

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
May 2011  
Form must be Typed

## 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; padding: 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

123071617

Generator acknowledges that no material change has occurred either in the characteristics or in the process generating the material.  
Please print or type. Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <b>KSD984969519</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>017438341 FLE</b>	
5. Generator's Name and Mailing Address <b>Williams Midcontinent Fractionation &amp; Storage LLC 1426 Fifth Avenue 839 Kiowa Road Mcpherson, KS 67460</b>			Generator's Site Address (if different than mailing address) <b>1426 Fifth Avenue Mcpherson, KS 67460</b>			
6. Transporter 1 Company Name <b>Clean Harbors Environmental Services, Inc.</b>			U.S. EPA ID Number <b>MAD039322250</b>			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Environmental Services, Inc. 2247 South Highway 71 Kimball, NE 69145</b>			U.S. EPA ID Number <b>NED981723513</b>			
Facility's Phone: <b>(308) 235-4012</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
X	1. UN3077, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S., (SOIL CUTTINGS, CARBON TETRACHLORIDE), 9, PG III	1	DM	300	P	
X	2. UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S., (LEAD, CARBON TETRACHLORIDE), 9, PG III	6	TP	12500	P	
	<del>UN3082, Environmentally Hazardous Substances, Liquid, N.O.S., (Lead, Carbon Tetrachloride), 9, PG III</del>					
	<del>LA 7/10/23</del>					
	UN3077, Environmentally Hazardous Substances (Solid, N.O.S., (Soil Cuttings, Carbon Tetrachloride), 9, PG III)	1	DF	300	P	
14. Special Handling Instructions and Additional Information 1. CH2517626 ERG#171 1X 55 2. CH2517642 ERG#171 6X TOTE 3. CH2517442 4. CH2517626 1X 95 Authority on initial transporter to add or substitute additional transporters on generator's behalf for purposes of transportation efficiency, convenience, or safety.						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name <b>Erik Peterson</b>		Signature <i>Erik Peterson</i>		Month Day Year <b>7 10 23</b>		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <b>Leonard Anderson</b> Signature <i>Leonard Anderson</i> Month Day Year <b>7 10 23</b> Transporter 2 Printed/Typed Name Signature Month Day Year						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: Month Day Year 18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. <b>H040</b> 2. <b>H040</b> 3. <b>H040</b>						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name <b>Patrick Morgan</b> Signature <i>Patrick Morgan</i> Month Day Year <b>7 22 23</b>						

V23071618

Generator acknowledges that no material change has occurred either in the characteristics or in the process generating the material.  
Please print or type. Form Approved, OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <b>KSD984969519</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>017438342 FLE</b>		
5. <b>Williams Midcontinent Fractionation &amp; Storage LLC</b> <b>1426 Fifth Avenue 839 Kiowa Road</b> <b>Mcpherson, KS 67460</b> Generator's Phone: <b>(620) 834-2178</b> ATTN: Erik Peterson			Generator's Site Address (if different than mailing address) <b>1426 Fifth Avenue</b> <b>Mcpherson, KS 67460</b>				
6. Transporter 1 Company Name <b>Clean Harbors Environmental Services, Inc.</b>			U.S. EPA ID Number <b>MAD039322250</b>				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>Clean Harbors Environmental Services, Inc.</b> <b>2247 South Highway 71</b> <b>Kimball, NE 69145</b> Facility's Phone: <b>(308) 235-4012</b>			U.S. EPA ID Number <b>NED981723513</b>				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	1. <b>UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S., (LEAD, CARBON TETRACHLORIDE), 9, PG III</b>		<b>7</b>	<b>TP</b>	<b>17500</b>	<b>P</b>	
14. Special Handling Instructions and Additional Information <b>1. CR2517642 EPG#171 7X TOTE</b>							
Contract retained by generator confers agency authority on initial transporter to add or substitute additional transporters on generator's behalf for purposes of transportation efficiency, convenience, or safety.							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name <b>Erik Peterson</b>			Signature <i>Erik Peterson</i>		Month Day Year <b>7 10 23</b>		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name <b>Leonard Anderson</b>			Signature <i>Leonard Anderson</i>		Month Day Year <b>7 10 23</b>		
Transporter 2 Printed/Typed Name			Signature		Month Day Year		
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H040</b>		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>Patricia Morgan</b>			Signature <i>Patricia Morgan</i>		Month Day Year <b>7 12 23</b>		

V23071582 E

Please print or type. Generator acknowledges that no material change has occurred either in the characteristics or in the process generating the material. Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number <b>KSD984969519</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>017438233 FLE</b>			
	5. Generator's Name and Mailing Address <b>Williams Midcontinent Fractionation &amp; Storage LLC 1426 Fifth Avenue 839 Kiowa Road Mcpherson, KS 67460</b>		Generator's Site Address (if different than mailing address) <b>1426 Fifth Avenue Mcpherson, KS 67460</b>				
	6. Transporter 1 Company Name <b>Clean Harbors Environmental Services, Inc.</b>		U.S. EPA ID Number <b>MAD039322250</b>				
	7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>Clean Harbors Environmental Services, Inc. 2247 South Highway 71 Kimball, NE 69145</b>				U.S. EPA ID Number <b>NED981723513</b>			
Facility's Phone: <b>(308) 235-4012</b>							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes	
X	1. <b>UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S., (LEAD, CARBON TETRACHLORIDE), 9, PG III</b>	7	TP	16.250	P		
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information <b>1. CH2517642 ERG#171 7X TOTE</b>							
Contract retained by generator confers agency authority on initial transporter to add or substitute additional transporters on generator's behalf for purposes of transportation emergency convenience or safety.							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name <b>Erik Peterson</b>				Signature <b>Erik Peterson</b>		Month Day Year <b>06 29 23</b>	
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	Transporter signature (for exports only): _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name <b>Leonard Anderson</b>		Signature <b>Leonard Anderson</b>		Month Day Year <b>06 29 23</b>		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)				Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H040</b>		2.		3.		4.	
20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>Jessica Eggli</b>				Signature <b>Jessica Eggli</b>		Month Day Year <b>7 21 23</b>	


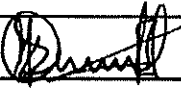
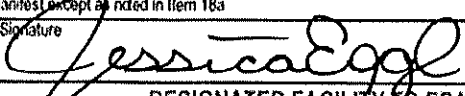
V23071583

Generator acknowledges that no material change has occurred either in the characteristics or in the process generating the material.  
Please print or type. Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD984969519	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 017438234 FLE		
5. Generator's Name and Mailing Address Williams Midcontinent Fractionation & Storage LLC 1426 Fifth Avenue 839 Kiowa Road Mcpherson, KS 67460 Generator's Phone: (620) 834-2178 ATTN:Erik Peterson				Generator's Site Address (if different than mailing address) 1426 Fifth Avenue Mcpherson, KS 67460			
6. Transporter 1 Company Name Clean Harbors Environmental Services, Inc.				U.S. EPA ID Number MAD039322250			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address Clean Harbors Environmental Services, Inc. 2247 South Highway 71 Kimball, NE 69145 Facility's Phone: (308) 235-4012				U.S. EPA ID Number NED981723513			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	X	1. UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S., (LEAD, CARBON TETRACHLORIDE), 9. PG III	7	TP	16250	P	
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. CH2517642 ERG#171 7X TOTE							
Contract retained by generator confers agency authority on initial transporter to add or substitute additional transporters on generator's behalf for purposes of transportation emergency convenience or safety.							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Erik Peterson				Signature Erik Peterson		Month Day Year 06 29 23	
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name Leonard Anderson		Signature Leonard Anderson		Month Day Year 06 29 23		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
	Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H040		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Jessica Egoli				Signature Jessica Egoli		Month Day Year 06 29 23	

V23070365

Please print or type. Generator acknowledges that no material change has occurred either in the characteristics or in the process generating the material. Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>KSD984969519</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 483-3718</b>	4. Manifest Tracking Number <b>018358491 FLE</b>		
5. Generator's Name and Mailing Address <b>Williams Midcontinent Fractionation &amp; Storage LLC 1426 Fifth Avenue 839 Kiowa Road Mcpherson, KS 67460</b>				Generator's Site Address (if different than mailing address) <b>1426 Fifth Avenue Mcpherson, KS 67460</b>			
6. Transporter 1 Company Name <b>Clean Harbors Environmental Services, Inc.</b>				U.S. EPA ID Number <b>MAD039322250</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Environmental Services, Inc. 2247 South Highway 71 Kimball, NE 69145</b>				U.S. EPA ID Number <b>NED981723513</b>			
Facility's Phone: <b>(308) 235-4012</b>							
9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	1. UN3077, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S., (SOIL CUTTINGS, CARBON TETRACHLORIDE), 9, PG III	021	DM	8400	P		
X	2. UN3077, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S., (SOIL CUTTINGS, CARBON TETRACHLORIDE), 9, PG III	001	DF	450	P		
14. Special Handling Instructions and Additional Information <b>1. CH2517626 ERG#171 21X55 2. CH2517626 ERG#171 1X95</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name <b>Erik Peterson</b>				Signature 		Month Day Year <b>06 09 22</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name <b>DENNIS KAPTICH</b>				Signature 		Month Day Year <b>06 09 23</b>	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H040</b>		2. <b>H040</b>		3.		4.	
20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>Jessica Eggle</b>				Signature 		Month Day Year <b>7 6 23</b>	

## Summary of Waste Transfer Activities

Combined waste transfer information for the following cathodic protection locations:

- (1) Redrill API 15-113-21260-00-01
- (2) Redrill API 15-113-21253-00-01
- (3) Abandonment API 15-113-21309-00-00
- (4) Abandonment API 15-113-19468-00-00

Load	Manifest Tracking Number	Date	# DM	DM Weight (lbs)	# DF	DF Weight (lbs)	# TP	TP (bbls)	TP Weight (lbs)	Total Weight (lbs)	Total Weight (tons)
1	18358491	7/6/2023	21	8,400	1	450				8,850	4
2	17438234	7/21/2023					7	46	16,250	16,250	8
3	17438233	7/21/2023					7	46	16,250	16,250	8
4	17438342	7/22/2023					7	46	17,500	17,500	9
5	17438341	7/22/2023	1	300	1	300	6	39	12,500	13,100	7
177									71,950	36	

**Notes:**

DM = Metal Drum  
DF = Plastic Drum  
TP = Plastic Tote