

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

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

RECEIVED

SEP 02 2009

HOBBSOCD

Form C-141
Revised October 10, 2003

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

Release Notification and Corrective Action

OPERATOR

Initial Report Final Report

Name of Company – OXY USA		Contact – Kelton Beard	
Address – P O Box 1988 / 102 South Main St Carlsbad, NM		Telephone No. – 575-887-8337	
Facility Name – State DW #4		Facility Type – Flowline	
Surface Owner – State		Mineral Owner	Lease No. – 30-025-28766

LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County
F	13	18S	33E					Lea

Latitude 32° 45.435' N Longitude 103° 37.208' W

NATURE OF RELEASE

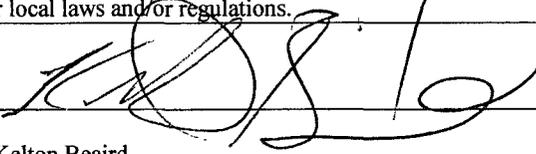
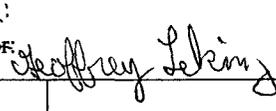
Type of Release – Produced Water/Crude Oil	Volume of Release +50 bbls water / 5 bbls oil	Volume Recovered – 5 bbls
Source of Release – Transfer Line	Date and Hour of Occurrence –	Date and Hour of Discovery 4-13-09 @ 9:00am
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? Larry Johnson – NMOCD	
By Whom? – Kelton Beard – HES Oxy	Date and Hour – see above	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	

Watercourse was Impacted, Describe Fully.*

Describe Cause of Problem and Remedial Action Taken.* Transfer line corroded causing produced water to leak into pasture. A skim of oil mixed with the water was released as well. A vac truck was called to pick up what they could. Chlorides are to be approx. 50,000 ppm in the water. Area affected was at the corrosion point running south 150 yds. The area was delineated vertically and horizontally using a backhoe and air rotary rig. A borehole was drilled at the site and left open for 72 hour and gauged to determine groundwater depth at 83' bgs. The site ranking for the site is as follows: Wellhead Protection Area – 0 points, Surface Body of Water – 0 points and Groundwater – 10 points. The total ranking for the site is 10 points.

Describe Area Affected and Cleanup Action Taken.* As per the approved remediation plan the impacted soil was excavated 4' bgs and hauled to Lea Land Disposal. After the impacted soil was excavated 4' bgs the areas where impacted soil was left below 4' bgs a 1' thick layer of red bed clay was installed, compacted and tested to 95% dry density. After the installation of the red bed clay liner, clean native soil was backfilled into the excavation and contoured to the surrounding area. The site was seeded with BLM Seed Mixture #2.

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

Signature: 		OIL CONSERVATION DIVISION	
Printed Name: Kelton Beard		ENV ENGINEER: Approved by District Supervisor: 	
Title: HES Specialist		Approval Date: 09/29/09	Expiration Date: -
E-mail Address: kelton_beard@oxy.com		Conditions of Approval:	
Date 5-21-09	Phone: 575-887-8337	Attached <input type="checkbox"/> IRP-09:5:2169	

* Attach Additional Sheets If Necessary

Closure Report

Prepared for
Oxy USA

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SEP 02 2009

HOBBSOCD

State DW #4 Flowline Leak Lea County, NM

1RP-09-5-2169

Prepared by

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768
Phone (432) 366-0043 Fax (432) 366-0884

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768
Phone (432) 366-0043 Fax (432) 366-0884

August 18, 2009

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SEP 02 2009

HOBBSOCD

New Mexico Oil Conservation Division
Mr. Geoffrey Leking
1625 N French Drive
Hobbs, New Mexico 88240

Re: Closure Report for Oxy USA – State DW #4 Flowline Leak
UL 'F' Sec. 13 T18S R33E Lea County
1RP-09-5-2169

Mr. Geoffrey Leking,

Elke Environmental was contracted by Oxy USA to complete the remediation of the impacted soil at the State DW #4 Flowline Leak. The leak is located in the legals referenced above, the State DW #4 Well is in the following legals: UL 'F' Sec. 12 T18s R33E. A vertical and horizontal delineation of the site was started with a backhoe and completed using an air rotary rig. A borehole was drilled at the site and left open for 72 hours then gauged to determine the groundwater depth. The ranking criteria for this site is as follows: Surface Body of Water – 0 points; Wellhead Protection Area – 0 points; Groundwater Depth – 10 points (GW = 83'). The total ranking for the site is 10 points. Attached is a plat map, driller's logs, field analytical and lab confirmation for the site.

As per the approved remediation plan the impacted soil was excavated to 4' bgs and hauled to Lea Land Disposal. After the 4' of impacted soil was removed, all areas that impacted soil was left in place below 4' bgs a 1' thick layer of red bed clay was installed, compacted and tested to 95% dry density. After installation of the red bed clay liner, 4' of clean native soil was backfilled and contoured to the surrounding area. The site was re-seeded with BLM Seed Mixture #2. If you have any questions about the enclosed report please contact me at the office.

Sincerely,

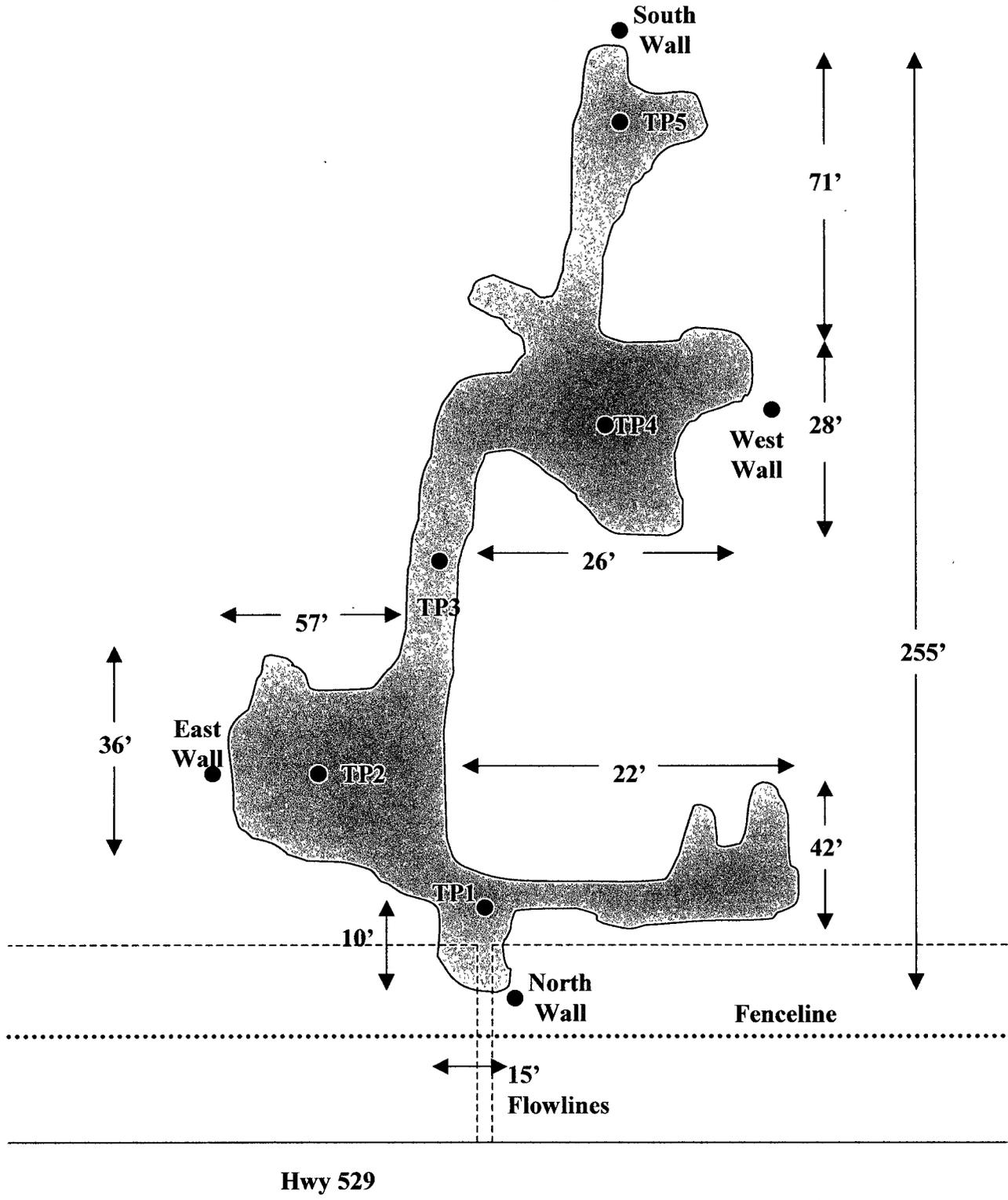


Logan Anderson

Oxy USA
State DW #4 Flowline Leak
Lea County, NM



Plat Map



Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768

Field Analytical Report Form

Client Oxy USA Analyst Bobby Steadham / Jason Jessup

Site State DW #4

Sample ID	Date	Depth	TPH / PPM	Cl / PPM	PID / PPM	GPS
TP1	4-29-09	2'		8,087	123	32° 45.439' N 103° 37.208' W
TP1	4-29-09	4'		9,327	108	32° 45.439' N 103° 37.208' W
TP1	4-29-09	6'		9,538	96.4	32° 45.439' N 103° 37.208' W
TP1	4-29-09	8'		9,627	48.7	32° 45.439' N 103° 37.208' W
TP1	4-29-09	10'		9,866	16.9	32° 45.439' N 103° 37.208' W
TP1	4-29-09	12'		9,327	13.1	32° 45.439' N 103° 37.208' W
TP1	4-29-09	14'	137	9,956	2.9	32° 45.439' N 103° 37.208' W
TP1	5-11-09	20'		4,453		32° 45.439' N 103° 37.208' W
TP1	5-11-09	25'		7,377		32° 45.439' N 103° 37.208' W
TP1	5-11-09	30'		11,514		32° 45.439' N 103° 37.208' W
TP1	5-11-09	35'		9,147		32° 45.439' N 103° 37.208' W
TP1	5-11-09	40'		6,415		32° 45.439' N 103° 37.208' W
TP1	5-11-09	45'		4,733		32° 45.439' N 103° 37.208' W
TP1	5-11-09	50'		1,942		32° 45.439' N 103° 37.208' W
TP1	5-11-09	55'		2,549		32° 45.439' N 103° 37.208' W
TP1	5-11-09	60'		787		32° 45.439' N 103° 37.208' W
TP1	5-11-09	65'		703		32° 45.439' N 103° 37.208' W

Analyst Notes _____

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768

Field Analytical Report Form

Client Oxy USA Analyst Bobby Steadham / Jason Jessup

Site State DW #4

Sample ID	Date	Depth	TPH / PPM	CI / PPM	PID / PPM	GPS
TP1	5-11-09	67'		242	0.0	32° 45.439' N 103° 37.208' W
TP2	4-29-09	2'		6,627	27.4	32° 45.436' N 103° 37.204' W
TP2	4-29-09	4'		12,476	32.3	32° 45.436' N 103° 37.204' W
TP2	4-29-09	6'		10,556	29.1	32° 45.436' N 103° 37.204' W
TP2	4-29-09	8'		11,110	14.8	32° 45.436' N 103° 37.204' W
TP2	4-29-09	10'		9,537	17.3	32° 45.436' N 103° 37.204' W
TP2	4-29-09	12'		8,397	4.7	32° 45.436' N 103° 37.204' W
TP2	4-29-09	14'	192	7,857	1.9	32° 45.436' N 103° 37.204' W
TP2	5-11-09	20'		7,990		32° 45.436' N 103° 37.204' W
TP2	5-11-09	25'		6,944		32° 45.436' N 103° 37.204' W
TP2	5-11-09	30'		16,576		32° 45.436' N 103° 37.204' W
TP2	5-11-09	35'		6,782		32° 45.436' N 103° 37.204' W
TP2	5-11-09	40'		5,825		32° 45.436' N 103° 37.204' W
TP2	5-11-09	45'		6,600		32° 45.436' N 103° 37.204' W
TP2	5-11-09	50'		6,672		32° 45.436' N 103° 37.204' W
TP2	5-11-09	55'		4,512		32° 45.436' N 103° 37.204' W
TP2	5-11-09	60'		4,675		32° 45.436' N 103° 37.204' W

Analyst Notes

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768

Field Analytical Report Form

Client Oxy USA Analyst Bobby Steadham / Jason Jessup

Site State DW #4

Sample ID	Date	Depth	TPH / PPM	CI / PPM	PID / PPM	GPS
TP2	5-11-09	65'		1,400		32° 45.436' N 103° 37.204' W
TP2	5-11-09	70'		566		32° 45.436' N 103° 37.204' W
TP2	5-11-09	72'		238	0.0	32° 45.436' N 103° 37.204' W
TP3	4-29-09	2'		7,647	22.9	32° 45.425' N 103° 37.206' W
TP3	4-29-09	4'		9,806	19.0	32° 45.425' N 103° 37.206' W
TP3	4-29-09	6'		10,586	21.7	32° 45.425' N 103° 37.206' W
TP3	4-29-09	8'		8,697	15.9	32° 45.425' N 103° 37.206' W
TP3	4-29-09	10'		7,527	6.1	32° 45.425' N 103° 37.206' W
TP3	4-29-09	12'		8,097	0.9	32° 45.425' N 103° 37.206' W
TP3	4-29-09	14'	109	7,527	0.0	32° 45.425' N 103° 37.206' W
TP3	5-12-09	20'		8,847		32° 45.425' N 103° 37.206' W
TP3	5-12-09	25'		11,246		32° 45.425' N 103° 37.206' W
TP3	5-12-09	30'		13,837		32° 45.425' N 103° 37.206' W
TP3	5-12-09	35'		8,359		32° 45.425' N 103° 37.206' W
TP3	5-12-09	40'		5,809		32° 45.425' N 103° 37.206' W
TP3	5-12-09	45'		5,642		32° 45.425' N 103° 37.206' W
TP3	5-12-09	50'		6,135		32° 45.425' N 103° 37.206' W

