1 & 6	DISPOSAL SITE	COPIES 2 & 3		13.1	TRANSPO	DRTERS C	OPIES 4 & 5	

	LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048										
	1300 WEST MAIN S	LEA LA TREET • OKLAHOM	<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE (405) 23	6-4257						
NO	N-HAZARDOUS WASTE MAND	FEST NO	049056	1. PAGE	OF 2. TRAI	LER NO. 05					
G	3. COMPANY NAME Asher Enterprises LTD	4 ADDRESS 12808 Lorien W	/ay		5. PICK-UP DATE	08					
Е <sup>(</sup>	PHONE NO. 405)735-5645	CITY Okl <b>ahoma</b>	STATE Ok. City	ZIP 73170	6. TNRCC I.D. NO	).					
	7. NAME OR DESCRIPTION OF WASTE SHIPP	ED:		8. CONTAINE No.   Type	- 1	10. UNIT 11. TEXAS Wt/Vol. WASTE ID #					
N	Non-Regulated, Non Hazardous Waste	2		1 CM							
Е	b. c.										
R	1 410810 OLU LU	M 044									
	12. COMMENTS OR SPECIAL INSTRUCTIONS Grayburg Jackson Well #114	Total	37.360	ļļ	13. WASTE P	ROFILE NO.					
A	A 14. IN CASE OF EMERGENCY OR SPILL, CONTACT										
тκ		5052987 <u>740</u> 98				EMERGENCY NO.					
0	15.GENERATOR'S CERTIFICATION shipping name and are classified, packed, marked, a international and national government regulations, i	and labeled, and are in	all respects in proper c	condition for trans	sport by highway a	ccording to applicable					
R	PRINTED/TYPED NAME		SIGNATURE	DATE							
Т	16. TRANSPORTER (1)		17.	TRANSF	PORTER (2)						
R A	NAME: GUEZADA		NAME:								
N	TEXAS I.D. NO.	58	TEXAS I.D. NO.								
S P	IN CASE OF EMERGENCY CONTACT:	Mark Hope	IN CASE OF EME	RGENCY CONT	ACT:						
O R	EMERGENCY PHONE:	48-5629	EMERGENCY PHO								
T	18. TRANSPORTER (1): Acknowledgment	of receipt of material	19. TRANSPOF	<b>CTER (2):</b> Ack	nowledgment of r	eceipt of material					
R 🖉	PRINTED/TYPED NAME	1. md2	PRINTED/TYPED	NAME							
s y	SIGNATURE DE MA DE CARAGE	DATE 3-19-6	SIGNATURE	<del></del>	D	ATE					
	T T 1 T	ADDRESS:			PHONE:						
DF	Lea Land, Inc.		Marker 64, U. Iiles East of Ca	•	180,	505-887-4048					
I A S C	PERMIT NO.	<u>50 Iv</u>	20. COMMENTS	1150au, 19191	l						
ΡI	SWM #131401 - New M	Iexico									
OL SI AT	21. DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such w	ATION: I Hereby c	ertify that the above de	escribed wastes w	vere delivered to th	is facility, that the					
LY	AUTHORIZED SIGNATURE	+	CELL NO.	DA	ГЕ	TIME					
	WINTER MILL	lons		3_	19.08	920					
GENER	ATOR: COPIES 1 & 6	DISPOSAL SITE			TRANSPO	ORTERS: COPIES 4 & 5					

•

•

	LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048									
	1300 WEST MAIN S		<b>ND INC.</b> 1A CITY, OK 73106 • 1	PHONE (405) 2	236-4257	,				
NO	N-HAZARDOUS WASTE MANII	FEST NO	049057	1. PAGE_	_OF	2. TRAIL	ER NO.	D5		
G	3. COMPANY NAME Asher Enterprises LTD	4 ADDRESS 12808 Lo	rien Way		5. PIC	K-UP DATE	D8			
Е <sup>(</sup>	PHONE NO. 405)735-5645	CITY Dklahoma	STATE Ok. City	ZIP 73170		RCC I.D. NO				
N	7. NAME OR DESCRIPTION OF WASTE SHIPP Non-Regulated, Non Hazardous Waste			8. CONTAIN No. Ty 1 CM		9. TOTAL UANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #		
	b.						; 			
E	a and a a a a a a a a a a a a a a a a a	x								
R	12. COMMENTS OR SPECIAL INSTRUCTIONS Grayburg Jackson Well #114	9-477 Toter (	<u>20</u> 45,040		13	. WASTE PF	ROFILE N	0.		
А		CE OF EMEDO	VENCY OF COUL		OT					
In CASE OF EMERGENCY OR SPILL, CONTACT       NAME       T No Mercentric Standard       Standard       505-887-4048										
0	15. GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, a international and national government regulations, in	nd labeled, and are in	all respects in proper c	ondition for tra	insport by	y highway ac	cording to	applicable		
R	PRINTED/TYPED NAME		SIGNATURE					DATE		
T	16. TRANSPORTER (1)		17.	TRANS	SPORT	TER (2)				
R A	NAME: J. C. Trucking		NAME:							
N S	TEXAS I.D. NO.	) Mark Hope	TEXAS I.D. NO.							
Р	IN CASE OF EMERGENCY CONTACT:	48-5629	IN CASE OF EMER	RGENCY CON	TACT:					
O R	EMERGENCY PHONE: 18. TRANSPORTER (1): Acknowledgment of		EMERGENCY PHO		alenanda	downerst of an				
T E R	PRINTED/TYPED NAME ENANCES		PRINTED/TYPED							
G	GIGNATURE Inand The	DATE	SIGNATURE			DA	. <u>TE</u>			
		ADDRESS:				PHONE:				
DF	Lea Land, Inc.		Marker 64, U.S	•	· · · ·	5	505-887	7-4048		
I A	PERMIT NO.	<u> </u>	Illes East of Car         20. COMMENTS	risbad, NN	1					
S C P I O L	SWM #131401 - New Mexico									
S I A T	21 <b>DISPOSAL FACILITY'S CERTIFIC</b> facility is authorized and permitted to receive such w	ATION: I Hereby c	ertify that the above de	escribed wastes	were del	livered to thi	s facility, t	hat the		
LY	AUTHORIZED SIGNATURE		CELL NO.	D	ATE	7.08	TIM	Е 45		
GENER	AJOR: COPIES 1 & 6	DISPOSAL SITE			~1	TRANSPO	RTERS: CO	OPIES 4 & 5		

•

.

