

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 94275
BATON ROUGE, LA 70804-9275

Manifest No. 8636123
ORIGINAL

11-TC 89
SH 230

CODES

PART I: TO BE COMPLETED BY GENERATOR

UO11
107722

999905
29537
9667

Generator UNION OIL CO OF CALIFORNIA
Address C/O MICHAEL PISANI & ASSOC INC ATTN LANCE COOPER
1100 PARDAS ST STE 1430, WAGO Telephone No. (504) 582-2408
City/State/Zip NEW ORLEANS LA 70163
ORIGINATION OF WASTE (see instructions on back) NTM
Well Name & No. / Description 29537/EAST WHITE LAKE OIL AND GAS FIELD
Field Code EWL R SU; UPSB B no.3

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	_____	07 Prod. Sands/Solids	_____	14 Pipeline Water/Waste	_____
02 Oil Base Mud	_____	08 Fresh Water	_____	15 Com. Facility Waste	_____
03 Water Base Mud	_____	09 Rainwater	_____	16 Oil Spill Waste	_____
04 Completion Fluids	_____	10 Washout Water	_____	50 Salvage Hydrocarbons	_____
05 Prod. Pit Sludges	_____	11 Washout Pit Water	_____	99 Other*	<u>750 1278</u>
06 Storage Tank Sludges	_____	12 Gas Plant Waste Solids	_____	* (Written Approval Required)	

SITE CODE

DESTINATION OF WASTE

5703

Facility (Company) Name Eco Serv
Site Name INTERCOASTAL CITY LA

CERTIFICATION:

The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.

[Signature] Signature of Generator's Authorized Agent
Date and Time of Shipment 11-23-14 1400 pm

PSC PERMIT

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

9997

Transporter Central Boat Rentals Telephone No. 985-384-8200
Address 1640 River Rd.
City/State/Zip Berwick La
Truck License No. _____
Trailer License No. _____

If transported by barge, barge and tug identification A. Thomas CSR 2707
Barge and Tug Id. _____

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the above destination.

[Signature] Signature of Transporter's Agent
Date and Time Received 11-23-14 1400 pm

SITE CODE

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

5703

Facility (Company) Name Eco Serv
Site Name ILY La
5-379
0-490

CHEMICAL ANALYSES

Chloride (Mg/l) 4254 Conductivity (mmhos/cm) 7.70 @ 70° pH 6
Normal -30

CERTIFICATION:

I certify that the waste described in Part I was received by me via the transporter described in Part II.

[Signature] Signature of Facility Agent
Date and Time Received 11-23-14 6:00 pm

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 94275
BATON ROUGE, LA 70804-9275

Manifest No. 8636124
ORIGINAL

11/19/90
SH 2.26 2706

CODES

U011
107722
999905
29537
9667

PART I: TO BE COMPLETED BY GENERATOR

Generator UNION OIL CO OF CALIFORNIA
Address C/O LAMBE LOOPER
MICHAEL PISANI ASSOC INC Telephone No. 504-582-2468
City/State/Zip 1100 P&DEAS ST STE. 1436 NEW ORLEANS LA 70163
ORIGINATION OF WASTE (see instructions on back)
Well Name & No. / Description 29537 / EAST WHITE LAKE OIL AND GAS FIELD
Field Code GWLK R 54 UPSB B no. 3

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	07 Prod. Sands/Solids	14 Pipeline Water/Waste
02 Oil Base Mud	08 Fresh Water	15 Com. Facility Waste
03 Water Base Mud	09 Rainwater	16 Oil Spill Waste
04 Completion Fluids	10 Washout Water <u>57 WW</u> (MTM)	50 Salvage Hydrocarbons
05 Prod. Pit Sludges	11 Washout Pit Water	99 Other* <u>750 971</u>
06 Storage Tank Sludges	12 Gas Plant Waste Solids	* (Written Approval Required)

SITE CODE

5703

DESTINATION OF WASTE

Facility (Company) Name ECS SERVE
Site Name INTERCOASTAL CITY LA

CERTIFICATION:

The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.

