

## EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: (       )       -
Permit Number (API No. if applicable):	Lease Name:
Source of Waste: <div style="display: flex; flex-wrap: wrap; margin-top: 10px;"> <div style="width: 50%;"><input type="checkbox"/> Emergency Pit</div> <div style="width: 50%;"><input type="checkbox"/> Settling Pit</div> <div style="width: 50%;"><input type="checkbox"/> Workover Pit</div> <div style="width: 50%;"><input type="checkbox"/> Drilling Pit</div> <div style="width: 50%;"><input type="checkbox"/> Burn Pit</div> <div style="width: 50%;"><input type="checkbox"/> Haul-off Pit</div> <div style="width: 50%;"><input type="checkbox"/> Steel Pit</div> <div style="width: 50%;"><input type="checkbox"/> Spill / Escape</div> <div style="width: 50%;"><input type="checkbox"/> Dike</div> </div>	Well Number: <div style="margin-top: 10px;">           Source Location (QQQQ): _____ - _____ - _____ - _____            Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West            _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section            _____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section            GPS Location: Lat: _____, Long: _____  <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small>            Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84            County: _____         </div>
No Waste to be Hauled: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____	
Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____	
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Waste Disposal: Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.)	
Date of Waste Transfer: _____	
Operator Name: _____	License No.: _____
Lease Name: _____	Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: _____	County: _____
Comments:	

Submitted Electronically



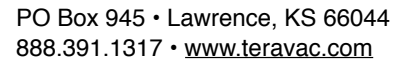
# Daily Job Ticket

PO Box 945 • Lawrence, KS 66044  
888.391.1317 • [www.teravac.com](http://www.teravac.com)

<b>Bill to:</b>		<b>For Customer:</b>		<b>Ordered by:</b>		<b>Ticket No.</b>	
Mid-Continent Fractionation & Storage				Dave Spahr		1703092	
<b>Date</b>	<b>PO Number</b>	<b>Project Name</b>			<b>Site Location</b>		
3/9/17	654232	Cathodic Protection			ConWest		
<b>Teravac Personnel</b>		Michael Osoba					
<b>Equipment &amp; Services</b>				<b>Begin</b>	<b>End</b>	<b>Quantity</b>	<b>Rate</b>
Hydrovac Truck				7.7	18.4	10.7	280
Hydrovac Truck				17	18.5	1.5	240
Overtime				0	2.7	2.7	40
						0	\$0.00
						0	\$0.00
						0	\$0.00
						0	\$0.00
						0	\$0.00
						0	\$0.00
						0	\$0.00
<b>Total Miles All Vehicles</b>		30		Time is calculated in tenths of an hour on a 24 hour clock.			<b>Total</b>
							\$3,464.00
<b>Budget</b>		<b>Balance</b>					
\$16,295		\$12,831					
<b>Description of Work</b>				<b>Comments</b>			
Cut slot trench for cathodic protection line 145' x 2" x 18". Picked up 22,000 lbs. of drill mud and dumped 2 times at dirt farm.				First start/stop time is for the '94 Ford. Second start/stop time is for the '98.			

## Authorization for Billing

To approve this ticket, please **(1)** FORWARD this email to [craig.cochran@teravac.com](mailto:craig.cochran@teravac.com). **(2)** Include a copy to your office and/or your customer. **(3)** Leave the subject line of the email as it is and type **"approved"** in your message. An invoice will be sent later. If you have questions, call Craig at 785.218.7401. Thank you for choosing Teravac.



Authorization for Billing
<p>To approve this ticket, please <b>(1)</b> FORWARD this email to <a href="mailto:craig.cochran@teravac.com">craig.cochran@teravac.com</a>. <b>(2)</b> Include a copy to your office and/or your customer. <b>(3)</b> Leave the subject line of the email as it is and type “<b>approved</b>” in your message.</p> <p>An invoice will be sent later. If you have questions, call Craig at 785.218.7401.</p> <p>Thank you for choosing Teravac.</p>