	)								
	LEA LAND LAND MILE MARKER #64 US HWY 62/180 • 30 MILE				CO				
	LEAL 1300 WEST MAIN STREET • OKLAHO	AND INC. DMA CITY, OK 73106	PHONE (405)	236-4257					
NO	N-HAZARDOUS WASTE MANIFEST NO	049058	1. PAGE_	OF 2. TRA	ILER NO.	75			
G	3. COMPANY NAME Asher Enterprises LTD, 4. ADDRESS 12808 L	orien Way	, <b>, , , , , , , , , , , , , , , , , , </b>	5. PICK-UP DA	re ).()7				
е (•	PHONE NO. CITY 05)735-5645 Oklahoma	STATE Ok. City	ZIP 73170	6. TNRCC I.D. I	10.				
	7. NAME OR DESCRIPTION OF WASTE SHIPPED:		8. CONTAIN No. T	VERS 9. TOTAL ype QUANTITY		11. TEXAS WASTE ID #			
Ν	Non-Regulated, Non Hazardous Waste		п см						
Е									
	50860 11 91110 5 (01 1 00 5 (0								
R	12. COMMENTS OR SPECIAL INSTRUCTIONS: TOTAL prayburg Jackson Well#114	1460		13. WASTE	PROFILE N	0.			
A									
т	14.         IN CASE OF EMER           지슈생Faughter         50명년영왕7-1404 8	ويرد التكريب فالتكريب بالتكريب فالتكريب فالتكريب فالتكريب فالتكريب	L, CONTA		R EMERGE	NCY NO.			
0	15. GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicat international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAN								
R	PRINTED/TYPED NAME	SIGNATURE			·· <u>····</u> ···	DATE			
T	16. TRANSPORTER (1)	17.	TRAN	SPORTER (2)					
R A	NAME: MARTILIEZ	NAME:							
N S	TEXAS I.D. NO. Mark Hope	TEXAS I.D. NO.							
Р	IN CASE OF EMERGENCY CONTACT: (505)748-5829	IN CASE OF EME	RGENCY CO	NTACT:					
O R	EMERGENCY PHONE: 18. <b>TRANSPORTER</b> (1): Acknowledgment of receipt of materia	EMERGENCY PH							
T E		19. <b>TRANSPO</b>	<b>KIEK (2):</b> A	Acknowledgment of	receipt of m	aterial			
R	PRINTED/TYPED NAME	- PRINTED/TYPED	NAME	<u></u>					
S	SIGNATURE DATE	SIGNATURE			DATE				
	ADDRESS:			PHONE					
DF		ile Marker 64, U.	•	· .	505-88	7-4048			
IA	PERMIT NO.	Miles East of Ca	risbau, ini	<u>vi</u>	<u> </u>				
PI	SWM #131401 - New Mexico								
7 <b>1</b>	21. IMSPOSAL FACILITY'S CERTIFICATION: I Hereb facility is authorized and permitted to receive such wastes.	y certify that the above d	escribed waste	s were delivered to	this facility,	that the			
AT LY	AUTHORIZED SIGNATURE	CELL NO.	LL NO. DATE TIME		1E				
	N L I L			3.20.08		<b>J</b> O			
GENER /	ATOK COPIES 1 & 6 DISPOSAL SI	TE: COPIES 2 & 3			OPTERS: C	OPIES 4 & 5			

٠

	LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048										
	1300 WEST MAIN S			<b>ND INC.</b> A CITY, OK 73106 •	PHONE	(405) 236-42	57				
NO	N-HAZARDOUS WASTE MANI	FEST	NO	049059	1. PA	AGEOF_	2. TRAI	LER NO.	99		
G	3 COMPANY NAME Asher Enterprises LTD		ess 2808 L <b>o</b> i	rien Way			CK-UP DATE	<u>·08</u>			
F (	PHONE NO. 405)735-5645	CITY Dklahon	na	STATE Ok. City	7317		NRCC I.D. NO	).			
	7. NAME OR DESCRIPTION OF WASTE SHIPP	'ED:	·		8. CON No.	TAINERS	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #		
Ν	Non-Regulated, Non Hazardous Waste	3			1	CM					
	b.					1					
E	050740			·	1						
R	°41,54(7° 5081	$n^{3}$	250	121		††					
A	12. COMMENTS OR SPECIAL INSTRUCTIONS Grayburg Jackson Well #114	i Q	48,440	<u> </u>		13. WASTE P	ROFILE N	0.			
	14. IN CASE OF EMERGENCY OR SPILL, CONTACT										
Т	NAME Nin Slaughter	505-887-					24-HOUR	EMERGE	NCY NO.		
0	15. GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND INC										
R	PRINTED/TYPED NAME		SIGNATURE					DATE			
Т	16. TRANSPORTER (1)			17.	TI	RANSPOR	<b>TER (2)</b>				
R A	NAME: KIVERA			NAME:							
N S	TEXAS I.D. NO.	Mark Ho	nna	TEXAS I.D. NO.							
P O	IN CASE OF EMERGENCY CONTACT: (505)7	48-5629	obe	IN CASE OF EME		Y CONTACT	2		,		
R T	EMERGENCY PHONE:         (000)           18. TRANSPORTER (1): Acknowledgment (		material	EMERGENCY PHO 19. TRANSPOR		(2): Acknow	ledgment of r	eceipt of m	aterial		
	krinted/typed name <u>Clemente</u> Kignature	_Pil	ena	PRINTED/TYPED	NAME						
S	GIGNATURE Clignente Kine	BATE		SIGNATURE			D.	ATE			
	Lea Land, Inc.	ADDRE:		Marker 64, U.	c um	w 67/190	PHONE:	505-88 <sup>°</sup>	7 4049		
DF	Lea Land, me.			liles East of Ca		-	,	505-88	/-4040		
I A S C P I	PERMIT NO. SWM #131401 - New M	Iexico		20. COMMENTS							
OL SI AT	21.DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such w	21.DISPOSAL FACILITY'S CERTIFICATION: I Hereby facility is authorized and permitted to receive such wastes.			escribed	wastes were o	delivered to th	is facility, 1	that the		
LY	AUTHORIZED SIGNATURE			CELL NO.		DATE 3.	20.08		1E (20		
JENER/	ATOR: COPIES 1 & 6	DISPOS	SAL SITE: COPY	COPIES 2 & 3				DRTERS: C	OPIES 4 & 5		

	LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048									
	1300 WEST MAIN S	LEA LA	<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE	(405) 236-4	257				
NO	N-HAZARDOUS WASTE MANI	FEST NO	049060	1. P/	AGEOF	2. TRAII	LER NO.			
G	3. COMPANY NAME Asher Enterprises LT,D.	4. ADDRESS 12808 Lor	ien Way		5. I		5-08			
Е <sup>(-</sup>	PHONE NO. 405)735-5645	CITY Dklahoma	STATE Ok. City	7317		NRCC I.D. NO	). 			
	7. NAME OR DESCRIPTION OF WASTE SHIPP	ED:		8. CON No.	TAINERS	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #		
Ν	Non-Regulated, Non Hazardous Waste	2		1	СМ					
	b.	<u> </u>	<u></u>		1					
E	049820									
R	046440°478	160349	(8LD)							
A	12. COMMENTS OR SPECIAL INSTRUCTIONS Grayburg Jackson Well #114	Total 1	92,980			13. WASTE P	ROFILE N	0.		
		ASE OF EMERG	ENCY OR SPIL	L, CO	NTACT					
Т	NA Staughter	505-887-4048				24-HOUR	EMERGEI	NCY NO.		
0	15.GENERATOR'S CERTIFICATION shipping name and are classified, packed, marked, a international and national government regulations, i	and labeled, and are in	all respects in proper of	condition	for transport	rt by highway a	ccording to	applicable		
R	PRINTED/TYPED NAME		SIGNATURE			<u></u>		DATE		
T	16. TRANSPORTER (1)		17.		RANSPO	RTER (2)				
R	NAME: Racmer		NAME:			(=)				
A N	TEXAS I.D. NO.		TEXAS I.D. NO.							
S P	IN CASE OF EMERGENCY CONTACT:	Mark Hope	IN CASE OF EME	RGENC	Y CONTAC	T:				
O R	EMERGENCY PHONE:	48-5629	EMERGENCY PH	ONE:	<u></u>					
Т	18. TRANSPORTER (1): Acknowledgment	of receipt of material	19. TRANSPOI	RTER	(2): Acknow	wledgment of r	eceipt of m	aterial		
E R 🤈	PRINTED/TYPED NAME Kaul G	utier/22	PRINTED/TYPED	NAME			·			
S	SIGNATURE Land Gutter	DATE 3-10-18	SIGNATURE		<u> </u>	D.	ATE			
		ADDRESS:			<u> </u>	PHONE:				
DF	Lea Land, Inc.		Marker 64, U.		•	D,	505-887	7-4048		
I A	PERMIT NO.		liles East of Ca 20. COMMENTS	risbac	1, NM					
S C P I O L	SWM #131401 - New M	1	20. COMMENTS							
S I A T	21.DISPOSAL FACILITY'S CERTIFIC facility is authorized and permitted to receive such v		ertify that the above d	escribed	wastes were	e delivered to th	is facility, t	hat the		
LY	AUTAORIZED SIGNATURE		CELL NO.		DATE	10.08	TIM	1E 25		
GENER/	ATOR: COPIES 1 & 6	DISPOSAL SITE: COPY			0		RTERS: C	OPIES 4 & 5		

	LEA LAND I MILE MARKER #64 US HWY						CO		
	1300 WEST MAIN ST		<b>ND INC.</b> IA CITY, OK 73106 • 1	PHONE (4	105) 236-4	257			
NO	N-HAZARDOUS WASTE MANIF	EST NO	049061	1. PAC	GEOF	2. TRAII	LER NO.	Olo	
G	3. COMPANY NAME Asher Enterprises LT.D.	4. ADDRESS 12808 Lo	rien Way		5. F	PICK-UP DATE	).D	8	
Е (4	PHONE NO. 105)735-5645	CITY Dklahoma	STATE Ok. City	2 73170		NRCC I.D. NO	).		
	7. NAME OR DESCRIPTION OF WASTE SHIPPE	ED:		8. CONT No.	TAINERS Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol	11. TEXAS WASTE ID #	
N	Non-Regulated, Non Hazardous Waste			1 6	CM				
Е	b.								
	48300			$\lfloor - \rfloor$					
R	°49220° 4821	220-49.	300						
A	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	Total 19	51020			13. WASTE P	ROFILE N	0.	
1			ENCY OR SPIL	L, CON	ТАСТ			101110	
T Vin Slaughter 505-887-4048 24-HOUR EME									
0	15. GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, an international and national government regulations, in	id labeled, and are in	all respects in proper of	condition for	or transpor	rt by highway a	ccording to	applicable	
R	PRINTED/TYPED NAME		SIGNATURE					DATE	
T	16. <b>TRANSPORTER (1)</b>		17.	TRA	ANSPO	RTER (2)			
A	NAME: MAJERA		NAME:						
N S	TEXAS I.D. NO.	Mark Hope	TEXAS I.D. NO.						
Р	IN CASE OF EMERGENCY CONTACT: (505)74		IN CASE OF EME	RGENCY	CONTAC	T:			
O R	EMERGENCY PHONE: 18. TRANSPORTER (1): Acknowledgment of		EMERGENCY PHO 19. TRANSPOR		). Aaknou	uladament of r	ent of m	atorial	
T E R	PRINTED/TYPED NAME Educed	<u> </u>	PRINTED/TYPED						
sO	SIGNATURE GULLES	DATE	SIGNATURE			D	ATE		
	Loo Lond Inc	ADDRESS:	Mail (A 17)		(0)101	PHONE:	505.00	7 40 40	
DF	Lea Land, Inc.		Marker 64, U. files East of Ca	-		),	505-88	/-4048	
I A S C P I	PERMIT NO. SWM #131401 - New M		20. COMMENTS	·,		_1			
OL SI AT	21 <b>DISPOSAL FACILITY'S CERTIFICA</b> facility is authorized and permittee to receive such wa	ATION: I Hereby custes.	ertify that the above de	escribed w	astes were	delivered to th	is facility, t	hat the	
LY	AUTHORIZED SIGNATURE	1	CELL NO.		DATE		TIM	IE	
	1) antos V Atta	Tans	1		3.0	20.08	8	300	
GENERA	ATOR: COPIES 1 & 6	DISPOSAL SITE	: COPIES 2 & 3			TRANSPO	RTERS: C	OPIES 4 & 5	