[Signature]

Signature of Generator's Authorized Agent

11-23-14 1400 pm

Date and Time of Shipment

PSC PERMIT

W/K
9997

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

Transporter Central Boat Rentals Telephone No. 985-384-8200
Address 1640 River Rd
City/State/Zip Berwick La
Truck License No. _____
Trailer License No. _____
If transported by barge, barge and tug identification Mr Thomas Barge and Tug Id. 08R 2706

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the above destination.

[Signature]

Signature of Transporter's Agent

11-23-14 14:00 am pm

Date and Time Received

SITE CODE

5703

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

Facility (Company) Name Eco Serv
Site Name ICG La 5-4090
0-990

CHEMICAL ANALYSES

Chloride (Mg/l) 4254

Conductivity (mmhos/cm) 7.70 @ 70°

pH 6 Norm < 30

CERTIFICATION:

I certify that the waste described in Part I was received by me via the transporter described in Part II.

[Signature]

Signature of Facility Agent

11-23-14 6:00 am pm

Date and Time Received

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 84275
BATON ROUGE, LA 70804-8275

Manifest No. **8636145**
ORIGINAL

12-DC-4
SH 236

CODES
~~UOH~~
 107229
 99905R
 29537
 9667

PART I: TO BE COMPLETED BY GENERATOR

Generator Union Oil Co of California
Clarence Cooper
 Address Michael Pisani & Assoc INC Telephone No. 504-582-2468
 City/State/Zip 1100 Poydras St, Suite 1420, New Orleans, LA 70163

ORIGINATION OF WASTE (see instructions on back)

Well Name & No. / Description 29537/EWLK R 50; VPSB B Na.3
 Field Code Field East White Lake Oil and Gas Field

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	07 Prod. Sands/Solids	14 Pipeline Water/Waste
02 Oil Base Mud	08 Fresh Water	15 Com. Facility Waste
03 Water Base Mud	09 Rainwater	16 Oil Spill Waste
04 Completion Fluids	10 Washout Water	50 Salvage Hydrocarbons
05 Prod. Pit Sludges	11 Washout Pit Water	<input checked="" type="checkbox"/> Other <u>800</u>
06 Storage Tank Sludges	12 Gas Plant Waste Solids	* (Written Approval Required)

SITE CODE 5703

DESTINATION OF WASTE
 Facility (Company) Name ECOSERVE
 Site Name Intercoastal City, LA

CERTIFICATION: The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.

Lance R. Coe Signature of Generator's Authorized Agent
 Date and Time of Shipment 12/1/14 1500 am pm

PSO PERMIT 5991
N/A

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

Transporter Crown oilfield Construction & Marine Telephone No. 225-235-5970
 Address 899 Reese St N/A
 City/State/Zip Breaux Bridge, LA 70517 N/A
 If transported by barge, barge and tug identification Tug/Lake Guidry's 526291 Trailer License No. CBR-2714
 Barge and Tug Id.

CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the above destination.

Mike Fisher Signature of Transporter's Agent
 Date and Time Received 12-1-14 1500 am pm

SITE CODE 5703

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

Facility (Company) Name Eco-Serv S-381
 Site Name ICY 0-27

CHEMICAL ANALYSES

Chloride (Mg/l)	Conductivity (mmhos/cm)	pH
<u>4254</u>	<u>7.70/69</u>	<u>7</u>

CERTIFICATION: I certify that the waste described in Part I was received by me at the transporter described in Part II.