Analyst Notes _____

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768

Field Analytical Report Form

Client Oxy USA Analyst Bobby Steadham / Jason Jessup

Site State DW #4

Sample ID	Date	Depth	TPH / PPM	CI / PPM	PID / PPM	GPS
TP3	5-12-09	55'		4,956		32° 45.425' N 103° 37.206' W
TP3	5-12-09	60'		1,555		32° 45.425' N 103° 37.206' W
TP3	5-12-09	65'		902		32° 45.425' N 103° 37.206' W
TP3	5-12-09	70'		454		32° 45.425' N 103° 37.206' W
TP3	5-12-09	72'		240	0.0	32° 45.425' N 103° 37.206' W
TP4	4-29-09	2'		7,300	18.5	32° 45.420' N 103° 37.214' W
TP4	4-29-09	4'		8,427	21.2	32° 45.420' N 103° 37.214' W
TP4	4-29-09	6'		10,406	37.6	32° 45.420' N 103° 37.214' W
TP4	4-29-09	8'		10,983	18.7	32° 45.420' N 103° 37.214' W
TP4	4-29-09	10'		9,327	19.3	32° 45.420' N 103° 37.214' W
TP4	4-29-09	12'		8,397	21.7	32° 45.420' N 103° 37.214' W
TP4	4-29-09	14'	209	7,677	5.7	32° 45.420' N 103° 37.214' W
TP4	5-12-09	20'		16,465		32° 45.420' N 103° 37.214' W
TP4	5-12-09	25'		20,462		32° 45.420' N 103° 37.214' W
TP4	5-12-09	30'		8,995		32° 45.420' N 103° 37.214' W
TP4	5-12-09	35'		7,499		32° 45.420' N 103° 37.214' W
TP4	5-12-09	40'		6,616		32° 45.420' N 103° 37.214' W

Analyst Notes _____

Elke Environmental, Inc.

P.O. Box 14167 Odessa, TX 79768

Field Analytical Report Form

Client Oxy USA **Analyst** Bobby Steadham / Jason Jessup

Site State DW #4

Sample ID	Date	Depth	TPH / PPM	Cl / PPM	PID / PPM	GPS
TP4	5-12-09	45'		6,295		32° 45.420' N 103° 37.214' W
TP4	5-12-09	50'		9,979		32° 45.420' N 103° 37.214' W
TP4	5-12-09	55'		7,275		32° 45.420' N 103° 37.214' W
TP4	5-12-09	60'		1,336		32° 45.420' N 103° 37.214' W
TP4	5-12-09	65'		601		32° 45.420' N 103° 37.214' W
TP4	5-12-09	70'		623		32° 45.420' N 103° 37.214' W
TP4	5-12-09	72'		240	0.0	32° 45.420' N 103° 37.214' W
TP5	4-29-09	2'		812	5.5	32° 45.414' N 103° 37.220' W
TP5	4-29-09	4'		119	0.3	32° 45.414' N 103° 37.220' W
TP5	4-29-09	6'	26	150	0.0	32° 45.414' N 103° 37.220' W
North Wall	4-30-09	2'	13	169	0.0	32° 45.447' N 103° 37.212' W
South Wall	4-30-09	7'	17	139	0.0	32° 45.408' N 103° 37.224' W
East Wall	4-30-09	7'	9	149	0.0	32° 45.431' N 103° 37.196' W
West Wall	4-30-09	7'	28	149	0.0	32° 45.424' N 103° 37.218' W

Analyst Notes _____



*Corrected Copy 8/18/09
LABORATORY TEST REPORT
PETTIGREW & ASSOCIATES, P.A.
1110 N. GRIMES
HOBBS, NM 88240
(575) 393-9827



DEBRA P. HICKS, P.E./L.S.I.
WILLIAM M. HICKS, III, P.E./P.S.

To: Elke Environmental
Logan Anderson
P.O. Box 14167
Odessa, TX 79768

Material: Red Bird Clay

Project: *Oxy State DW4 Spill
Project No. 2009.1200

Test Method: ASTM: D 2922

Date of Test: August 4, 2009

Depth: See Below

Depth of Probe: 6"

*Test No.	Location	Dry Density		Depth
		% Max	% Moisture	
SG 1	Oil Spill Pad #1 - 10' E. & 5' S. of NW Corner	97.6	19.5	FG
SG 2	Oil Spill Pad #2 - 20' E. & 10' S. of NW Corner	95.6	19.3	FG

Control Density: 105.1
ASTM: D 698

Optimum Moisture: 17.7%

Required Compaction: 95%

Densometer ID: 5071

PETTIGREW & ASSOCIATES

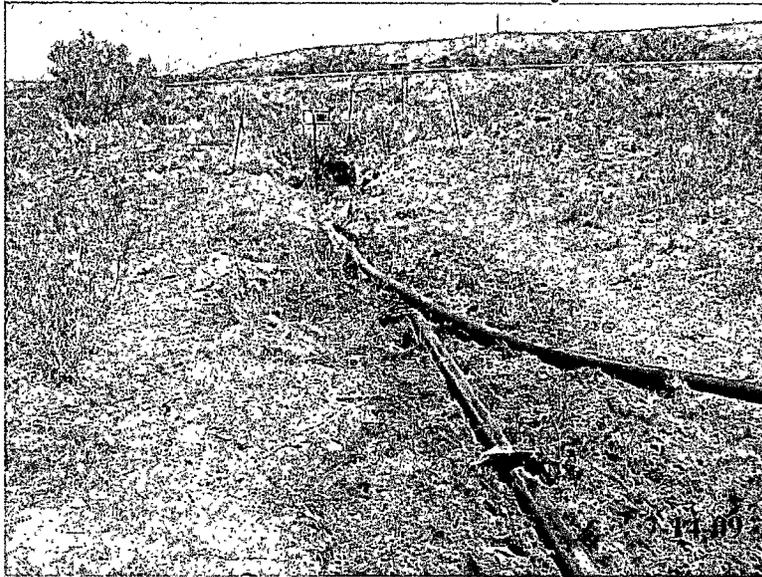
Lab No.: 09 4601-4603

Copies To: Elke Environmental

BY: Erica m Hart

BY: _____ P.E.

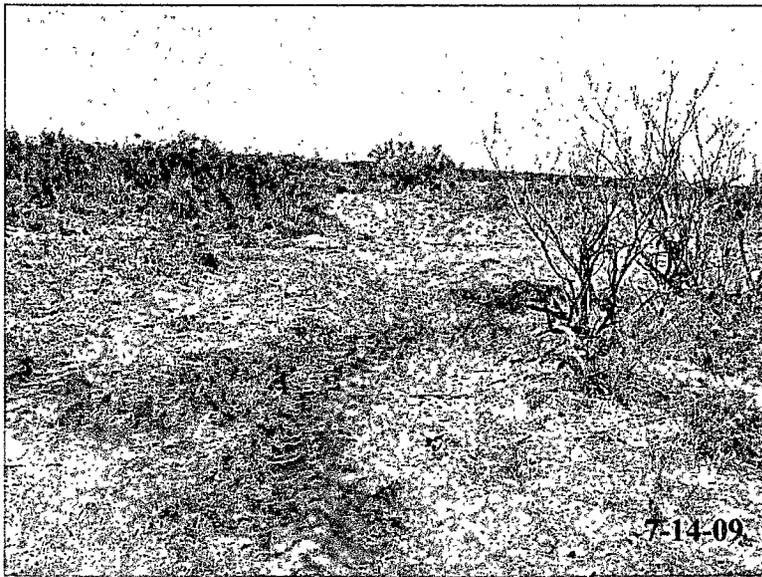
Oxy USA – State DW #4 Flowline Leak



TP1 before excavation of impacted soil.



TP2 before excavation of impacted soil.



TP3 before excavation of impacted soil.



TP4 and TP5 before excavation of impacted soil.

Oxy USA – State DW #4 Flowline Leak



Excavating impacted soil at TP1.



Watering the red bed clay liner for moisture.



Compacting the red bed clay liner.

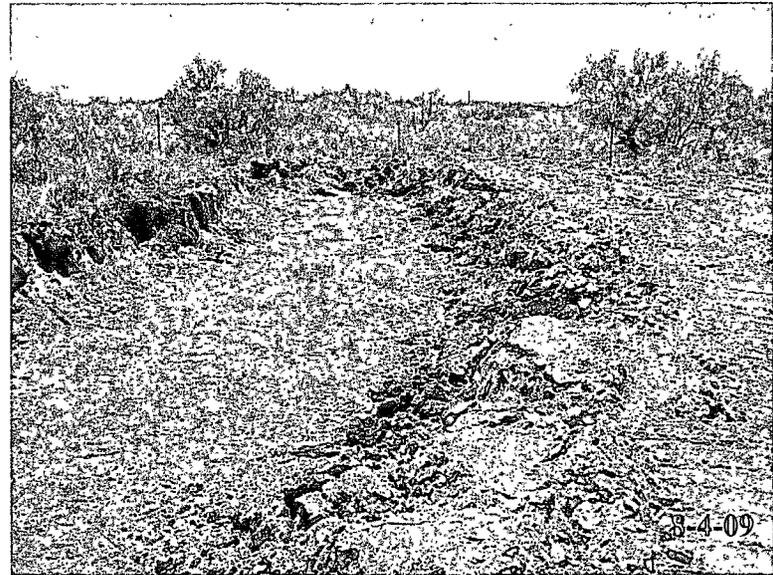


Red bed clay liner after installation at TP1.

Oxy USA – State DW #4 Flowline Leak



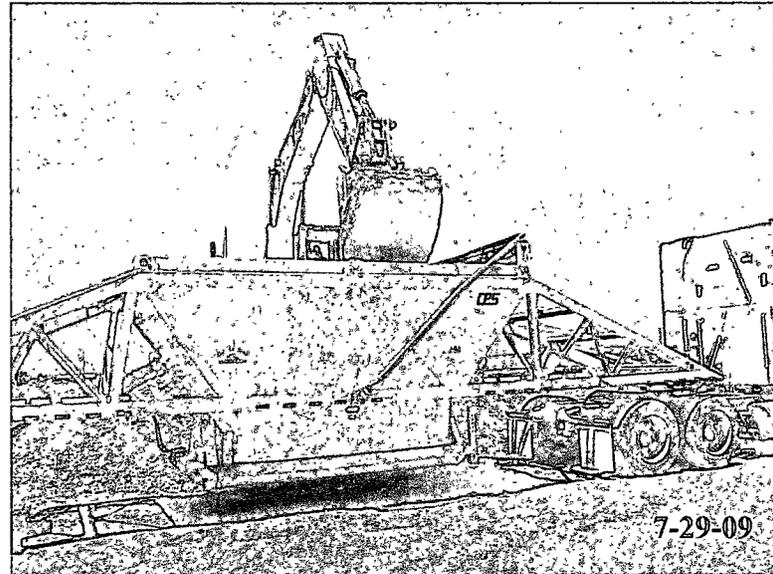
Red bed clay liner after installation at TP4.



Red bed clay liner after installation West of TP1.

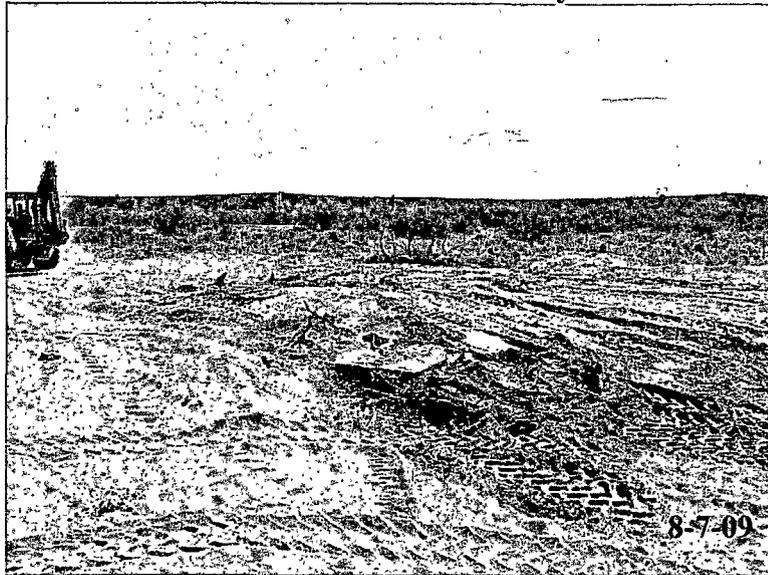


Red bed clay liner after installation at TP2 and TP3.

