MARTIN YATES, III 1912-1985

FRANK W. YATES 1936-1986

> S.P. YATES 1914-2008



105 SOUTH FOURTH STREET ARTESIA, NEW MEXICO 88210-2118 TELEPHONE (575) 748-1471

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PRESIDENT

JOHN A. YATES JR. ASSISTANT TO THE PRESIDENT

JAMES S. BROWN CHIEF OPERATING OFFICER

JOHN D. PERINI CHIEF FINANCIAL OFFICER

RECEIVED MAY 24 2010 NMOCD ARTESIA

May 24, 2010

Mr. Mike Bratcher NMOCD District II 1301 W. Grand Ave. Artesia, NM 88210

RE:

Compromise SWD #1 10/12/2009 Release 30-015-25665 Section 30, T18S-R27E

Eddy County, New Mexico

Dear Mr. Bratcher.

Enclosed please find a Form C-141, Final Report for the above captioned site regarding the release on October 12, 2009 (55 B/PW with 45 B/PW recovered), south end of the battery (inside the berm). A vacuum truck picked up remaining produced water released and the pipeline was from a broken nipple on the discharge side of the transfer pump. Impacted soils were excavated to a depth of three (3) feet and taken to an NMOCD approved facility. Samples were taken on April 22, 2010 and May 7, 2010 and sent to an NMOCD approved laboratory (enclosed results and sample diagram). Site ranking is twenty (20), with the depth to ground water < 50' (approximately 35'). Based on the analytical results showing decreasing chlorides, TPH & BTEX are non-detect, Yates Petroleum Corporation requests closure.

Thank you.

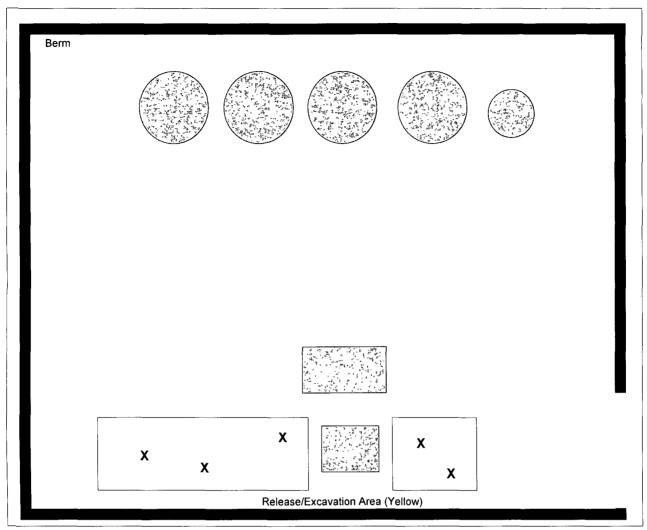
YATES PETROLEUM CORPORATION

Robert Asher

**Environmental Regulatory Agent** 

Enclosure(s) /rca





| Sample ID   | Sample Date | Sample Type | Depth (BSL) | BTEX             | GRO | DRO  | TPH TOTAL | Chlorides |
|-------------|-------------|-------------|-------------|------------------|-----|------|-----------|-----------|
| GS/Comp-001 | 4/12/2010   | Grab/Auger  | 3'          | ND               | ND  | ND   | ND        | 1670      |
| GS/Comp-002 | 4/12/2010   | Grab/Auger  | 4'          | ND               | ND  | ND   | ND        | 460       |
| Sample ID   | Sample Date | Sample Type | Depth (BSL) | BTEX             | GRO | DRO  | TPH TOTAL | Chlorides |
| GS/Comp-003 | 5/3/2010    | Grab/Auger  | 5'          | r t <sub>n</sub> |     | H 11 | , ,       | 142       |
| GS/Comp-004 | 5/3/2010    | Grab/Auger  | 6'          | 1 1 1 1          |     |      | - , -     | 179       |

**Site Ranking is Twenty (20).** Depth to Ground Water <50' (approx. 35'). All results are ppm. Chloride samples for documentation.



**Compromise SWD #1 Battery** 

30-015-25665

**Section 30, T18S-R27E** 

**Eddy County, NM** 

**SAMPLE DIAGRAM (Not to Scale)** 

Xenco Report #: 369448 & 369451 Report Date: 4/22/2010 Xenco Report #: 369448 & 369451

Report Date: 4/22/2010

Prepared by Robert Asher Environmental Regulatory Agent

# **Analytical Report 371457**

for-

# **Yates Petroleum Corporation**

Project Manager: Robert Asher

Compromise SWD # 1 Tank Battery 30-015-25665

07-MAY-10





12600 West I-20 East Odessa, Texas 79765

Xenco-Houston (EPA Lab code: TX00122):

Texas (T104704215-TX), Arizona (AZ0738), Arkansas (08-039-0), Connecticut (PH-0102), Florida (E871002) Illinois (002082), Indiana (C-TX-02), Iowa (392), Kansas (E-10380), Kentucky (45), Louisiana (03054) New Hampshire (297408), New Jersey (TX007), New York (11763), Oklahoma (9218), Pennsylvania (68-03610) Rhode Island (LAO00312), USDA (S-44102)

Xenco-Atlanta (EPA Lab Code: GA00046): Florida (E87429), North Carolina (483), South Carolina (98015), Utah (AALI1), West Virginia (362), Kentucky (85) Louisiana (04176), USDA (P330-07-00105)

Xenco-Miami (EPA Lab code: FL01152): Florida (E86678), Maryland (330)

Xenco-Tampa Mobile (EPA Lab code: FL01212): Florida (E84900)

Xenco-Odessa (EPA Lab code: TX00158): Texas (T104704400-TX)

Xenco-Dallas (EPA Lab code: TX01468): Texas (T104704295-TX)

Xenco-Corpus Christi (EPA Lab code: TX02613): Texas (T104704370)

Xenco-Boca Raton (EPA Lab Code: FL00449):

Florida(E86240),South Carolina(96031001), Louisiana(04154), Georgia(917)

North Carolina(444), Texas(T104704468-TX), Illinois(002295)





07-MAY-10

Project Manager: Robert Asher Yates Petroleum Corporation 105 South Fourth St. Artesia, NM 88210

Reference: XENCO Report No: 371457

Compromise SWD # 1 Tank Battery

Project Address: Eddy County

#### Robert Asher:

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 371457. 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. 371457 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 371457



# Yates Petroleum Corporation, Artesia, NM

Compromise SWD # 1 Tank Battery

| Sample Id   | Matrix | Date Collected  | Sample Depth | Lab Sample Id |
|-------------|--------|-----------------|--------------|---------------|
| GS/Comp-003 | S      | May-03-10 14:05 | 3 - 3 ft     | 371457-001    |
| GS/Comp-004 | S      | May-03-10 14 35 | 4 - 4 ft     | 371457-002    |



### CASE NARRATIVE

Client Name: Yates Petroleum Corporation Project Name: Compromise SWD # 1 Tank Battery



Project ID.