Paul P. Jones Signature of Facility Agent
 Date and Time Received 12-2-14 1:45 am pm

EXPLORATION & PRODUCTION (E&P) WASTE SHIPPING CONTROL TICKET

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 94275
BATON ROUGE, LA 70804-9275

Manifest No. 8636146
ORIGINAL

12/27
SH 215

CODES

4011
107722
999905
29533
9267

PART I: TO BE COMPLETED BY GENERATOR

Generator Union Oil Co of California
Address C/O Lance Cooper Michael Pisciari 504-582-2468
ASSOC, INC. Telephone No.
City/State/Zip 1100 Poydras St, Suite 1430, NDLA 70163
ORIGINATION OF WASTE (see instructions on back)
Well Name & No. / Description 29537 / EWUK R 5H; V5B B No. 3
Field Code Field East White Lake Oil and Gas Field

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	07 Prod. Sands/Solids	14 Pipeline Water/Waste
02 Oil Base Mud	08 Fresh Water	15 Com. Facility Waste
03 Water Base Mud	09 Rainwater	16 Oil Spill Waste
04 Completion Fluids	10 Washout Water	50 Salvage Hydrocarbons
05 Prod. Pitt Sludges	11 Washout Pitt Water	99 Other* 1024661
06 Storage Tank Sludges	12 Gas Plant Waste Solids	* (Written Approval Required)

SITE CODE

5703

DESTINATION OF WASTE

Facility (Company) Name ECOSERVE
Site Name Intercoastal City, LA

CERTIFICATION:

The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.
[Signature] Signature of Generator's Authorized Agent
1535 12/31/14 Date and Time of Shipment

PSC PERMIT

N/A
9997

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

Transporter Crown Oil Construction Marine Telephone No. 225-235-5700
Address 899 Reese St. N/A
City/State/Zip Breaux Bridge, LA 70517 N/A
Truck License No. N/A
Trailer License No. N/A
If transported by barge, barge and tug identification LUKE HUDRY JR Barge and Tug Id. CBR 231V

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the above destination.
[Signature] Signature of Transporter's Agent
12-3-14 5:00 Date and Time Received

SITE CODE

5703

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

Facility (Company) Name EcoSen
Site Name ICM Re 5-32
CHEMICAL ANALYSES 0.22%

Chloride (Mg/l) 2127 Conductivity (mmhos/cm) 2500.70 pH 6

CERTIFICATION:

I certify that the waste described in Part I was received by me via the transporter described in Part II.
[Signature] Signature of Facility Agent
11:25 12.3.14 Date and Time Received

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 96275
BARRON ROUGE, LA 70804-9275

Manifest No. 8636147
ORIGINAL

12JC-42
SH-236

CODES: 1011

PART I: TO BE COMPLETED BY GENERATOR

Generator: Union Oil Co of California / Lance Cooper

Address: Michael Pisani - ASSOC. Inc. Telephone No. 504-582-2468

City/State/Zip: 1100 Doydms St. Suite 1430 New Orleans, LA 70163

ORIGINATION OF WASTE (see instructions on back)

Well Name & No. / Description: 29537/EWLK R. SU; VPSB B NO.3

Field Code: Field EAST White Lake Oil & Gas Field

CODES: 29537
96607

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	07 Prod. Sand/Solids	14 Pipeline Water/Waste	
02 Oil Base Mud	08 Fresh Water	15 Chem. Facility Waste	
03 Water Base Mud	09 Refractory	16 Oil Spill Waste	
04 Completion Fluids	10 Washout Water	17 Salvage Hydrocarbons	
05 Prod. Pt. Sludges	11 Washout Pt. Water	18 Other <u>785</u>	
06 Storage Tank Sludges	12 Gas Plant Waste Solids	* (Written Approval Required)	

SITE CODE 5703

DESTINATION OF WASTE

Facility (Company) Name: EcoServe

Site Name: Intercoastal City, LA

CERTIFICATION: The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.

Signature of Generator's Authorized Agent: Meaghan Kirby Date and Time of Shipment: 12/12/2014 8:21 am

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

Transporter: Crown Oilfield Construction & Marine Telephone No. 225-235-5970

Address: 899 Reese St. Truck License No. N/A

City/State/Zip: Breaux Bridge, LA 70517 Trailer License No. 550231

If transported by barge, Barge and tug identification: CBR 2716 Luke G. Jr Barge and Tug Id. 550231

CERTIFICATION: I certify that the waste in quantity above was received by me for shipment to the above destination.