•

	LEA LAND J MILE MARKER #64 US HWY						CO	
l	1300 WEST MAIN S		<b>ND INC.</b> A CITY, OK 73106 • F	PHONE (405	) 236-4257	7		
NO	N-HAZARDOUS WASTE MANIF	TEST NO	049062	1. PAGE	OF	2. TRAII	LER NO	3
G	3. COMPANY NAME Asher Enterprises LTD	4. ADDRESS 12808 Lor	ien Way			K-UP DATE	~ /	· · · · · · · · · · · · · · · · · · ·
е <sup>(,</sup>	PHONE NO. 405)735-5645	CITY Oklahoma	STATE Ok. City	ZIF 73170		RCC I.D. NC		,
	7. NAME OR DESCRIPTION OF WASTE SHIPPI	ED:		8. CONTAL No.		9. TOTAL UANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
Ν	Non-Regulated, Non Hazardous Waste	·	······································	1 CN	1			
Е	· · · · · · · · · · · · · · · · · · ·						 	
R	4 LISALTO 47NV	104788	195157					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	Total 1	94:380		13	3. WASTE P	ROFILE N	0.
A	14. IN CA	SE OF EMEDC	ENCY OR SPILI					
Т		505-887-4048		<u>L, CON1</u> 2	<u> 401</u>	24-HOUR	EMERGE	NCY NO.
0 15 GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately de shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway accurately and national government regulations, including applicable state regulations, and are the same materials previously approved to the same material pre								applicable
R	PRINTED/TYPED NAME		SIGNATURE			<u> </u>	<u>,, _, _, _, _, _, _, _, _</u>	DATE
T	16. TRANSPORTER (1)		17.	TRA	NSPORT	TER (2)	<u> </u>	
R A	NAME: JULZada		NAME:					
Ν	TEXAS I.D. NO.		TEXAS I.D. NO.					
S P	IN CASE OF EMERGENCY CONTACT:	Mark Hope	IN CASE OF EMER	RGENCY CO	ONTACT:			
O R	EMERGENCY PHONE:	48-5629	EMERGENCY PHO					
T E \	18. TRANSPORTER (1): Acknowledgment of	receipt of material	19. <b>TRANSPOR</b> PRINTED/TYPED					aterial
R S	GNATURE JAINE JUELANA	DATE 3-20-08	SIGNATURE	<u></u>			ATE	
		ADDRESS:				PHONE:		
DF	Lea Land, Inc.		Marker 64, U.S files East of Car	•			505-88′	7-4048
I A S C	PERMIT NO.		20. COMMENTS			L		
P I O L	SWM #131401 - New M	lexico						
SI AT	21. <b>DISPOSAL FACILITY'S CERTIFIC</b> . facility is authorized and permitted to referve such w	ATION: I Hereby co astes.	ertify that the above de	escribed wast	tes were de	elivered to th	is facılity, 1	that the
LY	AUTHORIZED SIGNATURE		CELL NO.		DATE		TIM	1E
	Ad tos the				3.20	1.08	8	30
GENERA	ATOR: COPPES I & 6	DISPOSAL SITE:				TRANSPO	ORTERS: C	COPIES 4 & 5

,

	LEA LAND I MILE MARKER #64 US HWY							CO		
	1300 WEST MAIN ST		<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE	(405) 23	6-4257	,			
NO	N-HAZARDOUS WASTE MANIF	EST NO	049063	1. P/	AGE	OF	2. TRAII	LER NO.	D5	
G	3. COMPANY NAME Asher Enterprises LTD,	4. ADDRESS 12808 Lo	rien Way			5. PIC		]		
е <sup>(4</sup>	PHONE NO. 105)735-5645	CITY Dklahoma	STATE Ok. City	7317		6. TNF	RCC I.D. NO	).	1	
	7. NAME OR DESCRIPTION OF WASTE SHIPPE	ED:		8. CON No.	NTAINE		9. TOTAL UANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #	
N	Non-Regulated, Non Hazardous Waste			1	CM					
Е	b. 74)])]_01/0			 						
R	°041,4200 500	22004	7780				<u> </u>			
A	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	Total 190	) lele0	4	-L	13	3. WASTE P	ROFILE N	0.	
~	IN CASE OF EMERGENCY OR SPILL, CONTACT       NAME     PHONE NO       Vin Slaughter     505-887-4048									
Т										
0 15 GENERATOR'S CERTIFICATION: 1 Hereby declare that the contents of this consignment are fully and accurately described ab shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA								applicable		
R	PRINTED/TYPED NAME		SIGNATURE						DATE	
T	16. TRANSPORTER (1)		17.	TI	RANSI	PORT	TER (2)			
R A	NAME: Alexada		NAME:							
N S	TEXAS I.D. NO.	F 2 - C - C	TEXAS I.D. NO.							
P	IN CASE OF EMERGENCY CONTACT:	Mark Hope	IN CASE OF EME	RGENC	Y CONT	TACT:				
O R	EMERGENCY PHONE:	18-5629	EMERGENCY PHO							
Т	18. TRANSPORTER (1): Acknowledgment o	f receipt of material	19. TRANSPOF	TER (	( <b>2):</b> Aci	knowle	dgment of re	eceipt of ma	aterial	
E R	RINTED/TYPED NAME JANNE JEE2	1/K	PRINTED/TYPED	NAME						
S	SIGNATURE SWIME GOSCOM	DATE 5-10-09	SIGNATURE				D	ATE		
	Loo Lond Inc	ADDRESS:	Moules CA II	ст <b>т</b>		100	PHONE:	505 005	7 40 49	
DF	Lea Land, Inc.		Marker 64, U.S Iiles East of Ca		•			505-887	/-4048	
I A S C	PERMIT NO.		20. COMMENTS	115040	, 1 1 1 1		L			
PI	SWM #131401 - New M									
A 1	21. <b>DISPOSAD FACILITY'S CERAIFIC</b> facility is authorized and parmitted to receive such w	TION: I Hereby c astes.	ertify that the above de	escribed	wastes v	vere de	livered to th	is facility, t	hat the	
LY	AUTHORIZED SIGNATURE		CELL NO.		DA	TE		TIM		
	With Ma		·		3	·20	D. D8	8	35	
GENER	TOR: COPIES 1 & 6	DISPOSAL SITE	COPIES 2 & 3				TRANSPO	RTERS: C	OPIES 4 & 5	

.

