

October 25, 2021

Jeremiah Oliver
MATCOR
1700 E Seward Rd.
GUTHRIE, OK 73044

RE: Special Waste Disposal Authorization Number 21-1461

THIS AUTHORIZATION EXPIRES: April 25, 2022

Dear Jeremiah Oliver:

We have considered your request for disposal of seventy four (74) drums of cathodic drilling mud from MATCOR, 38.375972032547 -98.0778954029083 & 38.364950 -97.780197, KS.

Based on your signed statement that this waste stream is not a hazardous waste as defined by K.A.R. 28-31-261, the waste is not considered a hazardous waste. As stated in K.A.R.28-31-261, it is the responsibility of the generator to determine if generated waste is a hazardous waste by either knowledge of process or by proper testing by a KDHE certified lab. If there are questions as to the status of this waste, please contact me at 785-296-0681. **If MATCOR is confident the material for disposal is not a hazardous waste for any characteristic or listed constituent, the following applies.**

Approval is given to dispose of this waste at Plumb Thicket (Permit 0842), provided the following conditions are met:

1. Approval to deliver the waste must be obtained from the landfill operator prior to transporting the waste to the landfill. The final decision on whether to accept or reject the waste rests with the landfill operator. Please contact Randy Boehmke, Site Manager, at 575-263-6959, to obtain approval. If the landfill operator refuses to accept this waste, you should contact us to determine alternate disposal options.
2. The waste must be transported separately to the landfill and be identified to the operator upon delivery.
3. Kansas Administrative Regulation 28-29-108(r) (12) and (13) requires solid waste disposal facilities to maintain a log of commercial or industrial wastes received such as sludges, barreled wastes, and special wastes. The log must indicate the source and quantity of waste and the disposal location thereof. The special waste authorization number should be used as identification when entering the shipment into the log.

4. This approval is valid for disposal of the waste described, and in the amount shown above. If additional shipments are required, you must contact us to amend the disposal authorization.
5. Operating standards as defined by K.A.R. 28-29-108(k) prohibit the disposal of liquid waste. "Liquid waste" means any waste material that is determined to contain "free liquids" as defined by method 9095A, revision 1, paint filter liquids test, as described in "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods," EPA Pub. No. SW-846 dated December 1996. **For purposes of this disposal authorization, all waste for disposal must be able to pass the "paint filter test".**
6. Any change in the process producing this waste, any change in the materials used in producing this waste or any other change to this waste stream requires that a new Special Waste Disposal Authorization be obtained prior to disposal.

If you have any questions, feel free to contact me at 785-296-0681.

Sincerely,



Anthony (Tony) Guy
Environmental Scientist
Special Waste Coordinator
KDHE/Bureau of Waste Management

ABG

C Randy Boehmke
e-file

Requester phone: 405-630-9122



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. **005018**

Section I GENERATOR (Generator complete all of Section I)

a. Generator Name: Matcor Inc
 b. Generating Location: Williams (Mitchell/eve)
 c. Address: 1700 E. Seward Rd.
 d. Address: Mitchell, Ks 38.37597 - 98.07789
Guthrie, Ok 73044
Conway, Ks 38.36459 - 97.78019
 e. Phone No.: 405-760-1386
 f. Phone No.: 405-630-9122
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: Williams
 Owner's Phone No.: 405-760-1386

i. WCI WASTE CODE: 21140 211461
 j. Description of Waste: Drill Spoils (Mud)
 k. Quantity _____ Units _____ No _____ TYPE _____
 Containers _____
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL PLASTIC BAG OR WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations. AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Jeremiah Oulver
Generator Authorized Agent Name Signature

Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: _____
 b. Address: _____
 c. Driver Name / Title: _____
 d. Phone No.: _____
 e. Truck No.: _____
 f. Vehicle License No. / State: _____
 Acknowledgement of Receipt of Materials: _____
 g. Driver's Signature _____
 Shipment Date _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name / Title: _____
 k. Phone No.: _____
 l. Truck No.: _____
 m. Vehicle License No. / State: _____
 Acknowledgement of Receipt of Materials: _____
 n. Driver's Signature _____
 Shipment Date _____

Section III DESTINATION (Generator complete a-d, destination site completes e-f.)

a. Site Name: PLUMB THICKET LANDFILL
 b. Physical Address: 440 N/E 150TH ROAD
HARPER, KS 67058
 c. Phone No.: 620-896-2229
 d. Mailing Address: PO BOX 495
HARPER, KS 67058
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator * completes e.)

a. Operator's * Name: _____ b. Operator's * Phone No.: _____
 c. Operator's * Address: _____
 d. Special handling instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations
 e. Operator's Name & Title: _____
 f. Name & address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable
 * Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETAIN



Plumb Thicket Landfill
 PO Box 495, 440 NE 150th Rd.
 Harper, KS 67058

000263 STUTZMAN REFUSE DISPOSAL INC
 315 WEST BLANCHARD
 SOUTH HUTCHINSON KS 67505

Scale 1 Gross Wt. 58960 LB
 Scale 1 Tare Wt. 32720 LB
 Net Weight 26240 LB

SITE	TICKET	GRID		WEIGHMASTER	
01	00369875			ASHLEE G	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF
10/28/21	10/28/21	16:02	16:16	FARM TRUCK	
REFERENCE			ORIGIN		
PTL21140			*		

Inbound - Charge ticket

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	FEE	TOTAL
13.12	TON	Special Waste Tons I	28.750	377.20	55.76	432.96

Operating hours 7AM to 4PM Monday thru Friday.

This is to certify that this load does not contain any hazardous materials, medical waste or liquids of any type
 Generator MATCOR
 Manifest# 5018

State 13.12
 County 42.64
 State-Int 0.00
 County-Int 0.00

NET AMOUNT
432.96
TENDERED
CHANGE
CHECK NO.

SIGNATURE _____