

INVOICE



Waste Management of CO Energy Services
16655 Weld County Rd. 59
Keenesburg, CO 80643
720-977-2102

Customer SUMMIT OIL & GAS D REINHARDT 27-1
Online WM ezPay ID [REDACTED]
Invoice Date 10/07/2024
MAS Invoice Number 821648
Account Number [REDACTED]
Service Period 09/01/2024 - 09/05/2024

Disposal Summary

Date	Ticket	Manifest	Tons	Rate	Amount
09/05/2024	1292133	10960684	20.90	[REDACTED]	[REDACTED]
09/01/2024	1293667	10960686	25.60	[REDACTED]	[REDACTED]
09/02/2024	2396588	10960685	15.95	[REDACTED]	[REDACTED]
Total Disposal Summary		3	Total Tons 62.45	Total Amount	\$ [REDACTED]



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.	Manifest Doc No.	2. Page 1 of	
3. Generator's Mailing Address: <i>Furfield Carbon Capture LLC c/o Summit Oil & Gas Box 983038, Park City Utah 84098</i>		Generator's Site Address (if different than mailing):		A. Manifest Number WMNA	10960684
4. Generator's Phone <i>720-261-4244</i>				B. State Generator's ID	
5. Transporter 1 Company Name		6. US EPA ID Number		C. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone	
9. Designated Facility Name and Site Address <i>North West Land Fill (CST) BRLF Landfill</i>		10. US EPA ID Number		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility ID	
				H. State Facility Phone	
11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.
		No.	Type		
a. NON REGULATED SOLID - WM Profile # <i>138103CO</i>					
b. WM Profile # <i>138103CO</i>					
c. WM Profile # <i>138103CO</i>					
d. WM Profile # <i>138103CO</i>				Total	Comments
J. Additional Descriptions for Materials Listed Above ACCOUNT # CUST NAME:		K. Disposal Location			
		Cell		Level	
		Grid			
15. Special Handling Instructions and Additional Information					
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: 1-800-424-9300 24HR TOLL FREE			
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>Brett Tandy</i>		Signature On behalf of <i>[Signature]</i>		Month <i>9</i>	Day <i>2</i>
				Year <i>24</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed Name <i>Brett Tandy</i>		Signature <i>[Signature]</i>		Month	Day
				Year	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed Name <i>Carlos Corona</i>		Signature <i>[Signature]</i>		Month <i>9</i>	Day <i>02</i>
				Year <i>24</i>	
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.					
<i>1292/33</i>					
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.					
Printed Name <i>Converse</i>		Signature <i>[Signature]</i>		Month <i>9</i>	Day <i>5</i>
				Year <i>24</i>	

GENERATOR
TRANSPORTER
FACILITY

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENERATOR #2 COPY Yellow- GENERATOR #1 COPY
Pink- FACILITY USE ONLY Gold- TRANSPORTER #1 COPY



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.	Manifest Doc No.	2. Page 1 of	
3. Generator's Mailing Address: <i>PURIFIED CARBON CAPTURE C/O SUMMIT OIL & GAS PO BOX 983038 PARK CITY UT. 84098</i>		Generator's Site Address (if different than mailing):		A. Manifest Number WMNA	
4. Generator's Phone <i>720-261-9249</i>				B. State Generator's ID 10960686	
5. Transporter 1 Company Name <i>NORCO OILFIELD SERVICE</i>		6. US EPA ID Number		C. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone	
9. Designated Facility Name and Site Address <i>CONSERVATION SERVICES INC (CSE) BRLF LANDFILL</i>		10. US EPA ID Number		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility ID	
				H. State Facility Phone	
GENERATOR	11. Description of Waste Materials		12. Containers	13. Total Quantity	
	a. NON REGULATED SOLID -		No.	Type	
	b. <i>WM Profile # 138103 CO</i>				14. Unit Wt./Vol.
	c. <i>WM Profile # 138104 CO</i>				I. Misc. Comments
	d. <i>WM Profile #</i>				
J. Additional Descriptions for Materials Listed Above ACCOUNT # CUST NAME:		K. Disposal Location			
		Cell	Level		
		Grid			
15. Special Handling Instructions and Additional Information <i>Changed profile # per Melissa Chudlow</i>					
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: 1-800-424-9300 24HR TOLL FREE			
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>GREG THORLAKSEN</i>		Signature "On behalf of"		Month Day Year <i>8 31 24</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name <i>Carlos LI</i>		Signature <i>[Signature]</i>	
				Month Day Year <i>08 31 24</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>Converse</i>		Signature <i>KC</i>		Month Day Year <i>9 1 24</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.	2. Page 1 of	
3. Generator's Mailing Address: Purified Carbon Capture LLC c/o Summit Oil & Gas Box 983038, Park City UT 84098		Generator's Site Address (if different than mailing): DREINHARDT 221 AFE 23729		A. Manifest Number WMNA	10960685
4. Generator's Phone 720-261-9249		6. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name OILS TRUCKING NARCO TRANSPORT		7. Transporter 2 Company Name		C. State Transporter's ID	
9. Designated Facility Name and Site Address NORTH WOOD LINDFILL (CSI)		10. US EPA ID Number		D. Transporter's Phone	
				E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility ID	
				H. State Facility Phone	
GENERATOR	11. Description of Waste Materials		12. Containers		I. Misc. Comments
	a. NON REGULATED SOLID -		No.	Type	
	WM Profile # 138103CO				
	b. Waste No.				
	WM Profile # 138103CO				
c.					
WM Profile # 138103CO					
d.					
WM Profile # 138103CO					
J. Additional Descriptions for Materials Listed Above		K. Disposal Location			
ACCOUNT #		Cell		Level	
CUST NAME:		Grid			
15. Special Handling Instructions and Additional Information					
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: 1-800-424-9300 24HR TOLL FREE			
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 GREG THORLAKSEN		Signature (on behalf of)		Month 9	Day 1
				Year 24	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month 9
	Printed Name Jesus Soto				Day 1
					Year 24
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day
Printed Name				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		Signature		Month 9	Day 1
				Year 24	

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