.

	LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048										
	1300 WEST MAIN ST		<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE (405	5) 236-425	7.					
NO	N-HAZARDOUS WASTE MANIH	EST NO	049064	1. PAGE	EOF	2. TRAIL	ER NO.	105			
G	3. COMPANY NAME Asher Enterprises LTD.	4. ADDRESS 12808 Lo	rien Way		5. PIC		.08	, <u>, , , , , , , , , , , , , , , , , , </u>			
	PHONE NO.	CITY	STATE .	ZII	P 6. TN	RCC I.D. NO.					
Е (	405)735-5645	Dklahoma	Ok. City	73170	INTERS	9. TOTAL	10. UNIT	11. TEXAS			
	7. NAME OR DESCRIPTION OF WASTE SHIPPI				Type Q	9. IOTAL QUANTITY	Wt/Vol.	WASTE ID #			
N		· 					, 	ļ			
Е	b.										
	054020										
R	048640°535	D <sup>B</sup> 53(	<u>)40                                    </u>								
	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	Total 2	209,20	C	1:	3. WASTE PI	ROFILE N	Ο.			
A	A II. IN CASE OF EMERGENCY OR SPILL, CONTACT										
т		505-887-4848	ENCY OR SPIL	L, CONT	<u>ACT</u>	24-HOUR	EMERGE	NCY NO.			
0	15. GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, ar international and national government regulations, in	nd labeled, and are in	all respects in proper of	condition for	transport b	oy highway ad	ccording to	applicable			
R	PRINTED/TYPED NAME		SIGNATURE								
T R	16. TRANSPORTER (1) NAME: J.C. TRUCK 1144	1	17.	TRA	NSPOR	FER (2)					
A N	TEXAS I.D. NO.	}	NAME: TEXAS I.D. NO.			`					
S P	IN CASE OF EMERGENCY CONTACT:	Mark Hope	IN CASE OF EME	RGENCY C	ONTACT <sup>,</sup>						
O R	EMERGENCY PHONE:	18-5629	EMERGENCY PH	ONE:							
Т	18. TRANSPORTER (1): Acknowledgment of		19. TRANSPOR	RTER (2):	Acknowle	edgment of re	eceipt of m	aterial			
E R⊮	PRINTED/TYPED NAME EDWARD TH		PRINTED/TYPED	NAME				·			
s j	SIGNATURE That Thym	DATE 3/20/05	SIGNATURE			DA	ATE				
	Lea Land, Inc.	ADDRESS:	Morker 64 II	с ц	57/100	PHONE:	505 00	7 4048			
DF	Lea Lanu, me.		Marker 64, U. Iiles East of Ca	-			505-88′	/- <del>4</del> 040			
I A S C	PERMIT NO.		20. COMMENTS								
P I O L	SWM #/31401 - New M										
A I	21 DISPOSAL FACILITY'S CERTIFIC, faculty is authorized and permitted to receive such w	ATION: I Hereby c astes.	ertify that the above de	escribed was	tes were de	elivered to the	is facılity,	that the			
LY	AUTHORIZED SIGNATURE		CELL NO.		DATE	_	TIM	1E			
	Date Mitte				3.2	10.08	18	:40			
GENERA	ATOR: COPIES 1 & 6	DISPOSAL SITE				TRANSPO	RTERS: C	OPIES 4 & 5			