30-015-25665

Work Order Number: 371457

Report Date 07-MAY-10 Date Received: 05/05/2010

Sample receipt non conformances and Comments:

None

Sample receipt Non Conformances and Comments per Sample:

None

Analytical Non Conformances and Comments:

Batch: LBA-805324 Percent Moisture

None

Batch: LBA-805339 Inorganic Anions by EPA 300

None

Final Ver 1.000



# Certificate of Analysis Summary 371457

### Yates Petroleum Corporation, Artesia, NM

Project Name: Compromise SWD # 1 Tank Battery

Project Id: 30-015-25665

Project Location: Eddy County

Contact: Robert Asher

Date Received in Lab: Wed May-05-10 09:35 am

Report Date: 07-MAY-10

Project Manager: Brent Barron, II.

|                             | Lab Id:    | 371457-001      | 371457-002      |  |
|-----------------------------|------------|-----------------|-----------------|--|
| Analysis Donusated          | Field Id:  | GS/Comp-003     | GS/Comp-004     |  |
| Analysis Requested          | Depth:     | 3-3 ft          | 4-4 ft          |  |
|                             | Matrix:    | SOIL            | SOIL            |  |
|                             | Sampled:   | May-03-10 14.05 | May-03-10 14:35 |  |
| Anions in Soil By EPA 300.0 | Extracted: |                 |                 |  |
|                             | Analyzed:  | May-05-10 14.45 | May-05-10 14 45 |  |
|                             | Units/RL:  | mg/kg RL        | mg/kg RL        |  |
| Chloride                    |            | 142 10.3        | 179 23.0        |  |
| Percent Moisture            | Extracted: |                 |                 |  |
|                             | Analyzed:  | May-05-10 17.00 | May-05-10 17:00 |  |
|                             | Units/RL:  | % RL            | % RL            |  |
| Percent Moisture            |            | 18 7 1.00       | 8 86 1 00       |  |

Company of the second State of the state

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 XFNCO 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.

Houston - Dallas - San Antonio - Atlanta - Tampa - Boca Raton - Latin America - Odessa - Corpus Christi

Brent Barron, II Odessa Laboratory Manager

Final Ver. 1.000



### 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.

5.4 61

- 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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Certified and approved by numerous States and Agencies.

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|                                             | Phone          | Fax            |
|---------------------------------------------|----------------|----------------|
| 4143 Greenbriar Dr. Stafford, Tx 77477      | (281) 240-4200 | (281) 240-4280 |
| 9701 Harry Hines Blvd , Dallas, TX 75220    | (214) 902 0300 | (214) 351-9139 |
| 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 |