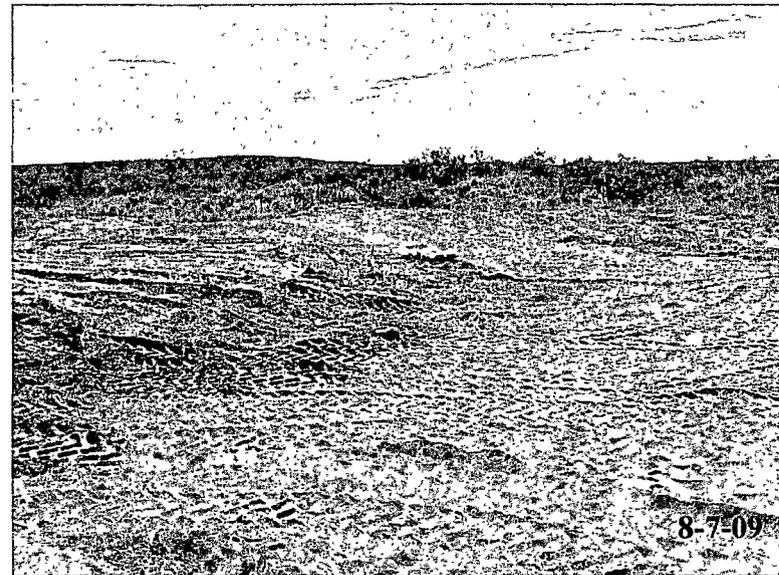


Loading impacted soil onto truck for disposal.

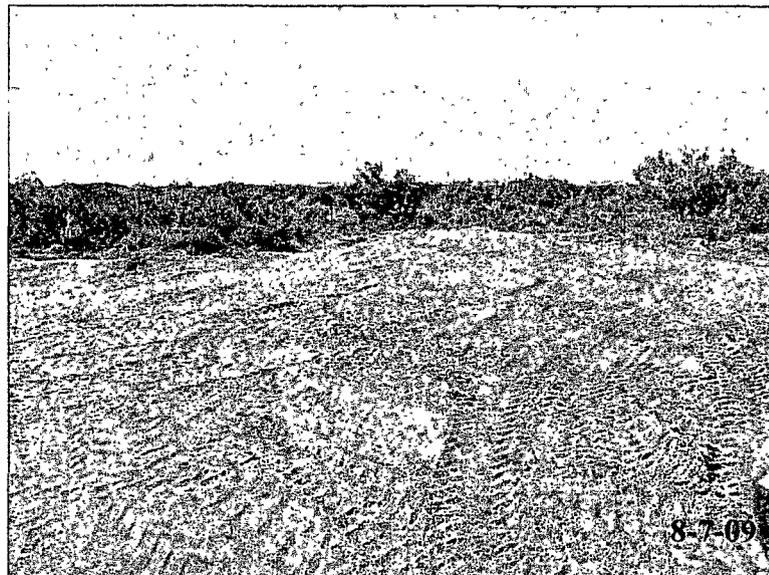
Oxy USA – State DW #4 Flowline Leak



TP4 after backfill of clean native soil.



TP5 after backfill of clean native soil.



TP1 and TP2 after backfill of clean native soil.



Broadcasting BLM Seed Mixture #2 over the disturbed areas.

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

B. Franco

NON-HAZARDOUS WASTE MANIFEST NO **069311** 1. PAGE OF 2. TRAILER NO. 07

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1 CM			
	b.				

① 32,680 ② 36,000 ③ 39,180

A	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE	13. WASTE PROFILE NO. 708594
---	--	--

T	14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
	NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. **GENERATOR'S CERTIFICATION:** I Herby 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, LLC

R	PRINTED/TYPED NAME	SIGNATURE	DATE
---	--------------------	-----------	------

T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.

S	18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
	PRINTED/TYPED NAME <i>Baltazar Franco</i>	PRINTED/TYPED NAME _____

D F I A S C I P O L S I A T Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
---	---------------	---	-------------------------------

PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
---	--------------

21. **DISPOSAL FACILITY'S CERTIFICATION:** I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/30/2009	TIME 11:00
--	----------	--------------------------	----------------------

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

B. Franco

NON-HAZARDOUS WASTE MANIFEST	NO 069322	1. PAGE ___ OF ___	2. TRAILER NO. 7
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G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/31/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non-Hazardous Waste	1	CM			
	b.					
	c.					
12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE				13. WASTE PROFILE NO. 709004		

14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO.

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, LLC.

PRINTED/TYPED NAME	SIGNATURE	DATE
--------------------	-----------	------

T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:	
	TEXAS I.D. NO.	TEXAS I.D. NO.	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:	
EMERGENCY PHONE: (575) 360-1003	EMERGENCY PHONE:		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material	
PRINTED/TYPED NAME Baltazar Z Franco		PRINTED/TYPED NAME _____	
SIGNATURE <i>Baltazar Franco</i> DATE 7/31/2009		SIGNATURE _____ DATE _____	

D I S P O S I T A L Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS o
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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.

AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/31/2009	TIME 8:35
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Diamond

NON-HAZARDOUS WASTE MANIFEST NO **069291** 1. PAGE OF 2. TRAILER NO.

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1	CM			
	b.					
	d. 35,640 30,140 30,140 36,120					

12. COMMENTS OR SPECIAL INSTRUCTIONS: **STATE DW #1 FLOWLINE**

13. WASTE PROFILE NO. **708504**

14. **IN CASE OF EMERGENCY OR SPILL, CONTACT**

NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO.
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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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:
EMERGENCY PHONE: (575) 300-2003	EMERGENCY PHONE:	
18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material	
PRINTED/TYPED NAME ALAN LOPEZ	PRINTED/TYPED NAME	
SIGNATURE <i>[Signature]</i> DATE 7/30/2009	SIGNATURE <i>[Signature]</i> DATE	

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS	

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.

AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO. —	DATE 7/30/2009	TIME 8:50
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Diamond

NON-HAZARDOUS WASTE MANIFEST NO **069263** 1. PAGE OF 2. TRAILER NO.

G E	3. COMPANY NAME OXY USA PHONE NO.	4. ADDRESS 102 S. Main Street CITY STATE ZIP Carlsbad NM 88220	5. PICK-UP DATE 7/29/2009
			6. TNRCC I.D. NO.

N E R A	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID.#
	a. Non-Regulated, Non Hazardous Waste	1 CM			
	b.				
	d. ④ 26,280 ③ 30,240 ③ 30,180 ③ 30,720				
12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW# FLOWLINE				13. WASTE PROFILE NO. 706594	

IN CASE OF EMERGENCY OR SPILL, CONTACT

NAME WIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.
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15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: KELTON BEARD EMERGENCY PHONE: (575) 390-1903	17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:
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18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE <i>[Signature]</i> DATE 7/29/2009	19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE DATE
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DISPOSAL SITE	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/29/2009	TIME 8:55
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Diamond

NON-HAZARDOUS WASTE MANIFEST NO **069332** 1. PAGE OF 2. TRAILER NO.

G E N E R A T O R	3. COMPANY NAME OXY USA PHONE NO. <u> </u>	4. ADDRESS 102 S. Main Street CITY STATE ZIP <i>Carlsbad NM 88220</i>	5. PICK-UP DATE 7/31/2009
			6. TNRCC I.D. NO. <u> </u>

N E R E A R E D	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non-Hazardous Waste	1 CM			
	b. <u> </u>				
	c. <u> </u>				

A T T R I B U T E S	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE C/W # FLOWLINE	13. WASTE PROFILE NO. 708594
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14. IN CASE OF EMERGENCY OR SPILL, CONTACT:		
NAME KIM SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO. <u> </u>

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, LLC

PRINTED/TYPED NAME <u> </u>	SIGNATURE <u> </u>	DATE <u> </u>
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME: <u> </u>
	TEXAS I.D. NO. <u> </u>	TEXAS I.D. NO. <u> </u>
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT: <u> </u>

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME <u><i>Alan Lopez</i></u>	PRINTED/TYPED NAME <u> </u>
SIGNATURE <u><i>Alan Lopez</i></u> DATE <u><i>7-31-09</i></u>	SIGNATURE <u> </u> DATE <u> </u>

Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS <u> </u>
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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.

AUTHORIZED SIGNATURE <u><i>Alan Lopez</i></u>	CELL NO. <u> </u>	DATE 7/31/2009	TIME 8:45
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

D4H
77

NON-HAZARDOUS WASTE MANIFEST NO **069319** 1. PAGE OF 2. TRAILER NO. 77

G E N E R A T O R	3. COMPANY NAME OXY USA PHONE NO. _____	4. ADDRESS 102 S. Main Street CITY STATE ZIP Carlsbad NM 88220	5. PICK-UP DATE 7/31/2009 6. TNRC ID. NO. _____
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N E R A T O R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1 CM			
	b. _____				
	c. _____				

12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#1 FLOWLINE	13. WASTE PROFILE NO. 708594
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14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO. _____

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, LLC

PRINTED/TYPED NAME _____	SIGNATURE _____	DATE _____
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T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. _____ IN CASE OF EMERGENCY CONTACT: KELTON BEARD EMERGENCY PHONE: (575) 390-1903	17. TRANSPORTER (2) NAME: _____ TEXAS I.D. NO. _____ IN CASE OF EMERGENCY CONTACT: _____ EMERGENCY PHONE: _____
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18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME <u><i>Fernando Soto</i></u> SIGNATURE <u><i>Fernando Soto</i></u> DATE <u>7/31/2009</u>	19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME _____ SIGNATURE _____ DATE _____
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Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS _____
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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.

AUTHORIZED SIGNATURE <u><i>[Signature]</i></u>	CELL NO. _____	DATE 7/31/2009	TIME 8:20
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

PH

NON-HAZARDOUS WASTE MANIFEST NO **069289** 1. PAGE OF 2. TRAILER NO. 711

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1 CM			
	b.				

c. **35000**
d. **185LD 345LD 39200**

A	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#4 FLOWLINE	13. WASTE PROFILE NO. 708504
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T O R	14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
	NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. **GENERATOR'S CERTIFICATION:** I Herby 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, LLC

R	PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:

EMERGENCY PHONE: **(575) 300-1903**

S	18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
	PRINTED/TYPED NAME <u><i>Fernando Salis</i></u>	PRINTED/TYPED NAME _____

SIGNATURE *[Signature]* DATE **7/30/2009**

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. **DISPOSAL FACILITY'S CERTIFICATION:** I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE <u><i>[Signature]</i></u>	CELL NO.	DATE 7/30/2009	TIME 845
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

PH
77

NON-HAZARDOUS WASTE MANIFEST NO **069264** 1. PAGE OF 2. TRAILER NO.

G E	3. COMPANY NAME OXY USA PHONE NO.	4. ADDRESS 102 S. Main Street CITY STATE ZIP Carlsbad NM 88220	5. PICK-UP DATE 7/29/2008
			6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS		9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
		No.	Type			
a.	Non-Regulated, Non Hazardous Waste	1	CM			
b.						
c.	④ 20,320					
d.	32160 @ 30,880 @ 30,220					

A	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE	13. WASTE PROFILE NO. 708504
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14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
T	NAME KIN SLAUGHTER	PHONE NO. 575-887-4048
		24-HOUR EMERGENCY NO.

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, LLC

R	PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: KELTON BEARD EMERGENCY PHONE: (575) 390-1903	17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:
	18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
	PRINTED/TYPED NAME <u>Fernando Solis</u>	PRINTED/TYPED NAME _____
	SIGNATURE <u>[Signature]</u> DATE <u>7/29/2008</u>	SIGNATURE _____ DATE _____

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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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.

AUTHORIZED SIGNATURE <u>[Signature]</u>	CELL NO. _____	DATE 7/29/2008	TIME 9:25
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

D&P
J1

NON-HAZARDOUS WASTE MANIFEST NO **069257** 1. PAGE OF 2. TRAILER NO.

G	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/29/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

E N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1	CM			
	b.					
	c. ④ 27820					
	d. 38960 32960 31680					

12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW# FLOWLINE	13. WASTE PROFILE NO. 708594
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14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: KELTON BEAIRD EMERGENCY PHONE: (575) 390-1903	17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:
	18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME Jose Berjorero SIGNATURE Jose Berjorero DATE 7/29/2009	19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE DATE

Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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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.

AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/29/2009	TIME 830
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

DHP

NON-HAZARDOUS WASTE MANIFEST NO **069285** 1. PAGE OF 2. TRAILER NO. J-1

G	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

E	7. NAME OR DESCRIPTION OF WASTE SHIPPED:		8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste					
	b.					
	c. 4 37960					
R	d. 22540 @ 32440 @ 36180					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE				13. WASTE PROFILE NO. 708594	

T	14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
	NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)		17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.		NAME:	
	TEXAS I.D. NO.		TEXAS I.D. NO.	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD		IN CASE OF EMERGENCY CONTACT:	
EMERGENCY PHONE: (575) 390-1903		EMERGENCY PHONE:		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material		
PRINTED/TYPED NAME Jose Bejarano		PRINTED/TYPED NAME		
SIGNATURE Jose Bejarano DATE 7/30/2009		SIGNATURE DATE		

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS	

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.			
AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/30/2009	TIME 8:30

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

NON-HAZARDOUS WASTE MANIFEST NO **069320** 1. PAGE OF 2. TRAILER NO.

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/31/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non-Hazardous Waste	1 CM			
	b.				
	c.				