			ND INC.		E (505) 887-4048	<u></u>	· ·			
на страна 2010 г. – Ст	1300 WEST MAIN S			PHONE (405) 2	36-4257					
ON-HAZARDOUS	WASTE MANII	FEST NO	049065	1. PAGE	_OF 2. TRAI	ILER NO. (	75			
3. COMPANY NAME Asher Enterprises		4. ADDRESS 12808 Lo	rien Way		5. PICK-UP DATI		8			
PHONE NO.		CITY	STATE	ZIP	6. TNRCC I.D. N	0.	0			
2 (405)735-5645		Dklahoma	Ok. City	73170		<b>T</b>				
7. NAME OR DESCRIPT	TION OF WASTE SHIPP	ED:		8. CONTAINE No. Typ		10. UNIT Wt/Vol.	11. TEXAS WASTE ID :			
Non-Regulated, Nor	n Hazardous Waste	2		1 CM						
b.										
E c.				++			<u></u>			
104380	Meltin,			┼╌╌┼╌╌						
12. COMMENTS OR SPI	ECIAL INSTRUCTIONS	TOTAL	- 55174	$\frac{1}{2}$	13. WASTE I	PROFILE NO	 D.			
12. COMMENTS OR SPECIAL INSTRUCTIONS: TOTAL - SSOHO Grayburg Jackson Well #114 A										
14.										
NAME Sin Slaughter				24-HOUR	REMERGEN	ICY NO.				
0 15.GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to appl international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LA										
PRINTED/TYPED NAME	3		SIGNATURE	<del></del>	<u> </u>	I	DATE			
	ANSPORTER (1)		17.	TRANS	PORTER (2)					
NAME YYYOT	tenez		NAME:							
NAME: I'' CO(										
TEXAS I.D. NO.	0	• • • • •	TEXAS I.D. NO.							
TEXAS I.D. NO. IN CASE OF EMERGEN		Mark Hope	IN CASE OF EME	ERGENCY CON	TACT:					
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE:	(505)74	48-5629	IN CASE OF EME	IONE:						
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE: 18. <b>TRANSPORTER</b>	(505)74	48-5629	IN CASE OF EME	IONE:		receipt of ma	terial			
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE: 18. <b>TRANSPORTER</b> PRINTED/TYPED NAMI	(505)74 (1): Acknowledgment of	48-5629	IN CASE OF EME EMERGENCY PH 19. TRANSPO	ONE: RTER (2): Ad						
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE: 18. TRANSPORTER	(505)74 (1): Acknowledgment of	48-5629	IN CASE OF EME EMERGENCY PH 19. TRANSPO	ONE: RTER (2): Ad	cknowledgment of r					
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE: 18. <b>TRANSPORTER</b> PRINTED/TYPED NAMI	(505)74 (1): Acknowledgment of	48-5629 of receipt of material	IN CASE OF EME EMERGENCY PH 19. TRANSPO PRINTED/TYPED	ONE: RTER (2): Ad	cknowledgment of r					
TEXAS I.D. NO. IN CASE OF EMERGEN <u>EMERGENCY PHONE:</u> 18. <b>TRANSPORTER</b> PRINTED/TYPED NAMI SIGNATURE <u>A</u>	(505)74 R (1): Acknowledgment of E	48-5629 of receipt of material 	IN CASE OF EME EMERGENCY PH 19. TRANSPO PRINTED/TYPED	ONE: RTER (2): Ac	cknowledgment of r D PHONE:					
TEXAS I.D. NO. IN CASE OF EMERGEN <u>EMERGENCY PHONE:</u> 18. <b>TRANSPORTER</b> PRINTED/TYPED NAMI SIGNATURE <u>A</u>	(505)74 R (1): Acknowledgment of E	48-5629 of receipt of material -24-42 DATE ADDRESS: Mile	IN CASE OF EME EMERGENCY PH 19. <b>TRANSPO</b> PRINTED/TYPED SIGNATURE	NAME S. Hwy 62/	2knowledgment of r D /180, PHONE:	DATE				
TEXAS I.D. NO. IN CASE OF EMERGEN <u>EMERGENCY PHONE:</u> 18. <b>TRANSPORTER</b> PRINTED/TYPED NAME SIGNATURE <b>A</b> Lea Land F A PERMIT NO. I SWM #	(505)74 R (1): Acknowledgment of E	48-5629 of receipt of material 	IN CASE OF EME EMERGENCY PH 19. TRANSPO PRINTED/TYPED SIGNATURE Marker 64, U.	NAME S. Hwy 62/	2knowledgment of r D /180, PHONE:	DATE				
TEXAS I.D. NO. IN CASE OF EMERGEN <u>EMERGENCY PHONE</u> 18. <b>TRANSPORTER</b> PRINTED/TYPED NAME SIGNATURE <b>A</b> Lea Land F A C PERMIT NO.	(505)74 (1): Acknowledgment of E M I, Inc. H31401 - New M LITY'S CERTIFIC	48-5629 of receipt of material -24-48 DATE ADDRESS: Mile 30 N Iexico	IN CASE OF EME EMERGENCY PH 19. TRANSPO PRINTED/TYPED SIGNATURE Marker 64, U. files East of Ca 20. COMMENTS	NAME S. Hwy 62/	cknowledgment of r D /180, I	DATE 505-887				
TEXAS I.D. NO. IN CASE OF EMERGEN EMERGENCY PHONE: 18. TRANSPORTER PRINTED/TYPED NAMI SIGNATURE PERMIT Lea Land PERMIT NO. 1 SWM # 21 DISPOSAL FACIL	(505)74 (1): Acknowledgment of E M I, Inc. H31401 - New M LITY'S CERTIFIC ermitted to receive such w	48-5629 of receipt of material -24-48 DATE ADDRESS: Mile 30 N Iexico	IN CASE OF EME EMERGENCY PH 19. TRANSPO PRINTED/TYPED SIGNATURE Marker 64, U. files East of Ca 20. COMMENTS	IONE: RTER (2): AG NAME S. Hwy 62/ arlsbad, NM lescribed wastes	cknowledgment of r D /180, I	DATE 505-887	-4048 nat the			

+

· · ·	· <b>LEA LAND LANDFILL NEW MEXICO</b>											
	LEA LAND MILE MARKER #64 US H							CO				
	1300 WEST MAIL			<b>ND INC.</b> IA CITY, OK 73106 • 1	PHONE	(405) 236-4	257					
NO	N-HAZARDOUS WASTE MAN	IFEST	NO	049066	1. PA	GEOF	2. TRAII	ER NO.	99			
G	3. COMPANY NAME Asher Enterprises	4. ADD	RESS 12808 Lo	rien Way		5. F	CK-UP DATE	1.05	7			
	PHONE NO.	CITY		STATE		ZIP 6.7	NRCC I.D. NC	<u>+·('(</u>	<u>ک</u>			
Е (	405)735-5645	Oklah	oma	Ok. City	7317							
	7. NAME OR DESCRIPTION OF WASTE SHI				8 CON No.	TAINERS Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #			
N	Non-Regulated, Non Hazardous Wa	ste			1	СМ						
	b.											
E	с.						,					
R	104581 D9495	40		······								
	12. COMMENTS OR SPECIAL INSTRUCTIO Grayburg Jackson Well #114	NS: TOT	791-0	75400	4	<u></u>	13. WASTE P	ROFILE N	0.			
A	A											
	14.       IN CASE OF EMERGENCY OR SPILL, CONTACT         T       NAME aughter       5091995-2048       24-HOUR EMERGENCY NO.											
0 15.GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described abo shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to an international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA								applicable				
R	PRINTED/TYPED NAME			SIGNATURE					DATE			
T R	16. TRANSPORTER (1) NAME: I Verie	)		17.	TI	RANSPO	RTER (2)					
A N	TEXAS I.D. NO.			NAME:								
S P	IN CASE OF EMERGENCY CONTACT:	Mark	Hope	TEXAS I.D. NO.	PGENC	V CONTAC	·۳۰					
0		)748-562	9	EMERGENCY PH		I CONTAC	1.					
R T	18. TRANSPORTER (1): Acknowledgme	nt of receipt	of material	19. TRANSPOI		(2): Acknow	wledgment of re	ceipt of m	aterial			
E R	RINTED/TYPED NAME		Riven	PRINTED/TYPED	NAME							
S .7	GNATURE Climante R	REATE		SIGNATURE			D	TE				
7		ADDF				<u> </u>	PHONE:					
DF	Lea Land, Inc.			Marker 64, U. Ailes East of Ca		•	D,   :	505-88′	7-4048			
I A S C				20. COMMENTS	115040	, 1 1 1 1	<u></u>					
P I O L	SWM #131401 - New	Mexico	-									
S I A T	21.DISPOSAL FACILITY'S CERTIF facility is authorized and permitted to receive suc	ICATION h wastes.	: I Hereby c	certify that the above d	escribed	wastes were	delivered to th					
LY	AUTHORIZED SIGNATURE	Itan	۵	CELL NO.		DATE	24.08	- X	1E 20			
GENER	ATOR: COPIES 1 & 6	DISP	OSAL SITE	: COPIES 2 & 3			TRANSPO	RTERS: C	OPIES 4 & 5			