Signature of Transporter's Agent: Mark Talbot Date and Time Received: 12-12-2014 pm

SITE CODE 5703

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

Facility (Company) Name: Eco Serv 5-12%

Site Name: JCY 0-0%

CHEMICAL ANALYSES

Chloride (Mg/l): 4963 Conductivity (microhm/cm): 0.90/64 pH: 7

CERTIFICATION: I certify that the waste described in Part I was analyzed by me via the transporter described in Part II.

Signature of Facility Agent: Dan T. Liu Date and Time Received: 12.12.14 11:45 am

UIC - 28

STATE OF LOUISIANA
OFFICE OF CONSERVATION
P.O. BOX 94275
BATON ROUGE, LA 70804-9275

ORIGINAL

(11-MC-107)
N-H

Bill To: Crown Oilfield
TO BE COMPLETED BY GENERATOR

CODES

4011
107722

29537
9667

PART I: Generator Union Oil Co of California
Address 1100 Paydres St Ste 1430 Telephone No. 504 582 2468
City/State/Zip New Orleans, LA 70163
ORIGINATION OF WASTE (see instructions on back)
Well Name & No. / Description 29537 East White Lake oil & gas field
Field Code Field EWLK R 54 VPSB B No. 3

WASTE IDENTIFICATION AND AMOUNT (IN 42 GALLON BARRELS)

01 Salt Water	07 Prod. Sands/Solids	14 Pipeline Water/Waste
02 Oil Base Mud	08 Fresh Water	15 Com. Facility Waste
03 Water Base Mud	09 Rainwater	16 Oil Spill Waste
04 Completion Fluids	10 Washout Water <u>89 gen w/w</u>	50 Salvage Hydrocarbons
05 Prod. Pit Sludges	11 Washout Pit Water	99 Other <u>2 hrs</u>
06 Storage Tank Sludges	12 Gas Plant Waste Solids	* (Written Approval Required)

SITE CODE

5102

DESTINATION OF WASTE

Facility (Company) Name Ecoserv
Site Name MCY

CERTIFICATION:

The waste described above was consigned to the carrier named below. I certify that the foregoing is true and correct to the best of my knowledge.

[Signature] for Tracy Comardelle
Signature of Generator's Authorized Agent

11-26-14 5:00 pm
Date and Time of Shipment

PSC PERMIT

9997

PART II: TO BE COMPLETED BY TRANSPORTER IN PRESENCE OF GENERATOR

Transporter Central Boat Rentals Telephone No. 985 384 8200
Address 1640 River Rd Truck License No. N/A
City/State/Zip Berwick La Trailer License No. N/A

If transported by barge, barge and tug identification CBR 2707 Mr. Thomas
Barge and Tug Id.

CERTIFICATION:

I certify that the waste in quantity above was received by me for shipment to the above destination.

[Signature]
Signature of Transporter's Agent

11-27-14 030
Date and Time Received

SITE CODE

5102

PART III: TO BE COMPLETED BY COMMERCIAL FACILITY OR TRANSFER STATION OPERATOR

Facility (Company) Name Ecoserv S-2
Site Name MCY O-1

CHEMICAL ANALYSES

Chloride (Mg/l) 11344 Conductivity (mmhos/cm) 2.4 e 68 pH 7

CERTIFICATION:

I certify that the waste described in Part I was received by me via the transporter described in Part II.