A	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#3 FLOWLINE	13. WASTE PROFILE NO. 708594
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T	14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
	NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. **GENERATOR'S CERTIFICATION:** I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME: Jose Bizarro	PRINTED/TYPED NAME
SIGNATURE: Jose Bizarro DATE: 7/31/2009	SIGNATURE DATE

D F A C I L I T Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. **DISPOSAL FACILITY'S CERTIFICATION:** I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/31/2009	TIME 8:25
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis

NON-HAZARDOUS WASTE MANIFEST NO **069260** 1. PAGE OF 2. TRAILER NO. **E-03**

G 3. COMPANY NAME: OXY USA
 PHONE NO. _____
E 4. ADDRESS: 102 S. Main Street
 CITY: Carlsbad STATE: NM ZIP: 88720
 5. PICK-UP DATE: 7/29/2009
 6. TNRCC I.D. NO. _____

N 7. NAME OR DESCRIPTION OF WASTE SHIPPED: Non-Regulated, Non Hazardous Waste **321**
E 8. CONTAINERS: No. 1 Type CM
 9. TOTAL QUANTITY _____
 10. UNIT Wt/Vol. _____
 11. TEXAS WASTE ID # _____
R (4) 20,220 @
 (1) 37,040 @ (2) 32,200 @ (3) 33,160

A 12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW 4 FLOWLINE 7-29-09 707971
 13. WASTE PROFILE NO. 708594

T 14. IN CASE OF EMERGENCY OR SPILL, CONTACT: NAME: KIN SLAUGHTER E-03 PHONE NO: 575-887-4048
 24 HOUR EMERGENCY NO. 708292

O 15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

R PRINTED/TYPED NAME: Jose Roman SIGNATURE: _____ DATE: _____

T 16. TRANSPORTER (1): NAME: ECKE ENVIRONMENTAL, INC 70797 TEXAS I.D. NO. 529
 IN CASE OF EMERGENCY CONTACT: KELTON BEARD
 EMERGENCY PHONE: (575) 880-1933
R 17. TRANSPORTER (2): NAME: 708292 TEXAS I.D. NO. 321
 IN CASE OF EMERGENCY CONTACT: _____
 EMERGENCY PHONE: _____

S 18. TRANSPORTER (1): Acknowledgment of receipt of material
 PRINTED/TYPED NAME: Jose Roman SIGNATURE: _____ DATE: 7/29/2009
 19. TRANSPORTER (2): Acknowledgment of receipt of material
 PRINTED/TYPED NAME: _____ SIGNATURE: _____ DATE: _____

D 3. COMPANY NAME: Lea Land, LLC ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM PHONE: 505-887-4048

I PERMIT NO. WM-01-035 - New Mexico 20. COMMENTS _____

S 21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

A AUTHORIZED SIGNATURE: _____ CELL NO. _____ DATE: 7/29/2009 TIME: 840
L Y

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis

NON HAZARDOUS WASTE MANIFEST NO **069288** 1. PAGE OF 2. TRAILER NO. **E03**

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
a. Non-Regulated, Non Hazardous Waste	1	CM			
b.					
d. (4) 36520 29440 (2) 33160 33980					

12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW# FLOWLINE	13. WASTE PROFILE NO. 708544
--	--

14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: MELTON BEARD EMERGENCY PHONE: (575) 390-1903	17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:
--	---	--

18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME Jesse Kainer SIGNATURE Jesse Kainer DATE 7/30/2009	19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME _____ SIGNATURE _____ DATE _____
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Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE 	CELL NO.	DATE 7/30/2009	TIME 8:45
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis
E03

NON-HAZARDOUS WASTE MANIFEST		NO 069321	1. PAGE ___ OF ___	2. TRAILER NO. E03		
GENERATOR'S	3. COMPANY NAME OXY USA		4. ADDRESS 102 S. Main Street		5. PICK-UP DATE 7/31/2008	
	PHONE NO.		CITY STATE ZIP Carlsbad NM 88220		6. TNRCC I.D. NO.	
	7. NAME OR DESCRIPTION OF WASTE SHIPPED:		8. CONTAINERS No. Type		9. TOTAL QUANTITY	
	a. Non-Regulated, Non Hazardous Waste		1 CM			
DISPOSAL	b.					
	c.					
	d. 35080					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#4 FLOWLINE				13. WASTE PROFILE NO. 708584	
TRANSPORTER	14. IN CASE OF EMERGENCY OR SPILL, CONTACT					
	NAME KIN SLAUGHTER		PHONE NO 575-887-4048		24-HOUR EMERGENCY NO.	
OPERATOR	15. GENERATOR'S CERTIFICATION: I Herby 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, LLC					
	PRINTED/TYPED NAME			SIGNATURE		DATE
TRANSPORTERS	16. TRANSPORTER (1)			17. TRANSPORTER (2)		
	NAME: ELKE ENVIRONMENTAL, INC.			NAME:		
	TEXAS I.D. NO.			TEXAS I.D. NO.		
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD			IN CASE OF EMERGENCY CONTACT:		
EMERGENCY PHONE: (575) 390-1903			EMERGENCY PHONE:			
18. TRANSPORTER (1): Acknowledgment of receipt of material			19. TRANSPORTER (2): Acknowledgment of receipt of material			
PRINTED/TYPED NAME Jose L...			PRINTED/TYPED NAME _____			
SIGNATURE Jose L... DATE 7/31/2008			SIGNATURE _____ DATE _____			
DISPOSAL	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM		PHONE: 505-887-4048	
	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS			
	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.					
SITE	AUTHORIZED SIGNATURE [Signature]		CELL NO.		DATE 7/31/2008	
					TIME 8:25	

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

NON-HAZARDOUS WASTE MANIFEST		NO 069318	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO. A-96		
G E N E R A T O R	3. COMPANY NAME OXY USA PHONE NO. _____		4. ADDRESS 102 S. Main Street CITY Carlsbad STATE NM ZIP 88220		5. PICK-UP DATE 7/31/2008	
					6. TNRCC I.D. NO. _____	
	7. NAME OR DESCRIPTION OF WASTE SHIPPED: a. Non-Regulated, Non Hazardous Waste		8. CONTAINERS No. 1 Type CM	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	b. _____ c. _____ d. 37820					
A T T R I B U T E S	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#4 FLOWLINE			13. WASTE PROFILE NO. 708594		
	14. IN CASE OF EMERGENCY OR SPILL, CONTACT					
NAME KIN SLAUGHTER		PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO. _____			
15. GENERATOR'S CERTIFICATION: I Herby 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, LLC						
PRINTED/TYPED NAME		SIGNATURE		DATE		
T R A N S P O R T E R S	16. TRANSPORTER (1)		17. TRANSPORTER (2)			
	NAME: ELKE ENVIRONMENTAL, INC.		NAME: _____			
	TEXAS I.D. NO. _____		TEXAS I.D. NO. _____			
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD		IN CASE OF EMERGENCY CONTACT: _____			
EMERGENCY PHONE: (575) 340-1903		EMERGENCY PHONE: _____				
18. TRANSPORTER (1): Acknowledgment of receipt of material			19. TRANSPORTER (2): Acknowledgment of receipt of material			
PRINTED/TYPED NAME Ramon Solis		PRINTED/TYPED NAME _____				
SIGNATURE Ramon Solis DATE 7/31/2008		SIGNATURE _____ DATE _____				
D I S P O S I T A T I O N	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM		PHONE: 505-887-4048	
	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS			
	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.					
AUTHORIZED SIGNATURE [Signature]		CELL NO. _____	DATE 7/31/2008	TIME 815		

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis
A-90

NON-HAZARDOUS WASTE MANIFEST NO **069290** 1. PAGE OF 2. TRAILER NO.

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1	CM			
	b.					
	c. ④ 357,640					
	d. 28,560 @ 32,080 @ 33,780					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW # FLOWLINE				13. WASTE PROFILE NO. 708594	

14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO.

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:	
	TEXAS I.D. NO.	TEXAS I.D. NO.	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:	
EMERGENCY PHONE: (575) 390-1903	EMERGENCY PHONE:		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material	
PRINTED/TYPED NAME Roman Solis	PRINTED/TYPED NAME		
SIGNATURE Roman Solis DATE 7/30/2009	SIGNATURE	DATE	

D I S P O S I T I O N	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS	

L Y	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
	AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/30/2009	TIME 8:50

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Solis
A-96

NON HAZARDOUS WASTE MANIFEST	NO 069258	1. PAGE ___ OF ___	2. TRAILER NO. A-96
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G E	3. COMPANY NAME OKY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/29/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS		9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
		No.	Type			
a.	Non-Regulated, Non Hazardous Waste	1	CM			
b.						
c.	④ 22,040					
d.	③ 31,860 ③ 33,120 ③ 28,880					

12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE	13. WASTE PROFILE NO. 708594
--	--

14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEAIRD	IN CASE OF EMERGENCY CONTACT:

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME Ramon Solis	PRINTED/TYPED NAME _____
SIGNATURE Ramon Solis DATE 7/29/2009	SIGNATURE _____ DATE _____

Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/29/2009	TIME 8:35
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

515
9407

NON-HAZARDOUS WASTE MANIFEST NO **069324** 1. PAGE OF 2. TRAILER NO.

G E N E R A T O R	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/31/2009
	PHONE NO. _____	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO. _____

N E R A T O R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non-Hazardous Waste	1	CM			
	b. _____					
	c. _____					
A T O R	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE D/W # FLOWLINE					13. WASTE PROFILE NO. 709594
	14. IN CASE OF EMERGENCY OR SPILL, CONTACT					

14. NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO. _____
----------------------------------	----------------------------------	-----------------------------

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME _____	SIGNATURE _____	DATE _____
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME: _____
	TEXAS I.D. NO. _____	TEXAS I.D. NO. _____
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT: _____

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME <u><i>Scott Holman</i></u>	PRINTED/TYPED NAME _____
SIGNATURE <u><i>Scott Holman</i></u> DATE 7/31/2009	SIGNATURE _____ DATE _____

D F I A S C I P O L S I A T A L Y	ADDRESS: Lea Land, LLC Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS _____
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE <u><i>Alma Lopez</i></u>	CELL NO. _____	DATE 7/31/2009	TIME 8:40
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY. 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

S&L
9407

NON-HAZARDOUS WASTE MANIFEST	NO 069284	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO. 9407
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G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No.	Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1	CM			
	b.					
	c. ④ 40380					
	d. ② 27520 ③ 33520 ③ 32280					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE				13. WASTE PROFILE NO. 708504	

14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:
	EMERGENCY PHONE: (575) 390-1903	EMERGENCY PHONE:
	18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
	PRINTED/TYPED NAME _____	PRINTED/TYPED NAME _____
	SIGNATURE <i>[Signature]</i> DATE 7/30/2009	SIGNATURE _____ DATE _____

D F I S P O S I T A L Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS	

21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO. _____	DATE 7/30/2009	TIME 8:25

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK. 73106 • PHONE (405) 236-4257

SHW

NON HAZARDOUS WASTE MANIFEST		NO 069259	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO. 9407
GENERATOR	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street		5. PICK-UP DATE 7/29/2009
	PHONE NO.	CITY Carlsbad	STATE NM	ZIP 58220
	7. NAME OR DESCRIPTION OF WASTE SHIPPED: a. Non-Regulated, Non Hazardous Waste			8. CONTAINERS No. 1 Type CM
	7. NAME OR DESCRIPTION OF WASTE SHIPPED: b. <u>20,360</u>			9. TOTAL QUANTITY 273
RECEIVER	7. NAME OR DESCRIPTION OF WASTE SHIPPED: d. <u>31,320</u> <u>31,920</u> <u>28,740</u>			10. UNIT Wt/Vol.
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#4 FLOWLINE			11. TEXAS WASTE ID # 705504
TRANSPORTERS	14. IN CASE OF EMERGENCY OR SPILL, CONTACT			
	NAME KIN SLAUGHTER	PHONE NO 575-887-4038	24-HOUR EMERGENCY NO.	
DISPOSAL	15. GENERATOR'S CERTIFICATION: I Herby 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, LLC.			
	PRINTED/TYPED NAME	SIGNATURE		DATE
	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: KELTON BEARD EMERGENCY PHONE: (575) 390-1903		17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:	
	18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE <i>[Signature]</i> DATE 7/29/2009		19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME SIGNATURE DATE	
DISPOSAL	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM		PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS		
	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
	AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/29/2009	TIME 8:30

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

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NON-HAZARDOUS WASTE MANIFEST	NO 069323	1. PAGE ___ OF ___	2. TRAILER NO. 421
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G E N E R A T O R	3. COMPANY NAME OKY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/31/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A T O R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Registered, Non Hazardous Waste	1 CM			
	b.				
	c.				

d. **WT: 38,920**

12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#4 FLOWLINE	13. WASTE PROFILE NO. 708594
---	--

A T T E N T I O N	14. IN CASE OF EMERGENCY OR SPILL, CONTACT
NAME KIN SLAUGHTER	PHONE NO 575-887-4048
24-HOUR EMERGENCY NO.	

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:	
	TEXAS I.D. NO.	TEXAS I.D. NO.	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:	
EMERGENCY PHONE: (575) 890-1903	EMERGENCY PHONE:		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material	
PRINTED/TYPED NAME: Bobby Aguero	SIGNATURE: <i>[Signature]</i>	PRINTED/TYPED NAME:	SIGNATURE:
SIGNATURE: <i>[Signature]</i>	DATE: 7/31/2009	SIGNATURE:	DATE:

Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/31/2009	TIME 8:35

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

DHL
421

NON-HAZARDOUS WASTE MANIFEST		NO 069305	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO. 421
G E N E R A T O R	3. COMPANY NAME OKY USA		4. ADDRESS 102 S Main Street	
	PHONE NO.		CITY STATE ZIP Carlsbad NM 88220	
			5. PICK-UP DATE 7/30/2009	
			6. TNRC ID. NO.	
E N V I R O N M E N T A L	7. NAME OR DESCRIPTION OF WASTE SHIPPED:		8. CONTAINERS No.	9. TOTAL QUANTITY
	a. Non-Regulated, Non-Hazardous Waste		1	CM
	b.			
R E C E I V E R	c. (4) 31420 (1) 20240 (1) 34260 (1) 34320			
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW # FLOWLINE		13. WASTE PROFILE NO. 708504	
14. IN CASE OF EMERGENCY OR SPILL, CONTACT				
NAME KIN SLAUGHTER		PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.	
15. GENERATOR'S CERTIFICATION: I Herby 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, LLC				
T R A N S P O R T E R S	16. TRANSPORTER (1) NAME: ELKE ENVIRONMENTAL, INC. TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: KELTON BEARD EMERGENCY PHONE: (575) 390-1903		17. TRANSPORTER (2) NAME: TEXAS I.D. NO. IN CASE OF EMERGENCY CONTACT: EMERGENCY PHONE:	
	18. TRANSPORTER (1): Acknowledgment of receipt of material PRINTED/TYPED NAME: Bobby Agueron SIGNATURE: <i>Bobby Agueron</i> DATE: 7/30/2009		19. TRANSPORTER (2): Acknowledgment of receipt of material PRINTED/TYPED NAME: _____ SIGNATURE: _____ DATE: _____	
D I S P O S I T I O N F A C I L I T Y	Lea Land, LLC		ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico		20. COMMENTS	
	21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
AUTHORIZED SIGNATURE <i>Daniel Contreras</i>		CELL NO. _____	DATE 7/30/2009	TIME 900

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

OL

NON-HAZARDOUS WASTE MANIFEST NO **069262** 1. PAGE OF 2. TRAILER NO. **421**

G E	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/29/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1 CM			
	b.				
	d. ① 26,860 ② 34,560 ③ 38,140 ④ 29,640				
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #1 FLOWLINE	13. WASTE PROFILE NO. 708594			

T O R	14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
	NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO.