4

C	LEA LAND I MILE MARKER #64 US HWY							CO		
	1300 WEST MAIN ST			<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE	(405) 236-4	4257			
NO	N-HAZARDOUS WASTE MANIF	EST	NO	049067	1. P/	AGEOF	2. TRAII	ER NO.	K	
G	3. COMPANY NAME Asher Enterprises	4. ADDRI 12		rien Way		5.	PICK-UP DATE			
	PHONE NO.	CITY	,	STATE		ZIP 6.	TNRCC I.D. NC	68		
Е (	05)735-5645	Dklah <b>o</b> rr	na 📃	Ok. City	7317					
	7. NAME OR DESCRIPTION OF WASTE SHIPPE	D.			8. CON No.	ITAINERS	9. TOTAL QUANTITY	10 UNIT Wt/Vol.	11. TEXAS WASTE ID #	
Ν	Non-Regulated, Non Hazardous Waste				1	СМ				
	b.	· · · · ·	······							
E	c.									
	a OZALION CHINIT	)	- <u></u>			<u> </u>				
R	12. COMMENTS OR SPECIAL INSTRUCTIONS:	TOT	$\overline{\gamma}$	- 83640	<u> </u>	L	13. WASTE P	ROFILE N	0 <i>.</i>	
A	Grayburg Jackson Well #114				, 					
				ENCY OR SPIL	L, CO	NTACT	24-HOUR	EMERGE	NCY NO	
Т	Kin Slaughter :	PHONE 505-887-	-4048				24-11001	EMERGE	Net no.	
0	15.GENERATOR'S CERTIFICATION: I Hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations, and are the same materials previously approved by LEA LAND INC.									
R	PRINTED/TYPED NAME			SIGNATURE					DATE	
T	16. TRANSPORTER (1)			17. <b>TRANSPORTER (2)</b>						
A	NAME: Juezaela			NAME:						
N S	TEXAS I.D. NO.	Mark Ho	ma	TEXAS I.D. NO.						
Р	IN CASE OF EMERGENCY CONTACT: (505)74		νμε	IN CASE OF EMERGENCY CONTACT:						
O R	EMERGENCY PHONE: 18. TRANSPORTER (1): Acknowledgment of	·	material	EMERGENCY PHONE: 19. TRANSPORTER (2): Acknowledgment of receipt of material						
T E N	$\mathcal{A}$									
R S	RINTED/TITED NAME									
.s	SIGNATURE JE GGE MINI	DATE 3	-)4,48	SIGNATURE			D,	ATE		
	Lea Land, Inc.	ADDRES	-	Marker 61 II	្រ ប្រ.	v 69/10	PHONE:	505 <u>8</u> 81	7_4048	
DF				e Marker 64, U.S. Hwy 62/180, 505-887-4048 Miles East of Carlsbad, NM						
I A S C P I	PERMIT NO. SWM #131401 - New Mo	exico		20. COMMENTS		<u></u>		······		
A 1	21 <b>DISPOSAL FACILITY'S CERTIFICATION:</b> I Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.									
LY	AUTRORIZED SIGNATURE	Tilon	រន	CELL NO.		DATE	24.08		E 25	
GENER	ATOR: COPIES 1 & 6	DISPOS	SAL SITE:	COPIES 2 & 3			TRANSPO	RTERS: C	OPIES 4 & 5	

LEA LAND LANDFILL NEW MEXICO MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048									
	1300 WEST MAIN ST		<b>ND INC.</b> A CITY, OK 73106 • 1	PHONE (4	405) 236-42: -	57			
NO	N-HAZARDOUS WASTE MANIF	EST NO	049068	1. PAC	GEOF_	_ 2. TRAIL	ER NO.	105	
G	3 COMPANY NAME Asher Enterprises LTD	4. ADDRESS 12808 Lo			5. PI		4.0	8	
Е	PHONE NO. (405)735-5845	CITY Oklahoma	STATE Ok. City	73170	)	IRČČ I.D. NO			
	7. NAME OR DESCRIPTION OF WASTE SHIPPE			8. CONT No.	TAINERS Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #	
N	ANON-Regulated, Non Hazardous Wast	е .		1 (	СМ				
Е	b.								
	c.								
R	104046004531	0							
A	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	TOTA 1-	- 85820	$\supset$		13. WASTE P	ROFILE N	0.	
		SE OF EMERG	ENCY OR SPIL	L, CON	TACT				
Т	Ringlaughter	505-997-4048				24-HOUR	EMERGE	NCY NO.	
0	15.GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, ar international and national government regulations, in	nd labeled, and are in	all respects in proper of	condition f	for transport	by highway a	ccording to	applicable	
R	PRINTED/TYPED NAME		SIGNATURE			<u> </u>		DATE	
T	16. TRANSPORTER (1)		17. TRANSPORTER (2)						
R A	NAME: Kacmer		NAME:						
N S	TEXAS I.D. NO.	Mark H <b>op</b> e	TEXAS I.D. NO.						
Р	IN CASE OF EMERGENCY CONTACT: (505)74	IN CASE OF EMERGENCY CONTACT:							
O R	EMERGENCY PHONE: 18. TRANSPORTER (1): Acknowledgment o		EMERGENCY PHONE: 19. TRANSPORTER (2): Acknowledgment of receipt of material						
T E	PRINTED/TYPED NAME Kaw 6	Puterte 2	PRINTED/TYPED NAME						
R S	SIGNATURE Vaulbuter	DATE 3/21/2	SIGNATURE				ATE		
	SIGNATURE 2 (110	ADDRESS:	SIGNAI UKE			PHONE:	<u></u>		
_	Lea Land, Inc.		Marker 64, U.	S. Hwy	/ 62/180		505-88	7-4048	
D F I A	l	Miles East of Carlsbad, NM							
S C P I O L	PERMIT NO. SWM #131401 - New M	20. COMMENTS							
S I A T	21 <b>PISPOSAL FACILITY'S CERTIFICATION:</b> I Hereby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.							that the	
LY	AUTHORIZED SIGNATURE	+	CELL NO.		DATE		TIM		
	/ Untol hter	1.01AS			3.2	4.08	18	25	
GENER	ATOR: COPIES 1 & 6	DISPOSAL SITE				TRANSPO	RTERS: C	OPIES 4 & 5	