[Signature]
Signature of Facility Agent

11-27-14 8:30 am
Date and Time Received



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.	Manifest Doc No. Number	2. Page 1 of 1				
3. Generator's Mailing Address: MICHAEL PISANI & ASSOCIATES 1100 POYDRAS ST, SUITE 1430 NEW ORLEANS, LA 70163		Generator's Site Address (if different than mailing): UNION OIL CO OF CALIFORNIA (C/O MP&A) 29.729 DEQ N. 92.371 W - VERMILLION PARISH, LA PECAN ISLAND, LA 70510		A. Manifest Number WMNA 001 B. State Generator's ID «number»				
4. Generator's Phone 504-582-2476		5. Transporter 1 Company Name Sprint Waste Services	6. US EPA ID Number LAR000026484	C. State Transporter's ID 704713100 D. Transporter's Phone 225-672-0175				
7. Transporter 2 Company Name Transporter 2 Company Name		8. US EPA ID Number US EPA ID Number	E. State Transporter's ID State Transporter ID F. Transporter's Phone Transporter 2 Phone					
9. Designated Facility Name and Site Address RELIABLE LANDFILL US HWY 190 LIVONIA, LA 70755		10. US EPA ID Number N/A	G. State Facility ID D-077-1314 H. State Facility Phone 225-637-2385					
GENERATOR	11. Description of Waste Materials		12. Containers	13. Total Quantity	14. Unit Wt./Vol.	15. Misc. Comments		
	a. NH DEBRIS AND OIL ABSORBENTS		No. Type	Total Qty.	Wt./Vol.	030		
	WM Profile # 960434LA							
	b. Waste Name		No. Type	Total Qty.	Wt./Vol.	Comments		
	WM Profile # WM Profile Number							
	c. Waste Name		No. Type	Total Qty.	Wt./Vol.	Comments		
	WM Profile # WM Profile Number							
	d. Waste Name		No. Type	Total Qty.	Wt./Vol.	Comments		
	WM Profile # WM Profile Number							
	J. Additional Descriptions for Materials Listed Above Additional Description		K. Disposal Location Cell Level Grid C-H-I 19					
15. Special Handling Instructions and Additional Information Special Handling Instructions								
Purchase Order # 07-165		EMERGENCY CONTACT / PHONE NO.: Emergency Contact 504-582-2976						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name Union Oil Co of California		Signature "on behalf of" [Signature]			Month 12	Day 24	Year 2014	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature [Signature]			Month 12	Day 24	Year 14
	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature			Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.							
Printed Name Don Poole		Signature [Signature]			Month 12	Day 24	Year 14	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.		Manifest Doc No.		2. Page 1 of		
				Number		1		
3. Generator's Mailing Address: MICHAEL PISANI & ASSOCIATES 1100 POYDRAS ST, SUITE 1430 NEW ORLEANS, LA 70163			Generator's Site Address (If different than mailing): UNION OIL CO OF CALIFORNIA (C/O MP&A) 29.729 DEQ N. 92.371 W - VERMILLION PARISH, LA PECAN ISLAND, LA 70510			A. Manifest Number WMNA 002 «number»		
4. Generator's Phone 504-582-2476						B. State Generator's ID		
5. Transporter 1 Company Name <i>Spirit Waste Services</i>			6. US EPA ID Number <i>LA2000026484</i>			C. State Transporter's ID <i>LA04763401D</i>		
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone <i>225-642-0175</i>		
9. Designated Facility Name and Site Address RELIABLE LANDFILL U S HWY 190 LIVONIA, LA 70755			10. US EPA ID Number N/A			E. State Transporter's ID State Transporter ID		
						F. Transporter's Phone Transporter 2 Phone		
						G. State Facility ID D-077-1314		
						H. State Facility Phone 225-637-2385		
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	1. Misc. Comments	
	a. NH DEBRIS AND OIL ABSORBENTS		No.	Type	Total Qty.	Wt./Vol.	030	
	WM Profile # 960434LA		<i>10</i>	<i>Roll Off 30</i>		<i>Wt. 030</i>		
	b. Waste Name		No.	Type	Total Qty.	Wt./Vol.	Comments	
	WM Profile # WM Profile Number							
	c. Waste Name		No.	Type	Total Qty.	Wt./Vol.	Comments	
WM Profile # WM Profile Number								
d. Waste Name		No.	Type	Total Qty.	Wt./Vol.	Comments		
WM Profile # WM Profile Number								
J. Additional Descriptions for Materials Listed Above		K. Disposal Location						
Additional Description		Cell				Level		
		Grid	<i>E-H-19</i>					
15. Special Handling Instructions and Additional Information								
Special Handling instructions								
Purchase Order # 07-165		EMERGENCY CONTACT / PHONE NO.: <i>Emergency Center 504-582-2476</i>						
16. GENERATOR'S CERTIFICATE:								
I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name <i>Union Oil Co of California</i>		Signature "On behalf of" <i>[Signature]</i>				Month <i>12</i>	Day <i>24</i>	Year <i>2014</i>
17. Transporter 1 Acknowledgement of Receipt of Materials								
Printed Name <i>LUTHER L. WINDING JR.</i>		Signature <i>[Signature]</i>				Month <i>12</i>	Day <i>24</i>	Year <i>2014</i>
18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name		Signature				Month	Day	Year
19. Certificate of Final Treatment/Disposal								
I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name <i>Don Poole</i>		Signature <i>[Signature]</i>				Month <i>12</i>	Day <i>24</i>	Year <i>14</i>