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:
	EMERGENCY PHONE: (575) 390-1803	EMERGENCY PHONE:

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME Bobby Agnero	PRINTED/TYPED NAME _____
SIGNATURE Bobby Agnero DATE 7/29/2009	SIGNATURE _____ DATE _____

D I S P O S I T A L Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS	

21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
AUTHORIZED SIGNATURE [Signature]	CELL NO. _____	DATE 7/29/2009	TIME 7:50

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Chaps

NON-HAZARDOUS WASTE MANIFEST NO **069325** 1. PAGE OF 2. TRAILER NO.

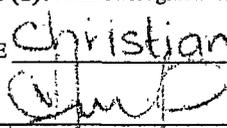
G E N E R A T O R	3. COMPANY NAME OKY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/31/2009	
	PHONE NO. <u> </u>	CITY Carlsbad STATE NM ZIP 86220	6. TNRCC I.D. NO. <u> </u>	

R E C E I V E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:		8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non-Hazardous Waste		1	CM		
	b. <u> </u>					
	c. <u> </u>					
	d. WT 42,440					
	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW#1 FLOWLINE				13. WASTE PROFILE NO. 700594	

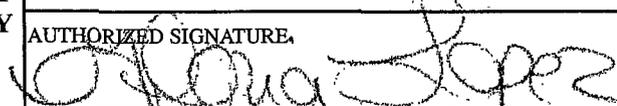
14. IN CASE OF EMERGENCY OR SPILL, CONTACT		
NAME KIN SLAUGHTER	PHONE NO. 575-887-4048	24-HOUR EMERGENCY NO. <u> </u>

15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)		17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.		NAME: <u> </u>	
	TEXAS I.D. NO. <u> </u>		TEXAS I.D. NO. <u> </u>	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD		IN CASE OF EMERGENCY CONTACT: <u> </u>	
EMERGENCY PHONE: (575) 390-1903		EMERGENCY PHONE: <u> </u>		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material		
PRINTED/TYPED NAME Christian Molina		PRINTED/TYPED NAME <u> </u>		
SIGNATURE 		SIGNATURE <u> </u>		
DATE 7/31/2009		DATE <u> </u>		

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
	PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS <u> </u>	

21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.			
AUTHORIZED SIGNATURE 	CELL NO. <u> </u>	DATE 7/31/2009	TITLE JLH

LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Chaps

NON-HAZARDOUS WASTE MANIFEST	NO 069303	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO.
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G E N E R A T O R	3. COMPANY NAME OXY USA	4. ADDRESS 102 S. Main Street	5. PICK-UP DATE 7/30/2009
	PHONE NO.	CITY STATE ZIP Carlsbad NM 88220	6. TNRCC I.D. NO.

N E R A T O R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS No. Type	9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
	a. Non-Regulated, Non Hazardous Waste	1 CM		1	
	b. (4) 35980				
	c. (1) 28,320 (2) 32,240 (3) 35960				
A T T R I B U T O R	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE			13. WASTE PROFILE NO. 708594	
	14. IN CASE OF EMERGENCY OR SPILL, CONTACT				

NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.
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15. GENERATOR'S CERTIFICATION: I Herby 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, LLC

PRINTED/TYPED NAME	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)	
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:	
	TEXAS I.D. NO.	TEXAS I.D. NO.	
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:	
EMERGENCY PHONE: (575) 390-1903	EMERGENCY PHONE:		
18. TRANSPORTER (1): Acknowledgment of receipt of material		19. TRANSPORTER (2): Acknowledgment of receipt of material	
PRINTED/TYPED NAME Christian Molina	PRINTED/TYPED NAME	SIGNATURE [Signature]	SIGNATURE
SIGNATURE [Signature]	DATE 7/30/2009	SIGNATURE	DATE

Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
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PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. DISPOSAL FACILITY'S CERTIFICATION: I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE [Signature]	CELL NO.	DATE 7/30/2009	TIME 9:10
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LEA LAND DISPOSAL SITE NEW MEXICO

MILE MARKER #64 US HWY 62/180 • 30 MILES EAST OF CARLSBAD, NM • PHONE (505) 887-4048

LEA LAND, LLC

1300 WEST MAIN STREET • OKLAHOMA CITY, OK 73106 • PHONE (405) 236-4257

Chaps

NON-HAZARDOUS WASTE MANIFEST		NO 069261	1. PAGE <u> </u> OF <u> </u>	2. TRAILER NO.
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G E	3. COMPANY NAME OXY USA PHONE NO.	4. ADDRESS 102 S. Main Street CITY STATE ZIP Carlsbad NM 88220	5. PICK-UP DATE 7/29/2009
			6. TNRC ID. NO.

N E R	7. NAME OR DESCRIPTION OF WASTE SHIPPED:	8. CONTAINERS		9. TOTAL QUANTITY	10. UNIT Wt/Vol.	11. TEXAS WASTE ID #
		No.	Type			
a.	Non-Regulated, Non Hazardous Waste	1	CM			
b.						
	④ 26,660					
	① 35,500 ② 32,540 ③ 39,000					

A	12. COMMENTS OR SPECIAL INSTRUCTIONS: STATE DW #4 FLOWLINE	13. WASTE PROFILE NO. 708504
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14. IN CASE OF EMERGENCY OR SPILL, CONTACT			
T	NAME KIN SLAUGHTER	PHONE NO 575-887-4048	24-HOUR EMERGENCY NO.

15. **GENERATOR'S CERTIFICATION:** I Herby 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, LLC

R	PRINTED/TYPED NAME OSTE	SIGNATURE	DATE
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T R A N S P O R T E R S	16. TRANSPORTER (1)	17. TRANSPORTER (2)
	NAME: ELKE ENVIRONMENTAL, INC.	NAME:
	TEXAS I.D. NO.	TEXAS I.D. NO.
	IN CASE OF EMERGENCY CONTACT: KELTON BEARD	IN CASE OF EMERGENCY CONTACT:
	EMERGENCY PHONE: (575) 390-1003	EMERGENCY PHONE:

18. TRANSPORTER (1): Acknowledgment of receipt of material	19. TRANSPORTER (2): Acknowledgment of receipt of material
PRINTED/TYPED NAME Christian Pladin	PRINTED/TYPED NAME
SIGNATURE <i>[Signature]</i>	SIGNATURE
DATE 7/29/2009	DATE

D I S P O S I T O R Y	Lea Land, LLC	ADDRESS: Mile Marker 64, U.S. Hwy 62/180, 30 Miles East of Carlsbad, NM	PHONE: 505-887-4048
---	---------------	---	-------------------------------

PERMIT NO. WM-01-035 - New Mexico	20. COMMENTS
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21. **DISPOSAL FACILITY'S CERTIFICATION:** I Herby certify that the above described wastes were delivered to this facility, that the facility is authorized and permitted to receive such wastes.

AUTHORIZED SIGNATURE <i>[Signature]</i>	CELL NO.	DATE 7/29/2009	TIME 8:45
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WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) STATE DW #4 SB-1				OSE FILE NUMBER(S)									
	WELL OWNER NAME(S) OXY USA				PHONE (OPTIONAL)									
	WELL OWNER MAILING ADDRESS P.O. BOX 1988				CITY CARLSBAD		STATE NM		ZIP 88221					
	WELL LOCATION (FROM GPS)		DEGREES		MINUTES		SECONDS		* ACCURACY REQUIRED ONE TENTH OF A SECOND * DATUM REQUIRED WGS 84					
			LATITUDE		32		45				26.00 N			
		LONGITUDE		103		37		12.00 W						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS FROM 62/180 GO N.W. ON 529 FOR 15.1 MILES TURN L ON TO LOCATION														
2. OPTIONAL	(2 5 ACRE) ¼		(10 ACRE) ¼		(40 ACRE) ¼		(160 ACRE) ¼		SECTION					
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT					
	HYDROGRAPHIC SURVEY				MAP NUMBER		TRACT NUMBER							
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN				NAME OF WELL DRILLING COMPANY STRAUB CORPORATION							
	DRILLING STARTED 5-11-09		DRILLING ENDED 5-11-09		DEPTH OF COMPLETED WELL (FT) 0		BORE HOLE DEPTH (FT) 67		DEPTH WATER FIRST ENCOUNTERED (FT)					
	COMPLETED WELL IS <input type="checkbox"/> ARTESIAN <input checked="" type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT) N/A							
	DRILLING FLUID <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:													
	DRILLING METHOD <input checked="" type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:													
	DEPTH (FT)		BORE HOLE DIA (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)	
	FROM TO		5		N/A		N/A		N/A		N/A		N/A	
	0 67													
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)			
	FROM TO													
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA								TOTAL ESTIMATED WELL YIELD (GPM)						

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

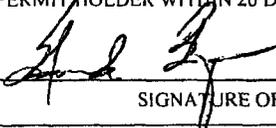
FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		0	2	5	.5 BAGS OF CEMENT		TOPLoad
2	67	5	16 BAGS OF 3/8 PLUG		TOPLoad		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	0	2	2	TAN FINE SAND - WITH CLAY	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2	6	4	RED FINE SAND	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	6	11	5	TAN FINE SAND - SANDSTONE - CALICHE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	11	21	10	TAN FINE SAND	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	21	24	3	TAN FINE SAND - SANDSTONE WITH CALICHE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	24	67	43	TAN FINE SAND	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	TD	67			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD	
	ADDITIONAL STATEMENTS OR EXPLANATIONS. SOIL BORING ONLY- SOIL BORING WAS PLUGGED AND ABANDONED UPON COMPLETION OF SAMPLING	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	5/21/09 _____ DATE

FOR USE INTERNAL USE		WELL RECORD & LOG (Version 6/9/08)	
FILE NUMBER	POD NUMBER	TRN NUMBER	PAGE 2 OF 2
LOCATION			



WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) STATE DW #4 SB-2				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) OXY USA				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS P.O. BOX 1988				CITY CARLSBAD		STATE NM		ZIP 88221	
	WELL LOCATION (FROM GPS)	DEGREES	MINUTES	SECONDS						
	LATITUDE	32	45	26.00	N	* ACCURACY REQUIRED ONE TENTH OF A SECOND * DATUM REQUIRED WGS 84				
LONGITUDE	103	37	12.00	W						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS FROM 62/180 GO N.W. ON 529 FOR 15.1 MILES TURN L ON TO LOCATION										
2. OPTIONAL	(2.5 ACRE) ¼	(10 ACRE) ¼	(40 ACRE) ¼	(160 ACRE) ¼	SECTION	TOWNSHIP	<input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE	<input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER	UNIT/TRACT			
	HYDROGRAPHIC SURVEY					MAP NUMBER		TRACT NUMBER		
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN			NAME OF WELL DRILLING COMPANY STRAUB CORPORATION				
	DRILLING STARTED 5-11-09		DRILLING ENDED 5-11-09	DEPTH OF COMPLETED WELL (FT) 0		BORE HOLE DEPTH (FT) 72	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input checked="" type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT) N/A			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY.									
	DRILLING METHOD: <input checked="" type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY.									
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL		CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)	
	FROM	TO								
	0	72	5	N/A		N/A	N/A	N/A	N/A	
	4. WATER BEARING STRATA	DEPTH (FT)	THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)	
FROM		TO								
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA						TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		0	2	5	.5 BAGS OF CEMENT		TOPLOAD
2	72	5	18 BAGS OF 3/8 PLUG		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO			<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	0	4	4	TAN FINE SAND - WITH CLAY	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	4	11	7	TAN FINE SAND - SANDSTONE	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	11	70	59	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	70	72	2	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	TD	72			<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS	

SOIL BORING ONLY- SOIL BORING WAS PLUGGED AND ABANDONED UPON COMPLETION OF SAMPLING

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	5/21/09 _____ DATE



WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

www.ose.state.nm.us

1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) STATE DW #4 SB-3				OSE FILE NUMBER(S)			
	WELL OWNER NAME(S) OXY USA				PHONE (OPTIONAL)			
	WELL OWNER MAILING ADDRESS P.O. BOX 1988				CITY CARLSBAD	STATE NM	ZIP 88221	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE 32	MINUTES 45	SECONDS 26.00 N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND			
	LONGITUDE 103	37	12.00 W	* DATUM REQUIRED WGS 84				
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS FROM 62/180 GO N.W. ON 529 FOR 15.1 MILES TURN L ON TO LOCATION								
2. OPTIONAL	(2.5 ACRE) ¼	(10 ACRE) ¼	(40 ACRE) ¼	(160 ACRE) ¼	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER	UNIT/TRACT	
	HYDROGRAPHIC SURVEY					MAP NUMBER	TRACT NUMBER	
3. DRILLING INFORMATION	LICENSE NUMBER WD1478	NAME OF LICENSED DRILLER EDWARD BRYAN			NAME OF WELL DRILLING COMPANY STRAUB CORPORATION			
	DRILLING STARTED 5-11-09	DRILLING ENDED 5-11-09	DEPTH OF COMPLETED WELL (FT) 0	BORE HOLE DEPTH (FT) 70	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input checked="" type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)				STATIC WATER LEVEL IN COMPLETED WELL (FT) N/A			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:							
	DRILLING METHOD: <input checked="" type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY							
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)
	FROM	TO						
0	70	5	N/A	N/A	N/A	N/A	N/A	
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	YIELD (GPM)			
	FROM	TO						
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA				TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION	PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		0	2	5	.5 BAGS OF CEMENT		TOPLOAD
2	70	5	18 BAGS OF 3/8 PLUG		TOPLOAD		

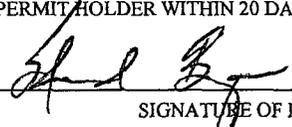
6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
	0	6	6	TAN FINE SAND - RED FINE SAND	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	6	9	3	TAN FINE SAND - SANDSTONE - CALICHE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	9	15	6	TAN FINE SAND - SANDSTONE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	15	51	36	TAN FINE SAND WITH CLAY	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	51	56	5	RED FINE SAND WITH CLAY	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	56	70	14	TAN FINE SAND	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	TD	70			<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD. <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.

ADDITIONAL STATEMENTS OR EXPLANATIONS:

SOIL BORING ONLY- SOIL BORING WAS PLUGGED AND ABANDONED UPON COMPLETION OF SAMPLING

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	5/21/09 _____ DATE

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
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WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

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1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) STATE DW #4 SB-4				OSE FILE NUMBER(S)									
	WELL OWNER NAME(S) OXY USA				PHONE (OPTIONAL)									
	WELL OWNER MAILING ADDRESS P.O. BOX 1988				CITY CARLSBAD		STATE NM		ZIP 88221					
	WELL LOCATION (FROM GPS)		DEGREES LATITUDE 32		MINUTES 45		SECONDS 26.00 N		* ACCURACY REQUIRED ONE TENTH OF A SECOND					
		LONGITUDE 103		37		12.00 W		* DATUM REQUIRED WGS 84						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS FROM 62/180 GO N.W. ON 529 FOR 15.1 MILES TURN L ON TO LOCATION														
2. OPTIONAL	(2.5 ACRE) ¼		(10 ACRE) ¼		(40 ACRE) ¼		(160 ACRE) ¼		SECTION					
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT					
	HYDROGRAPHIC SURVEY						MAP NUMBER		TRACT NUMBER					
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN				NAME OF WELL DRILLING COMPANY STRAUB CORPORATION							
	DRILLING STARTED 5-12-09		DRILLING ENDED 5-12-09		DEPTH OF COMPLETED WELL (FT) 0		BORE HOLE DEPTH (FT) 70		DEPTH WATER FIRST ENCOUNTERED (FT)					
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input checked="" type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT) N/A							
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY													
	DRILLING METHOD: <input checked="" type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY													
	DEPTH (FT)		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)	
	FROM	TO												
0	70	5		N/A		N/A		N/A		N/A		N/A		
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)			
	FROM	TO												
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA								TOTAL ESTIMATED WELL YIELD (GPM)						

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER			POD NUMBER			TRN NUMBER		
LOCATION						PAGE 1 OF 2		

5. SEAL AND PUMP

TYPE OF PUMP: SUBMERSIBLE JET NO PUMP - WELL NOT EQUIPPED
 TURBINE CYLINDER OTHER - SPECIFY:

ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
	FROM	TO				
	0	2	5	.5 BAGS OF CEMENT		TOPLOAD
	2	70	5	18 BAGS OF 3/8 PLUG		TOPLOAD

6. GEOLOGIC LOG OF WELL

DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
FROM	TO			YES	NO
0	5	5	RED FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
5	8	3	TAN FINE SAND - SANDSTONE - CALICHE	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
8	12	4	TAN FINE SAND - SANDSTONE	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
12	50	38	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
50	62	12	TAN FINE SAND - SANDSTONE (LAYERS)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
62	70	8	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
TD	70			<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> YES	<input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO

WELL TEST METHOD: BAILER PUMP AIR LIFT OTHER - SPECIFY:

TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.

ADDITIONAL STATEMENTS OR EXPLANATIONS:

SOIL BORING ONLY- SOIL BORING WAS PLUGGED AND ABANDONED UPON COMPLETION OF SAMPLING

8. SIGNATURE

THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:

[Signature] _____ 5/21/09 _____
SIGNATURE OF DRILLER DATE

FOR OSE INTERNAL USE		WELL RECORD & LOG (Version 6/9/08)	
FILE NUMBER	POD NUMBER	TRN NUMBER	
LOCATION			PAGE 2 OF 2



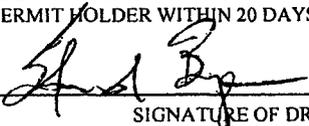
WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

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1. GENERAL AND WELL LOCATION	POD NUMBER (WELL NUMBER) STATE DW #4 SB-5				OSE FILE NUMBER(S)									
	WELL OWNER NAME(S) OXY USA				PHONE (OPTIONAL)									
	WELL OWNER MAILING ADDRESS P.O. BOX 1988				CITY CARLSBAD		STATE NM		ZIP 88221					
	WELL LOCATION (FROM GPS)		DEGREES		MINUTES		SECONDS		* ACCURACY REQUIRED ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84					
			LATITUDE		32		45				26.00 N			
		LONGITUDE		103		37		12.00 W						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS FROM 62/180 GO N.W. ON 529 FOR 15.1 MILES TURN L ON TO LOCATION														
2. OPTIONAL	(2.5 ACRE) 1/4		(10 ACRE) 1/4		(40 ACRE) 1/4		(160 ACRE) 1/4		SECTION					
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT					
	HYDROGRAPHIC SURVEY				MAP NUMBER		TRACT NUMBER							
3. DRILLING INFORMATION	LICENSE NUMBER WD1478		NAME OF LICENSED DRILLER EDWARD BRYAN				NAME OF WELL DRILLING COMPANY STRAUB CORPORATION							
	DRILLING STARTED 5-12-09		DRILLING ENDED 5-12-09		DEPTH OF COMPLETED WELL (FT) 0		BORE HOLE DEPTH (FT) 100		DEPTH WATER FIRST ENCOUNTERED (FT)					
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input checked="" type="checkbox"/> DRY HOLE <input type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT) N/A							
	DRILLING FLUID		<input checked="" type="checkbox"/> AIR		<input type="checkbox"/> MUD		<input type="checkbox"/> ADDITIVES - SPECIFY:							
	DRILLING METHOD:		<input checked="" type="checkbox"/> ROTARY		<input type="checkbox"/> HAMMER		<input type="checkbox"/> CABLE TOOL		<input type="checkbox"/> OTHER - SPECIFY					
	DEPTH (FT)		BORE HOLE DIA (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)	
	FROM		TO											
	0		100		5		N/A		N/A		N/A		N/A	
4. WATER BEARING STRATA	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)			
	FROM		TO											
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA								TOTAL ESTIMATED WELL YIELD (GPM)						

FOR OSE INTERNAL USE				WELL RECORD & LOG (Version 6/9/08)			
FILE NUMBER		POD NUMBER		TRN NUMBER			
LOCATION						PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP. <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY.						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		0	2	5	2 BAGS OF CEMENT		TOPLOAD
	2	100	5	20 BAGS OF 3/8 PLUG		TOPLOAD	
6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?		
	FROM	TO			<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
	0	9	9	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
	9	22	13	TAN FINE SAND - SANDSTONE - CALICHE	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
	22	31	9	TAN FINE SAND - SANDSTONE	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
	31	100	69	TAN FINE SAND	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
	TD	100			<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO	
ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL							
7. TEST & ADDITIONAL INFO	WELL TEST METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:						
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.						
	ADDITIONAL STATEMENTS OR EXPLANATIONS: SOIL BORING ONLY- SOIL BORING WAS PLUGGED AND ABANDONED UPON COMPLETION OF SAMPLING						
8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:						
	 SIGNATURE OF DRILLER			5/21/09 DATE			

Analytical Report 332317

for

Elke Environmental, Inc.

Project Manager: Logan Anderson

Oxy USA

State DW # 4

18-MAY-09



12600 West I-20 East Odessa, Texas 79765

Texas certification numbers:

Houston, TX T104704215-08B-TX - Odessa/Midland, TX T104704400-08-TX

Florida certification numbers:

Houston, TX E871002 - Miami, FL E86678 - Tampa, FL E86675

Miramar, FL E86349

Norcross(Atlanta), GA E87429

South Carolina certification numbers:

Norcross(Atlanta), GA 98015

North Carolina certification numbers:

Norcross(Atlanta), GA 483

Houston - Dallas - San Antonio - Tampa - Miami - Latin America

Midland - Corpus Christi - Atlanta



18-MAY-09

Project Manager: **Logan Anderson**
Elke Environmental, Inc.
4817 Andrews Hwy
P.O. Box 14167 Odessa, tx 79768
Odessa, TX 79762

Reference: XENCO Report No: **332317**
Oxy USA
Project Address:

Logan Anderson:

We are reporting to you the results of the analyses performed on the samples received under the project name referenced above and identified with the XENCO Report Number 332317. All results being reported under this Report Number apply to the samples analyzed and properly identified with a Laboratory ID number. Subcontracted analyses are identified in this report with either the NELAC certification number of the subcontract lab in the analyst ID field, or the complete subcontracted report attached to this report.

Unless otherwise noted in a Case Narrative, all data reported in this Analytical Report are in compliance with NELAC standards. Estimation of data uncertainty for this report is found in the quality control section of this report unless otherwise noted. Should insufficient sample be provided to the laboratory to meet the method and NELAC Matrix Duplicate and Matrix Spike requirements, then the data will be analyzed, evaluated and reported using all other available quality control measures.

The validity and integrity of this report will remain intact as long as it is accompanied by this letter and reproduced in full, unless written approval is granted by XENCO Laboratories. This report will be filed for at least 5 years in our archives after which time it will be destroyed without further notice, unless otherwise arranged with you. The samples received, and described as recorded in Report No. 332317 will be filed for 60 days, and after that time they will be properly disposed without further notice, unless otherwise arranged with you. We reserve the right to return to you any unused samples, extracts or solutions related to them if we consider so necessary (e.g., samples identified as hazardous waste, sample sizes exceeding analytical standard practices, controlled substances under regulated protocols, etc).

We thank you for selecting XENCO Laboratories to serve your analytical needs. If you have any questions concerning this report, please feel free to contact us at any time.

Respectfully,

Brent Barron, II

Odessa Laboratory Manager

Recipient of the Prestigious Small Business Administration Award of Excellence in 1994.

Certified and approved by numerous States and Agencies.

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Sample Cross Reference 332317



Elke Environmental, Inc., Odessa, TX

Oxy USA

Sample Id

TP 5 @ 6'

Matrix

S

Date Collected

May-04-09 12:15

Sample Depth

6 ft

Lab Sample Id

332317-001



Certificate of Analysis Summary 332317

Elke Environmental, Inc., Odessa, TX

Project Name: Oxy USA



Project Id: State DW # 4

Contact: Logan Anderson

Date Received in Lab: Mon May-11-09 11:58 am

Report Date: 18-MAY-09

Project Location:

Project Manager: Brent Barron, II

Analysis Requested	Lab Id: 332317-001 Field Id: TP 5 @ 6' Depth: 6 ft Matrix: SOIL Sampled: May-04-09 12:15					
Anions by EPA 300	Extracted: Analyzed: May-11-09 16:01 Units/RL: mg/kg RL					
Chloride	33.6 5.01					
Percent Moisture	Extracted: Analyzed: May-12-09 08:43 Units/RL: % RL					
Percent Moisture	ND 1.00					
TPH By SW8015 Mod	Extracted: May-13-09 11:30 Analyzed: May-13-09 21:53 Units/RL: mg/kg RL					
C6-C12 Gasoline Range Hydrocarbons	ND 15.0					
C12-C28 Diesel Range Hydrocarbons	ND 15.0					
C28-C35 Oil Range Hydrocarbons	ND 15.0					
Total TPH	ND 15.0					

This analytical report, and the entire data package it represents, has been made for your exclusive and confidential use. The interpretations and results expressed throughout this analytical report represent the best judgment of XENCO Laboratories. XENCO Laboratories assumes no responsibility and makes no warranty to the end use of the data hereby presented. Our liability is limited to the amount invoiced for this work order unless otherwise agreed to in writing.