#### CHAIN OF CUSTODY RECORD AND ANALYSIS REQUEST

12600 West I-20 East Odessa, Texas 79765 Phone: 432-563-1800 Fax: 432-563-1713

|                      | Project Manager Robert Ash | er                                      |                 |              |                 | · · · · · · · · · · · · · · · · · · · |                | ····                  |           |                  |          |             |          |                                               |                 |              | Pr                                                        | olec       | t Na                 | me:                     | COI                           | при         | ornis                                    | <u>e 5</u>    | VVD                          | #1              | <u>ran</u>    | KB                     | atter    | <u>Y</u>                               |              |
|----------------------|----------------------------|-----------------------------------------|-----------------|--------------|-----------------|---------------------------------------|----------------|-----------------------|-----------|------------------|----------|-------------|----------|-----------------------------------------------|-----------------|--------------|-----------------------------------------------------------|------------|----------------------|-------------------------|-------------------------------|-------------|------------------------------------------|---------------|------------------------------|-----------------|---------------|------------------------|----------|----------------------------------------|--------------|
|                      | Company Name Yates Petro   | oleum Corporat                          | ion             | <del></del>  |                 |                                       |                |                       |           |                  |          |             |          |                                               |                 |              |                                                           | P          | rojec                | :t #:                   | 30-                           | 015         | -256                                     | i65           |                              |                 |               |                        |          |                                        |              |
|                      | Company Address. 105 South | 4th Street                              |                 |              |                 |                                       |                |                       |           |                  |          |             |          |                                               |                 | _            | 1                                                         | Proj       | ect L                | oc:                     | Edd                           | у Со        | unty                                     |               |                              |                 |               |                        |          | _                                      |              |
|                      | City/State/Zip Artesia, NM | 88210                                   |                 |              |                 |                                       |                | ì                     |           |                  |          |             |          |                                               |                 | _            |                                                           |            | P                    | D #:                    | 1056                          | 532         |                                          |               |                              |                 |               |                        |          |                                        |              |
|                      | Telephone No 575-748-42    | 17                                      |                 |              |                 | Fax No:                               |                | 575                   | 5-74      | 8-46             | 62       |             |          |                                               |                 | <br>F        | Repor                                                     | rt Fo      | rma                  | t: İ                    | x                             | Stan        | dard                                     |               |                              | TR              | RP            |                        |          |                                        |              |
|                      | Sampler Signature          | 11                                      | <u>e</u>        |              |                 | e-mail:                               |                |                       |           |                  |          | en.         | etro     | oleu                                          | m c             | -            |                                                           | • • •      |                      |                         |                               |             |                                          |               | -                            |                 | • • •         | ٠                      |          | ,, DC                                  |              |
| [d. b                |                            |                                         |                 | •            |                 | C man.                                |                | <u>~</u>              | <u>Du</u> | <u></u>          | <u> </u> | , <u>up</u> | <u> </u> | 3100                                          |                 | <u>,0111</u> |                                                           |            |                      |                         |                               |             | Anai                                     | yze           | For.                         |                 |               |                        |          | T                                      | 7            |
| (lab use             | 2711/67                    |                                         |                 |              |                 |                                       |                |                       |           |                  |          |             |          |                                               |                 |              |                                                           |            |                      |                         | TOT                           |             |                                          | +             | +                            | 1               |               |                        |          | E E                                    |              |
| ORDER                |                            |                                         | <del></del>     | 1            |                 |                                       |                |                       | _         | rese             | rvatio   | n & A       | of C     | ontaine                                       | ers             | M.           | atnx                                                      | 8015B      |                      |                         |                               | - [-        | Se                                       | T             | 760                          | 1               |               |                        |          | 8,                                     | L            |
| LAB # (lab use only) | FIELD CODE                 |                                         | Beginning Depth | Ending Depth | Date Sampled    | Time Sampled                          | Field Filtered | Total # of Containers | Sc.       | HNO <sub>3</sub> | HCI      | H,50,       | HOEN     | Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub> | Other (Specify) |              | GW = Groundwater S=Sou/Solid NP=Nor-Potable Specify Other | 4181 8015M | TPH: TX 1005 TX 1006 | Calions (Ca, Mg, Na, K) | Anions (Cl., SO4, Alkalinlty) |             | Metals As Ag Ba Cd Cr Pb Hg<br>Volatiles | Semivolatiles | BTEX 80218/5030 or BTEX 8260 | RCI             | NORM          | Chlondes               |          | RUSH TAT (Pre-Schedule) 24, 48, 72 hrs | Standard TAT |
| 01                   | GS/Comp-003                |                                         | 3'              | 3'           | 5/3/2010        | 2:05 PM                               |                | 1                     | NΑ        |                  |          |             | $\perp$  |                                               | _               |              | s                                                         |            |                      |                         |                               |             |                                          |               |                              |                 |               | x                      |          |                                        | Х            |
| 02                   | GS/Comp-004                |                                         | 4'              | 4'           | 5/3/2010        | 2:35 PM                               | _              | 1                     | NA        | _                | 4        | _           | _        | _ _                                           | _               |              | <u>s</u>                                                  | <u> </u>   |                      | _                       | _                             | 1           | _                                        | _             | ↓_                           |                 |               | x                      |          |                                        | X            |
|                      |                            | *************************************** |                 |              |                 |                                       |                | _                     |           | 4                | $\dashv$ | $\dashv$    | 4        | -                                             | <del> </del>    |              |                                                           |            |                      | 4                       | 1                             | _           | -                                        | _             | <u> </u>                     |                 |               | $\bot$                 |          | 1                                      |              |
|                      |                            |                                         |                 |              |                 |                                       |                | _                     |           | -                | -        | -           | _        |                                               | ┼               |              |                                                           |            |                      | 4                       | _                             |             | - -                                      | ╀             | <b> </b>                     | $\vdash \dashv$ | $\dashv$      | $\dashv$               | - -      | _                                      | $\square$    |
|                      |                            | · · · · · · · · · · · · · · · · · · ·   |                 |              |                 |                                       | $\dashv$       | -                     | $\dashv$  | +                | $\dashv$ | $\dashv$    | +        | - -                                           | -               | -            |                                                           | _          |                      | +                       |                               | +           | +                                        | 4             | ╁╌                           |                 | $\dashv$      | -+                     | +        | <del> </del>                           | -            |
|                      |                            |                                         |                 |              |                 |                                       | -              | $\dashv$              | -         | $\dashv$         | $\dashv$ | $\dashv$    | $\dashv$ | +                                             | ┼               | <del> </del> |                                                           |            | -                    | -                       | $\dashv$                      | -           | +                                        | +-            | +-                           | $\vdash$        | $\dashv$      | -                      | +        | ╂╌                                     | H            |
|                      |                            |                                         |                 |              |                 |                                       | -              |                       | $\dashv$  | $\dashv$         | $\dashv$ | +           | +        |                                               | $\vdash$        | <b>-</b>     |                                                           | -          | -                    | $\dashv$                | $\dashv$                      | +           | +-                                       | +             | +                            | $\dashv$        | +             | +                      | +        | +                                      | H            |
|                      |                            |                                         |                 |              |                 |                                       | -              | ┼┤                    | $\dashv$  | $\dashv$         | +        | +           | +        | +-                                            | <del> </del>    |              |                                                           |            | $\dashv$             | $\dashv$                | +                             | +           | +                                        | +             | +                            | $\dashv$        | +             | +                      | +        | +                                      | H            |
|                      |                            |                                         |                 |              |                 |                                       |                | -                     | $\dashv$  | $\dashv$         | +        | +           | +        | +                                             | -               | -            |                                                           |            | $\dashv$             | +                       | +                             | +           | +                                        | $\vdash$      | +                            | +               | $\rightarrow$ | +                      | +        | 1-1                                    | $\vdash$     |
| Special in           | nstructions: Chlo          | orides only.                            | Plea            | se sh        | ow BTEX resu    | ılts as mg/kg.                        | Th             | ank                   | c yo      | u.               |          | 1_          | I        |                                               | l,              |              |                                                           | L1         | - 1                  | Samı                    | de C                          | onte        | omn<br>inen                              | Inte          |                              | <u> </u>        | <u>_</u>      |                        | 27       | N.                                     | 5            |
| Relinquish           | -                          | Date                                    | Tin             | - 1          | Received by.    |                                       |                |                       |           |                  |          |             |          |                                               | Da              | te           | T                                                         | Time       |                      | abe                     | s on                          | con         | taine                                    | urfa)         |                              | :<br>(e)        | •             | - <b>X</b>             | 3:17     | N.                                     | $\{ \mid \}$ |
| Robert Asi           |                            | 05/04/10<br>Data                        | 2 58            |              | Destrod         |                                       |                | :<br><del></del> -    |           |                  |          |             |          |                                               | Da              | to.          | 4_                                                        | Time       | 9                    | Shate                   | rdy a                         | eals        | on c                                     | ploc          | r(8)                         | <i>₹</i>        |               |                        | <b>)</b> | N.                                     |              |
| Relinquish           | ed by                      | Date                                    | Tin             | ne           | Received by     | -                                     |                |                       |           |                  |          |             |          |                                               | υa              | ıe           |                                                           | нпе        | J                    | b                       | v Sai                         | nnlai       | Deliv<br>r/Che                           | nt Re         | 90.2                         | DHL             | זית           | ب <del>لا</del><br>کار | ·<br>·   | N<br>N                                 |              |
| Relinquish           | ed by CARX                 | Date                                    | Tin             | ne           | Received by ELC | T. andr                               | a              |                       | P         | 21               | n        |             |          | 5                                             | Da              | ie<br>-10    | ١.,                                                       | Time       |                      | Γemp                    | y Col<br>eral                 | UZ<br>ure ( | Jpon                                     | 95<br>Rec     | s<br>>S<br>cerpt:            | JNL             | Œ             | edEx<br>/.(            |          | ne Sta<br>°C                           | 3.           |
|                      |                            |                                         |                 |              |                 |                                       |                |                       |           |                  |          |             |          |                                               |                 |              |                                                           |            |                      |                         |                               |             |                                          |               |                              |                 |               |                        |          |                                        |              |

| Variance/ Corrective Action Re                                                                         | port- Sampl | e Log-Ir | ٦                        |          |
|--------------------------------------------------------------------------------------------------------|-------------|----------|--------------------------|----------|
| client tates Petroleum.                                                                                |             |          |                          |          |
| Date/ Time 5 5 · 10 9 · 35                                                                             |             |          |                          |          |
| 2:-1110-7                                                                                              |             |          |                          |          |
| ab ID# 371457                                                                                          |             |          |                          |          |
| nitials AL                                                                                             |             |          |                          |          |
|                                                                                                        |             |          |                          |          |
| Sample Receipt                                                                                         | Checklist   |          |                          |          |
| T. T. Standard and and and and and and and and and an                                                  | 1 700       | Nic      | Client Initia            | als      |
| #1 Temperature of container/ cooler?                                                                   | Yes)        | No<br>No | 1.60 °C                  | $\dashv$ |
| #2 Shipping container in good condition? #3 Custody Seals intact on shipping container/ cooler?        | (Yes)       | No       | Not Present              | -        |
| Custody Seals intact on sample bottles/ container?                                                     | Yes         | No       | <del> </del>             | -        |
| to Chain of Custody present?                                                                           | (Yes)       | No       | Not Present              | $\dashv$ |
| *6 Sample instructions complete of Chain of Custody?                                                   | (Yes)       | No       |                          | $\dashv$ |
| the Chain of Custody signed when relinquished/ received?                                               | (Yes)       | No       |                          | $\dashv$ |
| †8 Chain of Custody signed when relanguished received:                                                 | (Yes)       | No       | ID written on Cont./ Lid | $\dashv$ |
| #9 Container label(s) legible and intact?                                                              | Yes         | No       | Not Applicable           | $\dashv$ |
| #10 Sample matrix/ properties agree with Chain of Custody?                                             | Yes         | No       | HOCAPPIICABLE            | $\dashv$ |
| #11 Containers supplied by ELOT?                                                                       | Yes         | No       |                          | $\dashv$ |
| #12 Samples in proper container/ bottle?                                                               | (Yes)       | No       | See Below                | -        |
| 13 Samples properly preserved?                                                                         | Yes         | No       | See Below                | -        |
| #14 Sample bottles intact?                                                                             | (Yes)       | No       | CCC BCION.               | -        |
| #15 Preservations documented on Chain of Custody?                                                      | Yes         | · No     |                          | $\dashv$ |
| #16 Containers documented on Chain of Custody?                                                         | (Yes)       | No       |                          | $\dashv$ |
| #17 Sufficient sample amount for indicated test(s)?                                                    | Yes         | No       | See Below                | 7        |
| #18 All samples received within sufficient hold time?                                                  | Yes         | No       | See Below                | $\dashv$ |
| #19 Subcontract of sample(s)?                                                                          | Yes         | No       | Not Applicable           | $\neg$   |
| #20 VOC samples have zero headspace?                                                                   | Yes         | No       | Not Applicable           | $\neg$   |
| Contact. Contacted by                                                                                  | mentation   |          | Date/ Time               |          |
| Regarding:                                                                                             |             |          |                          |          |
| Corrective Action Taken.                                                                               |             |          |                          |          |
|                                                                                                        |             |          |                          |          |
| Check all that Apply:  See attached e-mail/ fax  Client understands and wou  Cooling process had begun | •           |          | -                        |          |