	ويوجد والمحاور المحاور بالمحاور والمحاور والمحاور والمحاور والمحاور والمحاور والمحاور والمحاور والمحاور والمحاو	يستناسبون والمستاد ومستناسبات			the subscription of the su	· · · ·			
	LEA LAND I MILE MARKER #64 US HWY						O		
	1300 WEST MAIN ST		<b>ND INC.</b> IA CITY, OK 73106 • 1	PHONE (405)	236-4257				
NO	N-HAZARDOUS WASTE MANIF	EST NO	049090	1. PAGE_	OF	2. TRAIL	ER NO.	01	
G	3. COMPANY NAME Asher Enterprises LTD	4. ADDRESS 12808 Lo	rien Way		5. PICK-	UP DATE	28	- <b></b>	
Е	phone no. 405)735-5645	CITY Okl <b>aho</b> ma	STATE Ok. City	ZIP 73170	6. TNRC	C I.D. NO			
	7. NAME OR DESCRIPTION OF WASTE SHIPPE		8. CONTAIN		TOTAL ANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #		
N	Non-Regulated, Non Hazardous Wast	e		T CM					
Е	b. c.								
	1 + OCT VELILL	- @ 120HC	7/)						
R	12. COMMENTS OR SPECIAL INSTRUCTIONS: Grayburg Jackson Well #114	J JA II TOTAI-	13240	<u> </u>	13.	WASTE PF	ROFILE N	0.	
A									
Т		SE OF EMERO 505-897-4048	ENCY OR SPIL	L, CONTA		24-HOUR	EMERGEI	NCY NO.	
1			······································			بويقورية ورستارون			
0	15. GENERATOR'S CERTIFICATION: shipping name and are classified, packed, marked, an international and national government regulations, inc	d labeled, and are in	all respects in proper of	condition for tr	ansport by	highway ac	cording to	applicable	
R	PRINTED/TYPED NAME	· · · · · · · · · · · · · · · · · · ·	SIGNATURE	<u></u>				DATE	
T	16. TRANSPORTER (1)		17.	TRAN	SPORTH	ER (2)			
A	NAME: JC.		NAME:						
N S	TEXAS I.D. NO.	Mark Hope	TEXAS I.D. NO.						
Р О	IN CASE OF EMERGENCY CONTACT: (505)74	,	IN CASE OF EMERGENCY CONTACT:						
R	EMERGENCY PHONE. 18. TRANSPORTER (1): Acknowledgment of		EMERGENCY PHO 19. TRANSPOR		Acknowledg	gment of re	ceipt of ma	aterial	
T E R	PRINTED/TYPED NAME Trace	Milles	PRINTED/TYPED						
s')	SIGNATURE THAIN Min	BATE 72468	SIGNATURE		<u> </u>	DA	TE		
/	Loo Lond Inc	ADDRESS:	Mada (4 17)	C II		PHONE:	05 005	1 40 49	
DF	Lea Land, Inc.		ile Marker 64, U.S. Hwy 62/180, 505-88 Miles East of Carlsbad, NM					/-4048	
IA SC PI	PERMIT NO. SWM #131401 - New Mo		20. COMMENTS						
OL SI	21 DISPOSAL FACILIPY'S CERTIFICATION: 1 Hereby certify that the above described wastes were delivered to this facility, that the								
	addity is authorized and permitted to receive such wa								
	AUTHORIZED SIGNATURE		CELL NO.		оате 3,24	18		E }35	
GENERA	TOR: COPIES 1 & 6	DISPOSAL SITE	: COPIES 2 & 3			IRANSPO	RTERS: C	OPIES 4 & 5	

CO	Pγ	1
~~		

Receive Date	Manifest Number	Lease Name	Weight (lbs.)	Weight (Tons)
3/19/2008	49055	Grayburg Jackson Well # 114	143,580	71.79
3/19/2008	49056	Grayburg Jackson Well # 114	137,360	68.68
3/19/2008	49057	Grayburg Jackson Well # 114	145,040	72.52
3/20/2008	49058	Grayburg Jackson Well # 114	200,120	100.06
3/20/2008	49059	Grayburg Jackson Well # 114	198,440	99.22
3/20/2008	49060	Grayburg Jackson Well # 114	192,980	96.49
3/20/2008	49061	Grayburg Jackson Well # 114	195,020	97.51
3/20/2008	49062	Grayburg Jackson Well # 114	196,380	98.19
3/20/2008	49063	Grayburg Jackson Well # 114	190,660	95.33
3/20/2008	49064	Grayburg Jackson Well # 114	209,200	104.60
3/24/2008	49065	Grayburg Jackson Well # 114	88,040	44.02
3/24/2008	49066	Grayburg Jackson Well # 114	95,400	47.70
3/24/2008	49067	Grayburg Jackson Well # 114	83,640	41.82
3/24/2008	49068	Grayburg Jackson Well # 114	85,820	42.91
3/24/2008	49090	Grayburg Jackson Well # 114	73,240	36.62
		TOTALS:	2,234,920	1,117.46
				_

# Asher Enterprises Weights Statement - Total Received

lbs. Tons

# Lea Land Landfill New Mexico

-----

Mile Market # 64 US Highway 62/180 30 miles East of Carlsbad, NM \* (505) 887-4048