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Brent Barron
Odessa Laboratory Director



Flagging Criteria



- X** In our quality control review of the data a QC deficiency was observed and flagged as noted. MS/MSD recoveries were found to be outside of the laboratory control limits due to possible matrix /chemical interference, or a concentration of target analyte high enough to effect the recovery of the spike concentration. This condition could also effect the relative percent difference in the MS/MSD.
- B** A target analyte or common laboratory contaminant was identified in the method blank. Its presence indicates possible field or laboratory contamination.
- D** The sample(s) were diluted due to targets detected over the highest point of the calibration curve, or due to matrix interference. Dilution factors are included in the final results. The result is from a diluted sample.
- E** The data exceeds the upper calibration limit; therefore, the concentration is reported as estimated.
- F** RPD exceeded lab control limits.
- J** The target analyte was positively identified below the MQL and above the SQL.
- U** Analyte was not detected.
- L** The LCS data for this analytical batch was reported below the laboratory control limits for this analyte. The department supervisor and QA Director reviewed data. The samples were either reanalyzed or flagged as estimated concentrations.
- H** The LCS data for this analytical batch was reported above the laboratory control limits. Supporting QC Data were reviewed by the Department Supervisor and QA Director. Data were determined to be valid for reporting.
- K** Sample analyzed outside of recommended hold time.
- JN** A combination of the "N" and the "J" qualifier. The analysis indicates that the analyte is "tentatively identified" and the associated numerical value may not be consistent with the amount actually present in the environmental sample.
- BRL** Below Reporting Limit.
- RL** Reporting Limit
- * Outside XENCO's scope of NELAC Accreditation.

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5332 Blackberry Drive, San Antonio TX 78238	(210) 509-3334	(210) 509-3335
2505 North Falkenburg Rd, Tampa, FL 33619	(813) 620-2000	(813) 620-2033
5757 NW 158th St, Miami Lakes, FL 33014	(305) 823-8500	(305) 823-8555
12600 West I-20 East, Odessa, TX 79765	(432) 563-1800	(432) 563-1713
842 Cantwell Lane, Corpus Christi, TX 78408	(361) 884-0371	(361) 884-9116



Form 2 - Surrogate Recoveries

Project Name: Oxy USA

Work Orders : 332317,

Project ID: State DW # 4

Lab Batch #: 758877

Sample: 529945-1-BKS / BKS

Batch: 1 Matrix: Solid

Units: mg/kg

Date Analyzed: 05/13/09 17:19

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	105	100	105	70-135	
o-Terphenyl	47.2	50.0	94	70-135	

Lab Batch #: 758877

Sample: 529945-1-BSD / BSD

Batch: 1 Matrix: Solid

Units: mg/kg

Date Analyzed: 05/13/09 17:44

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	102	100	102	70-135	
o-Terphenyl	45.2	50.0	90	70-135	

Lab Batch #: 758877

Sample: 529945-1-BLK / BLK

Batch: 1 Matrix: Solid

Units: mg/kg

Date Analyzed: 05/13/09 18:09

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	89.7	100	90	70-135	
o-Terphenyl	51.1	50.0	102	70-135	

Lab Batch #: 758877

Sample: 332317-001 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/13/09 21:53

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	113	100	113	70-135	
o-Terphenyl	62.5	50.0	125	70-135	

Lab Batch #: 758877

Sample: 332238-004 D / MD

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/14/09 04:04

SURROGATE RECOVERY STUDY

TPH By SW8015 Mod Analytes	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
1-Chlorooctane	2110	2000	106	70-135	
o-Terphenyl	1190	1000	119	70-135	

* Surrogate outside of Laboratory QC limits

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = 100 * A / B

All results are based on MDL and validated for QC purposes.



Blank Spike Recovery



Project Name: Oxy USA

Work Order #: 332317

Project ID:

State DW # 4

Lab Batch #: 758598

Sample: 758598-1-BKS

Matrix: Solid

Date Analyzed: 05/11/2009

Date Prepared: 05/11/2009

Analyst: LATCOR

Reporting Units: mg/kg

Batch #: 1

BLANK /BLANK SPIKE RECOVERY STUDY

Anions by EPA 300 Analytes	Blank Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Control Limits %R	Flags
Chloride	ND	10.0	9.46	95	80-120	

Blank Spike Recovery [D] = 100*[C]/[B]

All results are based on MDL and validated for QC purposes.

BRL - Below Reporting Limit



BS / BSD Recoveries



Project Name: Oxy USA

Work Order #: 332317

Analyst: BHW

Date Prepared: 05/13/2009

Project ID: State DW # 4

Date Analyzed: 05/13/2009

Lab Batch ID: 758877

Sample: 529945-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg

BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY

TPH By SW8015 Mod	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Analytes											
C6-C12 Gasoline Range Hydrocarbons	ND	1000	1060	106	1000	1040	104	2	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1000	1030	103	1000	1000	100	3	70-135	35	

Relative Percent Difference RPD = $200 * (C-F) / (C+F)$

Blank Spike Recovery [D] = $100 * (C) / [B]$

Blank Spike Duplicate Recovery [G] = $100 * (F) / [E]$

All results are based on MDL and Validated for QC Purposes



Form 3 - MS Recoveries



Project Name: Oxy USA

Work Order #: 332317

Lab Batch #: 758598

Project ID: State DW # 4

Date Analyzed: 05/11/2009

Date Prepared: 05/11/2009

Analyst: LATCOR

QC- Sample ID: 332150-001 S

Batch #: 1

Matrix: Soil

Reporting Units: mg/kg

MATRIX / MATRIX SPIKE RECOVERY STUDY

Inorganic Anions by EPA 300	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	%R [D]	Control Limits %R	Flag
Analytes						
Chloride	2090	1000	2960	87	80-120	

Matrix Spike Percent Recovery [D] = 100*(C-A)/B

Relative Percent Difference [E] = 200*(C-A)/(C+B)

All Results are based on MDL and Validated for QC Purposes

BRL - Below Reporting Limit



Sample Duplicate Recovery



Project Name: Oxy USA

Work Order #: 332317

Lab Batch #: 758598
Date Analyzed: 05/11/2009
QC- Sample ID: 332150-001 D
Reporting Units: mg/kg

Date Prepared: 05/11/2009
Batch #: 1

Project ID: State DW # 4
Analyst: LATCOR
Matrix: Soil

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Anions by EPA 300	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Chloride	2090	2040	2	20	

Lab Batch #: 758550
Date Analyzed: 05/12/2009
QC- Sample ID: 332317-001 D
Reporting Units: %

Date Prepared: 05/12/2009
Batch #: 1

Analyst: BEV
Matrix: Soil

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Percent Moisture	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Percent Moisture	ND	ND	NC	20	

Lab Batch #: 758877
Date Analyzed: 05/14/2009
QC- Sample ID: 332238-004 D
Reporting Units: mg/kg

Date Prepared: 05/13/2009
Batch #: 1

Analyst: BHW
Matrix: Soil

SAMPLE / SAMPLE DUPLICATE RECOVERY					
TPH By SW8015 Mod	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
C6-C12 Gasoline Range Hydrocarbons	ND	ND	NC	35	
C12-C28 Diesel Range Hydrocarbons	194	191	2	35	
C28-C35 Oil Range Hydrocarbons	ND	ND	NC	35	

Spike Relative Difference RPD $200 * |(B-A)/(B+A)|$
All Results are based on MDL and validated for QC purposes.
BRL - Below Reporting Limit

Environmental Lab of Texas

Variance/ Corrective Action Report- Sample Log-In

Client Elke Environmental
 Date/ Time 5/11/09 11:58
 Lab ID # 332317
 Initials AL

Sample Receipt Checklist

	Yes	No	Client Initials
#1 Temperature of container/ cooler?	<input checked="" type="checkbox"/>	No	6 °C
#2 Shipping container in good condition?	<input checked="" type="checkbox"/>	No	
#3 Custody Seals intact on shipping container/ cooler?	<input checked="" type="checkbox"/>	No	(Not Present)
#4 Custody Seals intact on sample bottles/ container?	<input checked="" type="checkbox"/>	No	Not Present
#5 Chain of Custody present?	<input checked="" type="checkbox"/>	No	
#6 Sample instructions complete of Chain of Custody?	<input checked="" type="checkbox"/>	No	
#7 Chain of Custody signed when relinquished/ received?	<input checked="" type="checkbox"/>	No	
#8 Chain of Custody agrees with sample label(s)?	<input checked="" type="checkbox"/>	No	ID written on Cont / Lid
#9 Container label(s) legible and intact?	<input checked="" type="checkbox"/>	No	Not Applicable
#10 Sample matrix/ properties agree with Chain of Custody?	<input checked="" type="checkbox"/>	No	
#11 Containers supplied by ELOT?	<input checked="" type="checkbox"/>	No	
#12 Samples in proper container/ bottle?	<input checked="" type="checkbox"/>	No	See Below
#13 Samples properly preserved?	<input checked="" type="checkbox"/>	No	See Below
#14 Sample bottles intact?	<input checked="" type="checkbox"/>	No	
#15 Preservations documented on Chain of Custody?	<input checked="" type="checkbox"/>	No	
#16 Containers documented on Chain of Custody?	<input checked="" type="checkbox"/>	No	
#17 Sufficient sample amount for indicated test(s)?	<input checked="" type="checkbox"/>	No	See Below
#18 All samples received within sufficient hold time?	<input checked="" type="checkbox"/>	No	See Below
#19 Subcontract of sample(s)?	<input checked="" type="checkbox"/>	No	(Not Applicable)
#20 VOC samples have zero headspace?	<input checked="" type="checkbox"/>	No	Not Applicable

Variance Documentation

Contact _____ Contacted by _____ Date/ Time _____

Regarding _____

Corrective Action Taken: _____

- Check all that Apply
- See attached e-mail/ fax
 - Client understands and would like to proceed with analysis
 - Cooling process had begun shortly after sampling event

Analytical Report 332661

for

Elke Environmental, Inc.

Project Manager: Logan Anderson

Oxy USA

State DW # 4 Spill

20-MAY-09



12600 West I-20 East Odessa, Texas 79765

Texas certification numbers:

Houston, TX T104704215-08B-TX - Odessa/Midland, TX T104704400-08-TX

Florida certification numbers:

Houston, TX E871002 - Miami, FL E86678 - Tampa, FL E86675

Miramar, FL E86349

Norcross(Atlanta), GA E87429

South Carolina certification numbers:

Norcross(Atlanta), GA 98015

North Carolina certification numbers:

Norcross(Atlanta), GA 483

Houston - Dallas - San Antonio - Tampa - Miami - Latin America

Midland - Corpus Christi - Atlanta



20-MAY-09

Project Manager: **Logan Anderson**
Elke Environmental, Inc.
4817 Andrews Hwy
P.O. Box 14167 Odessa, tx 79768
Odessa, TX 79762

Reference: XENCO Report No: **332661**
Oxy USA
Project Address:

Logan Anderson:

We are reporting to you the results of the analyses performed on the samples received under the project name referenced above and identified with the XENCO Report Number 332661. All results being reported under this Report Number apply to the samples analyzed and properly identified with a Laboratory ID number. Subcontracted analyses are identified in this report with either the NELAC certification number of the subcontract lab in the analyst ID field, or the complete subcontracted report attached to this report.

Unless otherwise noted in a Case Narrative, all data reported in this Analytical Report are in compliance with NELAC standards. Estimation of data uncertainty for this report is found in the quality control section of this report unless otherwise noted. Should insufficient sample be provided to the laboratory to meet the method and NELAC Matrix Duplicate and Matrix Spike requirements, then the data will be analyzed, evaluated and reported using all other available quality control measures.

The validity and integrity of this report will remain intact as long as it is accompanied by this letter and reproduced in full, unless written approval is granted by XENCO Laboratories. This report will be filed for at least 5 years in our archives after which time it will be destroyed without further notice, unless otherwise arranged with you. The samples received, and described as recorded in Report No. 332661 will be filed for 60 days, and after that time they will be properly disposed without further notice, unless otherwise arranged with you. We reserve the right to return to you any unused samples, extracts or solutions related to them if we consider so necessary (e.g., samples identified as hazardous waste, sample sizes exceeding analytical standard practices, controlled substances under regulated protocols, etc).

We thank you for selecting XENCO Laboratories to serve your analytical needs. If you have any questions concerning this report, please feel free to contact us at any time.

Respectfully,

Brent Barron, II

Odessa Laboratory Manager

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Sample Cross Reference 332661



Elke Environmental, Inc., Odessa, TX

Oxy USA

Sample Id	Matrix	Date Collected	Sample Depth	Lab Sample Id
TP # 1 @ 67'	S	May-11-09 10:50	0 - 67 ft	332661-001
TP # 2 @ 72'	S	May-12-09 09:25	0 - 72 ft	332661-002
TP # 3 @ 72'	S	May-12-09 11:20	0 - 72 ft	332661-003
TP # 4 @ 72'	S	May-12-09 13:40	0 - 72 ft	332661-004



Certificate of Analysis Summary 332661

Elke Environmental, Inc., Odessa, TX

Project Name: Oxy USA



Project Id: State DW # 4 Spill

Contact: Logan Anderson

Project Location:

Date Received in Lab: Wed May-13-09 04:50 pm

Report Date: 20-MAY-09

Project Manager: Brent Barron, II

<i>Analysis Requested</i>	<i>Lab Id:</i>	332661-001	332661-002	332661-003	332661-004		
	<i>Field Id:</i>	TP # 1 @ 67'	TP # 2 @ 72'	TP # 3 @ 72'	TP # 4 @ 72'		
	<i>Depth:</i>	0-67 ft	0-72 ft	0-72 ft	0-72 ft		
	<i>Matrix:</i>	SOIL	SOIL	SOIL	SOIL		
	<i>Sampled:</i>	May-11-09 10:50	May-12-09 09:25	May-12-09 11:20	May-12-09 13:40		
Anions by EPA 300	<i>Extracted:</i>						
	<i>Analyzed:</i>	May-14-09 14:10	May-14-09 14:10	May-14-09 14:10	May-14-09 14:10		
	<i>Units/RL:</i>	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL		
Chloride		88.9 5.25	5.77 5.02	8.51 5.35	7.53 5.02		
Percent Moisture	<i>Extracted:</i>						
	<i>Analyzed:</i>	May-15-09 08:50	May-15-09 08:50	May-15-09 08:50	May-15-09 08:50		
	<i>Units/RL:</i>	% RL	% RL	% RL	% RL		
Percent Moisture		4.74 1.00	ND 1.00	6.48 1.00	ND 1.00		
TPH By SW8015 Mod	<i>Extracted:</i>	May-18-09 12:04	May-18-09 12:04	May-18-09 12:04	May-18-09 12:04		
	<i>Analyzed:</i>	May-18-09 15:17	May-18-09 15:42	May-18-09 16:07	May-18-09 16:32		
	<i>Units/RL:</i>	mg/kg RL	mg/kg RL	mg/kg RL	mg/kg RL		
C6-C12 Gasoline Range Hydrocarbons		ND 15.7	ND 15.1	ND 16.0	ND 15.1		
C12-C28 Diesel Range Hydrocarbons		ND 15.7	ND 15.1	ND 16.0	ND 15.1		
C28-C35 Oil Range Hydrocarbons		ND 15.7	ND 15.1	ND 16.0	ND 15.1		
Total TPH		ND 15.7	ND 15.1	ND 16.0	ND 15.1		

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 Brent Barron
 Odessa Laboratory Director



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- B** A target analyte or common laboratory contaminant was identified in the method blank. Its presence indicates possible field or laboratory contamination.
- D** The sample(s) were diluted due to targets detected over the highest point of the calibration curve, or due to matrix interference. Dilution factors are included in the final results. The result is from a diluted sample.
- E** The data exceeds the upper calibration limit; therefore, the concentration is reported as estimated.
- F** RPD exceeded lab control limits.
- J** The target analyte was positively identified below the MQL and above the SQL.
- U** Analyte was not detected.
- L** The LCS data for this analytical batch was reported below the laboratory control limits for this analyte. The department supervisor and QA Director reviewed data. The samples were either reanalyzed or flagged as estimated concentrations.
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- K** Sample analyzed outside of recommended hold time.
- JN** A combination of the "N" and the "J" qualifier. The analysis indicates that the analyte is "tentatively identified" and the associated numerical value may not be consistent with the amount actually present in the environmental sample.
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5332 Blackberry Drive, San Antonio TX 78238	(210) 509-3334	(210) 509-3335
2505 North Falkenburg Rd, Tampa, FL 33619	(813) 620-2000	(813) 620-2033
5757 NW 158th St, Miami Lakcs, FL 33014	(305) 823-8500	(305) 823-8555
12600 West I-20 East, Odessa, TX 79765	(432) 563-1800	(432) 563-1713
842 Cantwell Lane, Corpus Christi, TX 78408	(361) 884-0371	(361) 884-9116



Form 2 - Surrogate Recoveries

Project Name: Oxy USA

Work Orders : 332661,

Project ID: State DW # 4 Spill

Lab Batch #: 759347

Sample: 530230-1-BKS / BKS

Batch: 1 Matrix: Solid

Units: mg/kg		Date Analyzed: 05/18/09 12:24	SURROGATE RECOVERY STUDY			
TPH By SW8015 Mod		Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes						
1-Chlorooctane		106	100	106	70-135	
o-Terphenyl		46.2	50.0	92	70-135	

Lab Batch #: 759347

Sample: 530230-1-BSD / BSD

Batch: 1 Matrix: Solid

Units: mg/kg		Date Analyzed: 05/18/09 12:48	SURROGATE RECOVERY STUDY			
TPH By SW8015 Mod		Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes						
1-Chlorooctane		104	100	104	70-135	
o-Terphenyl		45.3	50.0	91	70-135	

Lab Batch #: 759347

Sample: 530230-1-BLK / BLK

Batch: 1 Matrix: Solid

Units: mg/kg		Date Analyzed: 05/18/09 13:13	SURROGATE RECOVERY STUDY			
TPH By SW8015 Mod		Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes						
1-Chlorooctane		91.0	100	91	70-135	
o-Terphenyl		51.2	50.0	102	70-135	

Lab Batch #: 759347

Sample: 332661-001 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg		Date Analyzed: 05/18/09 15:17	SURROGATE RECOVERY STUDY			
TPH By SW8015 Mod		Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes						
1-Chlorooctane		88.1	100	88	70-135	
o-Terphenyl		49.7	50.0	99	70-135	

Lab Batch #: 759347

Sample: 332661-002 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg		Date Analyzed: 05/18/09 15:42	SURROGATE RECOVERY STUDY			
TPH By SW8015 Mod		Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes						
1-Chlorooctane		87.6	100	88	70-135	
o-Terphenyl		47.1	50.0	94	70-135	

* Surrogate outside of Laboratory QC limits

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = 100 * A / B

All results are based on MDL and validated for QC purposes.



Form 2 - Surrogate Recoveries

Project Name: Oxy USA

Work Orders : 332661,

Project ID: State DW # 4 Spill

Lab Batch #: 759347

Sample: 332661-003 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/18/09 16:07

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	86.6	100	87	70-135	
o-Terphenyl	49.2	50.0	98	70-135	

Lab Batch #: 759347

Sample: 332661-004 / SMP

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/18/09 16:32

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	86.9	100	87	70-135	
o-Terphenyl	46.9	50.0	94	70-135	

Lab Batch #: 759347

Sample: 332562-004 S / MS

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/18/09 20:17

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	103	100	103	70-135	
o-Terphenyl	45.8	50.0	92	70-135	

Lab Batch #: 759347

Sample: 332562-004 SD / MSD

Batch: 1 Matrix: Soil

Units: mg/kg

Date Analyzed: 05/18/09 20:42

SURROGATE RECOVERY STUDY					
TPH By SW8015 Mod	Amount Found [A]	True Amount [B]	Recovery %R [D]	Control Limits %R	Flags
Analytes					
1-Chlorooctane	106	100	106	70-135	
o-Terphenyl	45.7	50.0	91	70-135	

* Surrogate outside of Laboratory QC limits

** Surrogates outside limits; data and surrogates confirmed by reanalysis

*** Poor recoveries due to dilution

Surrogate Recovery [D] = 100 * A / B

All results are based on MDL and validated for QC purposes.



Blank Spike Recovery



Project Name: Oxy USA

Work Order #: 332661

Project ID:

State DW # 4 Spill

Lab Batch #: 759013

Sample: 759013-1-BKS

Matrix: Solid

Date Analyzed: 05/14/2009

Date Prepared: 05/14/2009

Analyst: BEV

Reporting Units: mg/kg

Batch #: 1

BLANK /BLANK SPIKE RECOVERY STUDY

Anions by EPA 300 Analytes	Blank Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Control Limits %R	Flags
Chloride	ND	10.0	9.40	94	90-110	

Blank Spike Recovery [D] = 100*[C]/[B]

All results are based on MDL and validated for QC purposes.

BRL - Below Reporting Limit



BS / BSD Recoveries



Project Name: Oxy USA

Work Order #: 332661

Analyst: BHW

Date Prepared: 05/18/2009

Project ID: State DW # 4 Spill

Date Analyzed: 05/18/2009

Lab Batch ID: 759347

Sample: 530230-1-BKS

Batch #: 1

Matrix: Solid

Units: mg/kg

BLANK /BLANK SPIKE / BLANK SPIKE DUPLICATE RECOVERY STUDY

TPH By SW8015 Mod	Blank Sample Result [A]	Spike Added [B]	Blank Spike Result [C]	Blank Spike %R [D]	Spike Added [E]	Blank Spike Duplicate Result [F]	Blk. Spk Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
Analytes											
C6-C12 Gasoline Range Hydrocarbons	ND	1000	1070	107	1000	1080	108	1	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1000	1030	103	1000	1030	103	0	70-135	35	

Relative Percent Difference RPD = $200 * (C-F) / (C+F)$

Blank Spike Recovery [D] = $100 * (C) / [B]$

Blank Spike Duplicate Recovery [G] = $100 * (F) / [E]$

All results are based on MDL and Validated for QC Purposes



Form 3 - MS Recoveries



Project Name: Oxy USA

Work Order #: 332661

Lab Batch #: 759013

Project ID: State DW # 4 Spill

Date Analyzed: 05/14/2009

Date Prepared: 05/14/2009

Analyst: BEV

QC- Sample ID: 332660-001 S

Batch #: 1

Matrix: Soil

Reporting Units: mg/kg

MATRIX / MATRIX SPIKE RECOVERY STUDY

Inorganic Anions by EPA 300	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	%R [D]	Control Limits %R	Flag
Analytes						
Chloride	5290	2190	7270	90	80-120	

Matrix Spike Percent Recovery [D] = $100 \cdot (C-A)/B$
 Relative Percent Difference [E] = $200 \cdot (C-A)/(C+B)$
 All Results are based on MDL and Validated for QC Purposes

BRL - Below Reporting Limit



Form 3 - MS / MSD Recoveries



Project Name: Oxy USA

Work Order #: 332661

Project ID: State DW # 4 Spill

Lab Batch ID: 759347

QC- Sample ID: 332562-004 S

Batch #: 1 Matrix: Soil

Date Analyzed: 05/18/2009

Date Prepared: 05/18/2009

Analyst: BHW

Reporting Units: mg/kg

TPH By SW8015 Mod Analytes	MATRIX SPIKE / MATRIX SPIKE DUPLICATE RECOVERY STUDY										
	Parent Sample Result [A]	Spike Added [B]	Spiked Sample Result [C]	Spiked Sample %R [D]	Spike Added [E]	Duplicate Spiked Sample Result [F]	Spiked Dup. %R [G]	RPD %	Control Limits %R	Control Limits %RPD	Flag
C6-C12 Gasoline Range Hydrocarbons	ND	1010	1010	100	1010	1020	101	1	70-135	35	
C12-C28 Diesel Range Hydrocarbons	ND	1010	988	98	1010	1010	100	2	70-135	35	

Matrix Spike Percent Recovery [D] = 100*(C-A)/B
Relative Percent Difference RPD = 200*|(C-F)/(C+F)|

Matrix Spike Duplicate Percent Recovery [G] = 100*(F-A)/E

ND = Not Detected, J = Present Below Reporting Limit, B = Present in Blank, NR = Not Requested, I = Interference, NA = Not Applicable
N = See Narrative, EQL = Estimated Quantitation Limit



Sample Duplicate Recovery



Project Name: Oxy USA

Work Order #: 332661

Lab Batch #: 759013

Project ID: State DW # 4 Spill

Date Analyzed: 05/14/2009

Date Prepared: 05/14/2009

Analyst: BEV

QC- Sample ID: 332660-001 D

Batch #: 1

Matrix: Soil

Reporting Units: mg/kg

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Anions by EPA 300	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Chloride	5290	5070	4	20	

Lab Batch #: 759005

Date Prepared: 05/15/2009

Analyst: BEV

Date Analyzed: 05/15/2009

QC- Sample ID: 332661-001 D

Batch #: 1

Matrix: Soil

Reporting Units: %

SAMPLE / SAMPLE DUPLICATE RECOVERY					
Percent Moisture	Parent Sample Result [A]	Sample Duplicate Result [B]	RPD	Control Limits %RPD	Flag
Analyte					
Percent Moisture	4.74	5.08	7	20	

Spike Relative Difference RPD $200 * |(B-A)/(B+A)|$
 All Results are based on MDL and validated for QC purposes.
 BRL - Below Reporting Limit

Environmental Lab of Texas
 Variance/ Corrective Action Report- Sample Log-In

Client Elke Env.
 Date/ Time 5.13.09 10:50
 Lab ID # 337661
 Initials al

Sample Receipt Checklist

	Yes	No	Client Initials
#1 Temperature of container/ cooler?	<input checked="" type="checkbox"/>		35 °C
#2 Shipping container in good condition?	<input checked="" type="checkbox"/>		
#3 Custody Seals intact on shipping container/ cooler?	<input checked="" type="checkbox"/>		<Not Present>
#4 Custody Seals intact on sample bottles/ container?	<input checked="" type="checkbox"/>		Not Present
#5 Chain of Custody present?	<input checked="" type="checkbox"/>		
#6 Sample instructions complete of Chain of Custody?	<input checked="" type="checkbox"/>		
#7 Chain of Custody signed when relinquished/ received?	<input checked="" type="checkbox"/>		
#8 Chain of Custody agrees with sample label(s)?	<input checked="" type="checkbox"/>		ID written on Cont / Lid
#9 Container label(s) legible and intact?	<input checked="" type="checkbox"/>		Not Applicable
#10 Sample matrix/ properties agree with Chain of Custody?	<input checked="" type="checkbox"/>		
#11 Containers supplied by ELOT?	<input checked="" type="checkbox"/>		
#12 Samples in proper container/ bottle?	<input checked="" type="checkbox"/>		See Below
#13 Samples properly preserved?	<input checked="" type="checkbox"/>		See Below
#14 Sample bottles intact?	<input checked="" type="checkbox"/>		
#15 Preservations documented on Chain of Custody?	<input checked="" type="checkbox"/>		
#16 Containers documented on Chain of Custody?	<input checked="" type="checkbox"/>		
#17 Sufficient sample amount for indicated test(s)?	<input checked="" type="checkbox"/>		See Below
#18 All samples received within sufficient hold time?	<input checked="" type="checkbox"/>		See Below
#19 Subcontract of sample(s)?	<input checked="" type="checkbox"/>		<Not Applicable>
#20 VOC samples have zero headspace?	<input checked="" type="checkbox"/>		Not Applicable

Variance Documentation

Contact _____ Contacted by: _____ Date/ Time: _____

Regarding: _____

Corrective Action Taken:

- Check all that Apply
- See attached e-mail/ fax
 - Client understands and would like to proceed with analysis
 - Cooling process had begun shortly after sampling event