# **Analytical Report 369451**

for

### **Yates Petroleum Corporation**

Project Manager: Robert Asher

Compromise SWD # 1 30-015-25665

22-APR-10



12600 West I-20 East Odessa, Texas 79765

Xenco-Houston (EPA Lab code: TX00122):

Texas (T104704215-TX), Arizona (AZ0738), Arkansas (08-039-0), Connecticut (PH-0102), Florida (E871002) Illinois (002082), Indiana (C-TX-02), Iowa (392), Kansas (E-10380), Kentucky (45), Louisiana (03054) New Hampshire (297408), New Jersey (TX007), New York (11763), Oklahoma (9218), Pennsylvania (68-03610) Rhode Island (LAO00312), USDA (S-44102)

Xenco-Atlanta (EPA Lab Code: GA00046): Florida (E87429), North Carolina (483), South Carolina (98015), Utah (AALII), West Virginia (362), Kentucky (85) Louisiana (04176), USDA (P330-07-00105)

Xenco-Miami (EPA Lab code: FL01152): Florida (E86678), Maryland (330)
Xenco-Tampa Mobile (EPA Lab code: FL01212): Florida (E84900)
Xenco-Odessa (EPA Lab code: TX00158): Texas (T104704400-TX)
Xenco-Dallas (EPA Lab code: TX01468): Texas (T104704295-TX)
Xenco-Corpus Christi (EPA Lab code: TX02613): Texas (T104704370)
Xenco-Boca Raton (EPA Lab Code: FL00449):
Florida(E86240),South Carolina(96031001), Louisiana(04154), Georgia(917)
North Carolina(444), Texas(T104704468-TX), Illinois(002295)



22-APR-10

Project Manager: Robert Asher Yates Petroleum Corporation 105 South Fourth St. Artesia, NM 88210

Reference: XENCO Report No: 369451

Compromise SWD # 1

Project Address. Eddy County

#### Robert Asher

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 369451. 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. 369451 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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Certified and approved by numerous States and Agencies. .

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# Sample Cross Reference 369451



### Yates Petroleum Corporation, Artesia, NM

Compromise SWD # 1

| Sample Id   | Matrix | Date Collected  | Sample Depth | Lab Sample Id |
|-------------|--------|-----------------|--------------|---------------|
| GS/Comp-001 | S      | Apr-12-10 14:28 | 1 - 1 ft     | 369451-001    |
| GS/Comp-002 | S      | Apr-12-10 14:57 | 2 - 2 ft     | 369451-002    |





Client Name: Yates Petroleum Corporation

Project Name: Compromise SWD # 1

Project ID:

30-015-25665

Work Order Number: 369451

Report Date: 22-APR-10

Date Received. 04/15/2010

Sample receipt non conformances and Comments:

None

Sample receipt Non Conformances and Comments per Sample:

None

Analytical Non Conformances and Comments:

Batch: LBA-803119 Percent Moisture

None

Batch: LBA-803123 Anions in Soil By EPA 300.0

None

Final Ver 1 000



### Certificate of Analysis Summary 369451

### Yates Petroleum Corporation, Artesia, NM

Project Name: Compromise SWD # 1

Project Id: 30-015-25665

Contact: Robert Asher

Project Location: Eddy County

Date Received in Lab: Thu Apr-15-10 10 45 am

Report Date: 22-APR-10

Project Manager: Brent Barron II

|                             |            |                 |                 | 1 Toject Wanager. Brent Batton, 11 |
|-----------------------------|------------|-----------------|-----------------|------------------------------------|
|                             | Lab Id:    | 369451-001      | 369451-002      |                                    |
| Auglusia Paguastad          | Field Id:  | GS/Comp-001     | GS/Comp-002     |                                    |
| Analysis Requested          | Depth:     | 1-1 ft          | 2-2 ft          |                                    |
|                             | Matrix:    | SOIL            | SOIL            |                                    |
|                             | Sampled:   | Apr-12-10 14:28 | Apr-12-10 14:57 |                                    |
| Anions in Soil By EPA 300.0 | Extracted: |                 |                 |                                    |
|                             | Analyzed:  | Apr-19-10 11:15 | Apr-19-10 11:15 |                                    |
|                             | Units/RL:  | mg/kg RL        | mg/kg RL        |                                    |
| Chloride                    |            | 1670 53 4       | 460 51.3        |                                    |
| Percent Moisture            | Extracted: |                 |                 |                                    |
|                             | Analyzed:  | Apr-16-10 17.00 | Apr-16-10 17:00 |                                    |
|                             | Units/RL:  | % RL            | % RL            |                                    |
| Percent Moisture            |            | 21.4 1.00       | 18 2 1.00       |                                    |

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

Houston - Dallas - San Antonio - Atlanta - Tampa - Boca Raton - Latin America - Odessa - Corpus Christi

Odessa Laboratory Manager



# 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.
- 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 validfor 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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Houston - Dallas - San Antonio - Corpus Christi - Midland/Odessa - Tampa - Miami - Latin America Phone Fax (281) 240-4200 (281) 240-4280 4143 Greenbriar Dr, Stafford, Tx 77477 (214) 902 0300 (214) 351-9139 9701 Harry Hines Blvd, Dallas, TX 75220 (210) 509-3334 (210) 509-3335 5332 Blackberry Drive, San Antonio TX 78238 (813) 620-2000 (813) 620-2033 2505 North Falkenburg Rd, Tampa, FL 33619 (305) 823-8500 (305) 823-8555 5757 NW 158th St, Miami Lakes, FL 33014 (432) 563-1800 (432) 563-1713 12600 West I-20 East, Odessa, TX 79765 (361) 884-0371 (361) 884-9116 842 Cantwell Lane, Corpus Christi, TX 78408

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Page 10 of 11

Final Ver 1 000

#### CHAIN OF CUSTODY RECORD AND ANALYSIS REQUEST

12600 West I-20 East Odessa, Texas 79765 Phone: 432-563-1800 Fax: 432-563-1713

|                      | Project Manager   | Robert Ash  | ner                                   |                                       |              |                 |              |                |                       | <u></u> -   |          |        |                                |       |                                               |                         |                  |    | Pro                          | ject        | Naı                 | me:                    | Co                           | mpr      | om                          | ise S                   | <u>3W</u> [  | <u>) #</u>           | 1       |           |                                        |             |                 |              |
|----------------------|-------------------|-------------|---------------------------------------|---------------------------------------|--------------|-----------------|--------------|----------------|-----------------------|-------------|----------|--------|--------------------------------|-------|-----------------------------------------------|-------------------------|------------------|----|------------------------------|-------------|---------------------|------------------------|------------------------------|----------|-----------------------------|-------------------------|--------------|----------------------|---------|-----------|----------------------------------------|-------------|-----------------|--------------|
|                      | Company Name      | Yates Petro | oleum Corpora                         | ation                                 |              |                 |              |                |                       |             |          |        |                                |       |                                               |                         |                  |    |                              | Pro         | ojec                | t #.                   | 30-                          | 015      | -25                         | 665                     |              |                      |         |           |                                        |             |                 |              |
|                      | Company Address   | 105 South   | 4th Street                            | · · · · · · · · · · · · · · · · · · · |              |                 |              |                |                       |             |          |        |                                | ·     |                                               |                         |                  |    | P                            | roje        | ct L                | oc:                    | Edo                          | y Co     | ount                        | <u>y</u>                | (i           |                      |         |           |                                        |             |                 |              |
|                      | City/State/Zip:   | Artesia, NM | 4 88210                               |                                       |              |                 |              |                |                       |             |          |        |                                |       |                                               |                         |                  |    |                              |             | PC                  | <b>) #</b> :           | 105                          | 632      |                             |                         |              |                      |         |           |                                        |             |                 |              |
|                      | Telephone No      | 575-748-42  | 217                                   |                                       |              |                 | Fax No:      |                | 578                   | 5-74        | 8-46     | <br>62 |                                |       |                                               |                         |                  | Re | port                         | For         | mat                 | :                      | X                            | Star     | ndar                        | ď                       |              | ] 1                  | RRF     | P         |                                        | וא [        | PDES            | 3            |
|                      | Sampler Signature |             | is Cu                                 |                                       |              |                 | e-mail:      |                |                       |             |          |        | esp                            | etro  | olei                                          | ım.                     | COI              |    | _                            |             |                     |                        |                              |          |                             |                         |              |                      |         |           |                                        |             |                 |              |
| (lab use             | •                 | 7 .         |                                       |                                       |              |                 |              |                |                       |             |          |        |                                |       |                                               |                         |                  |    |                              |             |                     |                        | TOT                          | LP       | An                          | alyze                   | For          | $\exists$            | T       | $\top$    | 7                                      | Τ-          | 72 hrs          |              |
| ORDER                | #: 369448         | 13691       | 451                                   |                                       |              |                 |              | <b>,</b>       |                       |             | Prese    | rvati  | lon & f                        | of C  | ontai                                         | ners                    | Ι                | Ma | rix                          | 8015B       |                     |                        | ij                           |          | Se                          | +                       | 1;           | 0978                 |         |           |                                        |             | 48, 72          | L            |
| _AB # (lab use only) | FIEL              | D CODE      |                                       | Beginning Depth                       | Ending Depth | Date Sampled    | Time Sampled | Field Filtered | Total # of Containers | <u>1</u> 28 | HNO3     | HCI    | H <sub>2</sub> SO <sub>4</sub> | NaOH  | Na <sub>2</sub> S <sub>2</sub> U <sub>3</sub> | None<br>Other (Sperite) | Outer ( Specify) |    | NP≈Non-Potable Specify Other | 418 1 8015M | TPH TX 1005 TX 1006 | Cations (Ca, Mg, Na K) | Anions (Cl. SO4, Alkalinity) | SP / CEC | Metals As Ag Ba Cd Cr Pb Hg | Volatiles               | Varia occas  | A 6021E/5030 of BIEX |         | Chlorides |                                        |             | -Schedule) 24,  | Standard TAT |
| ŌΙ                   | GS/C              | omp-001     | ·                                     | 1'                                    | 1'           | 4/12/2010       | 2:28 PM      | <u> </u>       |                       | Х           |          |        |                                | 1     | 1                                             | $\top$                  | 1                | S  |                              | X           |                     | $\exists$              |                              |          |                             |                         | 1;           | x                    | $\top$  | X         |                                        | T           |                 | Х            |
| or                   |                   | omp-002     |                                       | 2'                                    | 2'           | 4/12/2010       | 2:57 PM      |                | 1                     | х           |          |        |                                |       | $\Box$                                        |                         |                  | S  |                              | Х           |                     |                        |                              |          |                             |                         | ];           | x                    |         | Х         |                                        |             |                 | Х            |
|                      |                   |             |                                       |                                       |              |                 |              | L              |                       |             |          | _      |                                |       |                                               |                         |                  |    |                              |             |                     |                        |                              | _        | _                           | $\perp$                 | $\perp$      | _                    | $\perp$ | $\perp$   | $\perp$                                | $\perp$     | $\perp$         |              |
|                      |                   |             | ····                                  | <u> </u>                              |              |                 |              | <u> </u>       |                       |             |          | _      | _                              | _     | _                                             | $\downarrow$            | $\perp$          |    |                              | _           | _                   |                        | _                            | _        | _                           | _                       | $\downarrow$ | $\perp$              | 4       | $\perp$   | $\downarrow$                           | _           | 1               | _            |
|                      |                   | <del></del> |                                       | ļ                                     |              |                 |              |                |                       |             |          |        | _                              | -{-   | $\downarrow$                                  | $\downarrow$            | $\perp$          |    | $\dashv$                     | _           | -{                  | $\dashv$               |                              | 4        | 4                           | $\dashv$                | $\bot$       | $\perp$              | $\bot$  | +         | +                                      | _           | $\vdash$        | -            |
|                      |                   | <del></del> |                                       | <u> </u>                              |              |                 |              |                |                       |             | $\dashv$ | -      | $\dashv$                       | -     | +                                             | +                       | +                |    |                              | _           | $\dashv$            | -                      | -                            | $\dashv$ | -                           | $\dashv$                | +            | +                    | +       | +         | +                                      | +           | +               | -            |
|                      |                   |             | · · · · · · · · · · · · · · · · · · · |                                       |              |                 |              |                |                       |             |          |        |                                | 1     | $\top$                                        | 1                       | T                |    |                              |             |                     | 7                      | 1                            |          | 7                           | $\top$                  | 7            | $\top$               | $\top$  | $\top$    | $\top$                                 | 1           | T               |              |
|                      | PLEASE PU         | T CHLORI    | IDES                                  |                                       |              |                 |              |                |                       |             |          |        |                                |       |                                               |                         |                  |    |                              |             |                     |                        |                              |          |                             | $\perp$                 | I            | $oxed{\mathbb{I}}$   | I       |           | I                                      |             |                 |              |
|                      | ON SEPARA         |             |                                       |                                       |              |                 |              |                |                       |             |          |        |                                |       |                                               |                         |                  |    |                              |             |                     |                        |                              |          |                             |                         | $\perp$      |                      |         |           | L                                      | $\perp$     |                 |              |
| pecial i             | nstructions:      | TPH:        | : 8015B, BT                           | EX: 80                                | )21B         | & Chlorides.    | Please sho   | w A            | ll re                 | sul         | ts a:    | s m    | g/kg                           | ı. Ti | nan                                           | k yc                    | u.               |    |                              |             |                     | Sam                    | ple                          | Con      | lain                        | nmer<br>ers ir<br>eads: | tect         |                      | ٠.      |           | Ø,                                     | <b>)</b> 崇。 | i,M∷<br>N       | e e          |
| telinquish           | ,                 | <u> </u>    | Date                                  | Tir                                   | ne           | Received by     |              |                |                       |             |          |        |                                |       | Т                                             | £                       | ate              |    | Τ.                           | lime        |                     | Labe                   | ale o                        | n co     | nta                         | mer(s                   | ) :-         |                      | ١       |           | Ø                                      | · -         | N<br>N          |              |
| lobert As            |                   | 20          | 04/14/10                              | 3 02                                  |              |                 |              |                |                       |             |          |        |                                |       | $\perp$                                       |                         |                  |    |                              |             | [                   | Cusi                   | lody                         | 868      | la o                        | n con                   | ler(s        |                      | ,       |           | X                                      | ) ·         | N<br>N          |              |
| elinquish            | ed by             |             | Date                                  | Tir                                   | ne           | Received by     |              |                |                       |             |          |        |                                |       |                                               | C                       | ate              |    |                              | Гime        |                     | Į                      | by S                         | ampl     | er/C                        | eliver<br>Lient l       |              |                      | HL      | Œ.        | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 710         | N<br>N<br>ne St | ar           |
| elinquish            | red by Id Ex      |             | Date                                  | Tii                                   | ne           | Received by ELC | 7            |                |                       |             |          |        |                                |       | 4                                             | ,                       | ate/             |    | 10                           | Time        |                     |                        | <i>f</i> 's                  | oune     | •                           | ion R                   |              |                      | i i L   | 2         |                                        | ) EUI<br>   | °C              |              |

| ad of lexa                            |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| port- Sample                          | Log-Ir                                            | 1                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Checklist                             |                                                   | •                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   | Clier                                                                                                                                                                                                                                                                                       | t Initials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Yes                                   | No                                                | 2.4 °C                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Yes                                   | No                                                |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Yes                                   | No                                                | Not Present                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   | Not Present                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Yes                                   |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   | ID written on Cont./ Lid                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       | No                                                | Not Applicable                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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|                                       |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       | No                                                | See Below                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Yes                                   | No                                                | See Below                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       | No                                                |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| (Yes)                                 | No                                                |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       | No                                                | See Below                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       |                                                   | See Below                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                       | No                                                | Not Applicable                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| (Yes)                                 | No                                                | Not Applicable                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| mentation                             |                                                   |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| · · · · · · · · · · · · · · · · · · · |                                                   | Date/ Time:                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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|                                       | Checklist  Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye | Checklist  Yes No | Checklist  Clier  Yes No 2 4 ° C  Yes No Not Present  Yes No Not Applicable  Yes No See Below  Yes No Not Applicable  Yes No Not Applicable  Yes No Not Applicable  The Present No Not Applicable |

# **Analytical Report 369448**

for

# Yates Petroleum Corporation

Project Manager: Robert Asher

Compromise SWD # 1 30-015-25665

22-APR-10



#### 12600 West I-20 East Odessa, Texas 79765

Xenco-Houston (EPA Lab code: TX00122):

Texas (T104704215-TX), Arizona (AZ0738), Arkansas (08-039-0), Connecticut (PH-0102), Florida (E871002) Illinois (002082), Indiana (C-TX-02), Iowa (392), Kansas (E-10380), Kentucky (45), Louisiana (03054) New Hampshire (297408), New Jersey (TX007), New York (11763), Oklahoma (9218), Pennsylvania (68-03610) Rhode Island (LAO00312), USDA (S-44102)

Xenco-Atlanta (EPA Lab Code: GA00046):

Florida (E87429), North Carolina (483), South Carolina (98015), Utah (AALI1), West Virginia (362), Kentucky (85) Louisiana (04176), USDA (P330-07-00105)

Xenco-Miami (EPA Lab code: FL01152): Florida (E86678), Maryland (330)
Xenco-Tampa Mobile (EPA Lab code: FL01212): Florida (E84900)
Xenco-Odessa (EPA Lab code: TX00158): Texas (T104704400-TX)
Xenco-Dallas (EPA Lab code: TX01468): Texas (T104704295-TX)
Xenco-Corpus Christi (EPA Lab code: TX02613): Texas (T104704370)
Xenco-Boca Raton (EPA Lab Code: FL00449):
Florida(E86240),South Carolina(96031001), Louisiana(04154), Georgia(917)
North Carolina(444), Texas(T104704468-TX), Illinois(002295)



22-APR-10

Project Manager Robert Asher Yates Petroleum Corporation 105 South Fourth St. Artesia, NM 88210

Reference: XENCO Report No. 369448

Compromise SWD # 1
Project Address: Eddy County

#### Robert Asher:

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 369448. 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. 369448 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 369448



# Yates Petroleum Corporation, Artesia, NM

Compromise SWD # 1

| Sample Id   | ·Matrix | Date Collected  | Sample Depth | Lab Sample Id |
|-------------|---------|-----------------|--------------|---------------|
| GS/Comp-001 | S       | Apr-12-10 14.28 | l - 1 ft     | 369448-001    |
| GS/Comp-002 | S       | Apr-12-10 14:57 | 2 - 2 ft     | 369448-002    |



### CASE NARRATIVE

Client Name: Yates Petroleum Corporation

Project Name: Compromise SWD # 1

Project ID:

30-015-25665

Work Order Number: 369448

Report Date: 22-APR-10

Date Received: 04/15/2010

€3.

Sample receipt non conformances and Comments:

Sample receipt Non Conformances and Comments per Sample:

Analytical Non Conformances and Comments:

Batch: LBA-803119 Percent Moisture

None

Batch: LBA-803144 TPH by SW 8015B

None

Batch: LBA-803222 BTEX by EPA 8021

SW8021BM

Batch 803222, Benzene, Ethylbenzene, Toluene, m,p-Xylenes, o-Xylene recovered below QC

limits in the Matrix Spike and Matrix Spike Duplicate.

Samples affected are: 369448-001, -002.

The Laboratory Control Sample for Toluene, m,p-Xylenes, Benzene, Ethylbenzene, o-Xylene is

within laboratory Control Limits

Final Ver. 1.000



Project Id: 30-015-25665

Contact: Robert Asher

Project Location: Eddy County

# Certificate of Analysis Summary 369448

### Yates Petroleum Corporation, Artesia, NM

Project Name: Compromise SWD # 1

Date Received in Lab: Thu Apr-15-10 10 45 am

Report Date: 22-APR-10 Project Manager: Brent Barron, II

|                                    |            |                 |                   |   | Troject Manager. | , |  |
|------------------------------------|------------|-----------------|-------------------|---|------------------|---|--|
|                                    | Lab Id:    | 369448-001      | 369448-002        |   |                  |   |  |
| Atambasia Panasatad                | Field Id:  | GS/Comp-001     | GS/Comp-002       |   |                  |   |  |
| Analysis Requested                 | Depth:     | 1-1 ft          | 2-2 ft            |   |                  |   |  |
|                                    | Matrix:    | SOIL            | SOIL              |   |                  |   |  |
| ,                                  | Sampled:   | Apr-12-10 14:28 | Apr-12-10 14 57   |   |                  |   |  |
| BTEX by EPA 8021                   | Extracted: | Apr-19-10 16.45 | Apr-19-10 16:45   |   |                  |   |  |
| <i>y</i> 1                         | Analyzed:  | Apr-20-10 04.07 | Apr-20-10 04:30   |   |                  |   |  |
| •                                  | Units/RL:  | mg/kg RL        | mg/kg RL          |   |                  |   |  |
| Benzene                            |            | ND 0.0013       | ND 0.0012         |   |                  |   |  |
| Toluene                            |            | ND 0 0025       | ND 0.0025         |   |                  |   |  |
| Ethylbenzene                       | -          | ND 0 0013       | ND 0.0012         |   |                  |   |  |
| m,p-Xylenes                        |            | ND 0 0025       | ND -0.0025        |   | -, -             |   |  |
| o-Xylene                           |            | ND 0.0013       | ND _0 0012        |   |                  | Œ |  |
| Xylenes, Total                     |            | ND 0.0013       | ND 0 0012         |   |                  |   |  |
| Total BTEX                         |            | ND 0.0013       | ND 0.0012         |   |                  |   |  |
| Percent Moisture                   | Extracted: |                 |                   |   |                  |   |  |
|                                    | Analyzed:  | Apr-16-10 17:00 | Apr-16-10 17:00 . |   |                  |   |  |
|                                    | Units/RL:  | % RL            | % RL              |   |                  |   |  |
| Percent Moisture                   |            | 21 4 1 00       | 18.2 1.00         | - |                  |   |  |
| TPH by SW 8015B                    | Extracted: | Арг-19-10 10:45 | Apr-19-10 10:45   |   |                  |   |  |
|                                    | Analyzed:  | Apr-19-10 17.36 | Apr-19-10 18 03   |   |                  |   |  |
|                                    | Units/RL:  | mg/kg RL        | mg/kg RL          |   |                  |   |  |
| C6-C10 Gasoline Range Hydrocarbons |            | ND 190          | . ND 18.2         |   |                  |   |  |
| C10-C28 Diesel Range Hydrocarbons  |            | ND 19.0         | ND 18.2           |   |                  |   |  |
| Total TPH                          |            | ND 190          | ND 182            |   |                  |   |  |

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 hability is limited to the amount invoiced for this work order unless otherwise agreed to in writing

Houston - Dallas - San Antonio - Atlanta - Tampa - Boca Raton - Latin America - Odessa - Corpus Christi

Brent Barron, II

Odessa Laboratory Manager



# 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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#### CHAIN OF CUSTODY RECORD AND ANALYSIS REQUEST

12600 West I-20 East Odessa, Texas 79765 Phone: 432-563-1800 Fax: 432-563-1713

|                               | Project Manager. Robert Asher  Company Name Yales Petroleum Corporation |        |             |                   |              |                        |                                |               |                        |          |          |              |                | _                       | Project Name: Con |            |                       |                     |                                                          |                 |                                                 | Compromise SWD #1          |                      |                      |              |               |                              |          |       |               |               |            |                 |                |  |
|-------------------------------|-------------------------------------------------------------------------|--------|-------------|-------------------|--------------|------------------------|--------------------------------|---------------|------------------------|----------|----------|--------------|----------------|-------------------------|-------------------|------------|-----------------------|---------------------|----------------------------------------------------------|-----------------|-------------------------------------------------|----------------------------|----------------------|----------------------|--------------|---------------|------------------------------|----------|-------|---------------|---------------|------------|-----------------|----------------|--|
|                               |                                                                         |        |             |                   |              |                        |                                |               |                        |          |          |              | _              | Project #: 30-015-25665 |                   |            |                       |                     |                                                          |                 |                                                 |                            |                      |                      |              |               |                              |          |       |               |               |            |                 |                |  |
|                               | Company Address: 105 South 4th Street                                   |        |             |                   |              |                        |                                |               |                        |          |          | _            |                | Pr                      | ojec              | t Lo       | Loc: Eddy County      |                     |                                                          |                 |                                                 |                            |                      |                      |              |               |                              |          |       |               |               |            |                 |                |  |
|                               | City/State/Zip:                                                         |        |             |                   |              |                        |                                |               |                        |          |          |              |                |                         |                   | PO         | #: 105632             |                     |                                                          |                 |                                                 |                            |                      |                      |              |               |                              |          |       |               |               |            |                 |                |  |
|                               | Telephone No. 575-748-4217                                              |        |             |                   |              |                        | _ Fax No:                      |               | 575-748-4662           |          |          |              |                |                         |                   |            |                       | Report Format:      |                                                          |                 |                                                 |                            | X Standard TRR       |                      |              |               |                              |          |       | RP NPDES      |               |            |                 |                |  |
| Sampler Signature:            |                                                                         |        |             | •                 |              |                        | e-mail:                        |               | boba@yatespetroleum.c  |          |          |              |                |                         |                   |            | con                   | <u>om</u>           |                                                          |                 |                                                 |                            |                      |                      |              |               |                              |          |       |               |               |            |                 |                |  |
| (lab use                      | only)                                                                   |        |             |                   |              |                        |                                |               |                        |          |          |              |                |                         |                   |            |                       |                     | -                                                        |                 |                                                 |                            | TCLP                 | _                    | naly.        | e F           | or.                          |          |       | $\overline{}$ | $\overline{}$ | _          | 1               |                |  |
| ORDER #: 369448 369451        |                                                                         |        |             |                   |              |                        | Preservation & # of Containers |               |                        |          |          |              |                |                         |                   | ers        |                       | Matrix 🖁            |                                                          |                 |                                                 |                            | TOTAL                |                      |              |               |                              |          |       |               |               | 48, 72 hrs |                 |                |  |
| AB # (lab use only)           |                                                                         |        |             | Beginning Depth   | Ending Depth | Date Sampled           | Time Sampled                   | ield Filtered | Total #, of Containers |          |          | HCI          |                |                         | New York          | (Specify)  | nking Water St=Studge | Swater S=Soil/Solid | on-Potable Specify Other                                 | 418 1 8015M 801 | 24 27 27                                        | Anions (Cl. SO4 Alkalinty) | 1 ()                 | As Ag Ba Cd Cr Pb Hg | Volatiles    | Semivolatiles | BTEX 8021B/5030 or BTEX 8260 |          | O R.M | Chlorides     |               | 1 -        | TVT Proposition | andard IAI     |  |
| 01                            | FIELD CODE                                                              |        |             | 1                 | 1            |                        |                                | Fle           |                        | $\dashv$ | r        | Ī            | Î              | Ž į                     | 2 2               | 2   0      | å                     |                     |                                                          |                 | - 6                                             | 3   \{                     | Ŝ                    | Ž                    | >            | တီ            | -                            | RCI      | 0 N   |               | $\dashv$      | - a        | 10              | <u>ัก</u><br>X |  |
| or                            | GS/Comp-001<br>GS/Comp-002                                              |        |             | 2'                | 2'           | 4/12/2010<br>4/12/2010 | 2:28 PM<br>2:57 PM             |               | 1                      | X        | -        | <del>-</del> | $\dashv$       | $\dashv$                | +                 | ╁          | +-                    | S<br>S              |                                                          | X<br>X          | +                                               | +                          | +                    | -                    | <del> </del> | $\dashv$      | X                            | $\vdash$ | -     | X             | +             | +          | -+-             | <u>^</u><br>Х  |  |
|                               | G5/C0HIP-002                                                            |        |             | -                 | 4/12/2010    | 2.57 FW                | <b></b>                        |               |                        | $\neg$   | 十        | $\dashv$     | +              | +                       | +                 | $\dagger$  | <u> </u>              | +                   | +                                                        | ╁               | +                                               | ╁╌                         | $\vdash$             | -                    |              | $\hat{}$      | $\vdash$                     | _        |       | $\dashv$      | +             | †          | <u>`</u>        |                |  |
|                               |                                                                         |        | <del></del> |                   |              |                        |                                |               |                        |          | 7        | Ť            | $\top$         | 1                       | 1                 | $\uparrow$ | T                     |                     | $\top$                                                   | 1               | -{-                                             | 1                          | 1                    | 厂                    |              |               |                              | П        | 1     | 1             | $\top$        | $\top$     | 1               | _              |  |
|                               |                                                                         |        |             |                   |              |                        |                                |               |                        |          |          |              |                |                         |                   |            |                       |                     |                                                          |                 |                                                 |                            |                      |                      |              |               |                              |          |       |               |               |            | I               |                |  |
|                               |                                                                         |        |             |                   |              |                        |                                |               |                        |          |          |              |                |                         |                   | L          | L                     |                     |                                                          | _               |                                                 | $\perp$                    | L                    | _                    |              |               |                              |          |       |               |               | $\perp$    | 1               |                |  |
| _                             |                                                                         |        | ·           |                   |              |                        |                                |               |                        | $\dashv$ | _        | $\dashv$     | $\downarrow$   | _                       | $\downarrow$      | 1          | <u> </u>              |                     | $\perp$                                                  | _               | _                                               |                            | $\downarrow$         | <u> </u>             |              |               | _                            | _        | _     | $\dashv$      | $\rightarrow$ |            | 1               |                |  |
|                               |                                                                         |        |             | ļ                 |              |                        |                                | _             | 4                      | _        | 4        | _            | _              | _                       | $\downarrow$      | 1          | ╀-                    |                     | _                                                        | +               | -                                               | <del> </del> -             | -                    | <u> </u>             |              | 4             |                              | $\dashv$ |       | $\dashv$      | +             | +          | +               |                |  |
|                               | PLEASE PUT CHLORIDES                                                    |        |             | -                 |              |                        |                                | [             | 4                      | -        | -        | -            |                | -                       | +                 | +          | ┞                     | <del></del> -       | +                                                        | ╁               | +                                               | +                          | -                    | ├-                   | -            |               |                              | $\dashv$ | -     |               | +             | +          | ╁               | _              |  |
| inecial i                     | ON SEPARA                                                               |        |             | EY-80             | 21R          | & Chlorides.           | Please show                    |               | l re                   | Sulf     |          | m            | 1/ka           | Th                      | nani              | CVO        |                       |                     |                                                          |                 | 1                                               | bor                        | ator                 | Co                   | mme          | <br>ents      |                              |          |       | l             |               |            |                 | -              |  |
| poola. I                      |                                                                         | ****** | 00130, 51   | LA. 00            | /Z1W 1       | a Omondos.             | i icase ano                    | ,,            | ,, ,,                  | Jun      | <b>.</b> | , ,,,,       | <i>9</i> , 119 |                         |                   | `,         | ٥.                    |                     |                                                          |                 | S                                               | ampl                       | ê Çc                 | niaj                 | iers'        | intaji        | d?                           |          |       | Q             |               | . N        |                 | _              |  |
| telinquished by Date          |                                                                         |        |             | Tu                | ne           | Received by            |                                |               |                        |          |          |              |                |                         |                   | Date       |                       |                     | T                                                        | me              | ٦Ц                                              | beis                       | s Free of Headspace? |                      |              |               |                              |          |       |               | N N           |            |                 |                |  |
| Robert Asher RCM UPC 04/14/10 |                                                                         |        |             |                   |              |                        |                                |               |                        |          |          |              |                |                         |                   |            |                       |                     | Custody seals on container(s) Custody seals on cooler(s) |                 |                                                 |                            |                      |                      |              | - Q           | N N                          |          |       |               |               |            |                 |                |  |
| elinquished by Date           |                                                                         |        |             | Time Received by: |              |                        | -                              |               |                        |          |          |              |                |                         |                   | Date Time  |                       |                     | S                                                        | by              | mple Hand Delivered<br>by Sampler/Client Rep. ? |                            |                      |                      |              |               |                              |          | N N   |               |               |            |                 |                |  |
| elinquished by I              |                                                                         |        | Date        | Tu                | ne           | Received by ELO        | 7 ann                          |               |                        |          |          |              |                |                         |                   | Date/ Til  |                       |                     | me<br>45                                                 | Te              | by<br>empt                                      | Con                        | •                    |                      | Ų₽S<br>Řea   |               | DHL                          | _        | Z i   | 15) LO        | one S<br>°C   |            |                 |                |  |

Variance/ Corrective Action Report- Sample Log-In Client: Date/ Time. Lab ID#: Initials: Sample Receipt Checklist Client Initials No Temperature of container/ cooler? Yes Yes) No Shipping container in good condition? (Yes) Custody Seals intact on shipping container/ cooler? No Not Present Custody Seals intact on sample bottles/ container? No Not Present Chain of Custody present? No Sample instructions complete of Chain of Custody? ∕Ýe's No Yes) Chain of Custody signed when relinquished/ received? No Chain of Custody agrees with sample label(s)? (Yes) No ID written on Cont./ Lid Container label(s) legible and intact? Yes No Not Applicable #10 Sample matrix/ properties agree with Chain of Custody? (Yes) No #11 Containers supplied by ELOT? Yes No #12 Samples in proper container/ bottle? No See Below Yes #13 Samples properly preserved? No See Below #14 Sample bottles intact? Yes No #15 Preservations documented on Chain of Custody? No #16 Containers documented on Chain of Custody? No #17 Sufficient sample amount for indicated test(s)? No See Below #18 All samples received within sufficient hold time? Yes No See Below #19 Subcontract of sample(s)? Yes No (Not Applicable) #20 VOC samples have zero headspace? (Yes) 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