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST	1. Generator's US EPA ID No.	Manifest Doc No. Number	2. Page 1 of 1
3. Generator's Mailing Address: MICHAEL PISANI & ASSOCIATES 1100 POYDRAS ST, SUITE 1430 NEW ORLEANS, LA 70163		Generator's Site Address (if different than mailing): UNION OIL CO OF CALIFORNIA (C/O MP&A) 29.729 DEQ N. 92.371 W -- VERMILLION PARISH, LA PECAN ISLAND, LA 70510	
4. Generator's Phone 504-582-2476		A. Manifest Number WMNA 003 «number»	
5. Transporter 1 Company Name <i>Sprint Waste Services</i>		B. State Generator's ID	
6. US EPA ID Number <i>LAR000026484</i>		C. State Transporter's ID <i>7-04783401</i>	
7. Transporter 2 Company Name		D. Transporter's Phone <i>725-642-0125</i>	
8. US EPA ID Number		E. State Transporter's ID	
9. Designated Facility Name and Site Address RELIABLE LANDFILL U S HWY 190 LIVONIA, LA 70755		F. Transporter's Phone	
10. US EPA ID Number N/A		G. State Facility ID D-077-1314	
		H. State Facility Phone 225-637-2385	
GENERATOR	11. Description of Waste Materials		19. Total Quantity
	a. NH DEBRIS AND OIL ABSORBENTS		14. Unit Wt./Vol.
	WM Profile # 960434LA		1. Misc. Comments
	b. Waste Name		<i>10. 261HA 30 WCY</i>
	WM Profile # WM Profile Number		<i>030</i>
TRANSPORTER	c. Waste Name		No.
	WM Profile # WM Profile Number		Type
	d. Waste Name		Total Qty.
	WM Profile # WM Profile Number		Wt./ Vol.
15. Special Handling Instructions and Additional Information		K. Disposal Location	
Special Handling Instructions		Cell	Level
Purchase Order # 07-165		EMERGENCY CONTACT / PHONE NO.: <i>Emergency Contact 504-582-2476</i>	
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.			
Printed Name <i>Union Oil Co of California</i>		Signature "On behalf of" <i>Lanella</i>	Month Day Year <i>12 26 2014</i>
17. Transporter 1 Acknowledgement of Receipt of Materials			
Printed Name <i>Daryl Benson</i>		Signature <i>Daryl Benson</i>	Month Day Year <i>12 06 14</i>
18. Transporter 2 Acknowledgement of Receipt of Materials			
Printed Name		Signature	Month Day Year
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.			
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.			
Printed Name		Signature <i>[Signature]</i>	Month Day Year <i>[Date]</i>

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY