

**RIVER CITIES DISPOSAL, L.L.C.**

P. O. BOX 5177  
ASHLAND, KY 41105  
PH. 606-929-9340, EXT. 205  
FAX 606-929-9342

Code #



**WASTE SHIPMENT TRACKING DOCUMENT**

Source (Generator): \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Description of Waste: \_\_\_\_\_

Date Shipped: \_\_\_\_\_ Quantity Shipped: \_\_\_\_\_

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Generator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Transporter (No. 1): \_\_\_\_\_ Street Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Hauler's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Other Handlers (Transfer Facility): \_\_\_\_\_ Street Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Quantity Received: \_\_\_\_\_ Quantity Shipped: \_\_\_\_\_

Facility Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Transporter (No. 2): \_\_\_\_\_ Street Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Certification: I certify that no regulated hazardous waste or infectious waste was knowingly introduced into the waste while in my custody.

Driver's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Disposal Facility: River Cities Disposal, L.L.C., 1837 River Cities Drive, Ashland, KY 41102

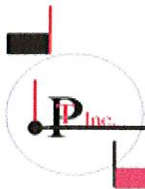
Contact Name: Bonita Ison

Phone No.: (606) 929-9340, Ext. 205

Description of Waste: \_\_\_\_\_

Date Received: \_\_\_\_\_ Quantity Received: \_\_\_\_\_

Facility Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Pressure Tech**  
*Industrial Cleaning Services, Inc.*

## Drilling Fluids Manifest

**Pressure Tech, Inc. - PO Box 84 - Worthington, KY 41183**

Date: \_\_\_\_\_

Manifest Number: \_\_\_\_\_

Truck Manifest Number: \_\_\_\_\_

Fluid Generator: \_\_\_\_\_

Invoice To: \_\_\_\_\_

Well Name: \_\_\_\_\_

Well Permit No.: \_\_\_\_\_

State: \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_

UIC#: \_\_\_\_\_

Transporter: \_\_\_\_\_

Truck No: \_\_\_\_\_

Water Type: \_\_\_\_\_

Volume/Barrels: \_\_\_\_\_ Weight lbs/gals: \_\_\_\_\_

Specific Gravity: \_\_\_\_\_

Driver Name: \_\_\_\_\_

Pressure Tech, Inc. P.O Box 84 Worthington, KY 41183

Phone: (606) 834-1545, Fax: (606) 834-1095

<http://www.pressuretechinc.com>

## Fluid Manifest

**Cambrian Well Services, LLC**

PO Box 2683

Zanesville, OH 43702

**Kemble #1-D**

Perry Twp., Muskingum County, Ohio

APL Well Number 34-119-2-8780-00-00 (SWIW#28)

**Operator – Orr Petroleum Corporation**

(740) 796-6495

Date: \_\_\_\_\_

Manifest Number: \_\_\_\_\_

Truck Manifest Number: \_\_\_\_\_

Fluid Generator: \_\_\_\_\_

Invoice To: \_\_\_\_\_

Well Name: \_\_\_\_\_

Well Permit No.: \_\_\_\_\_

State: \_\_\_\_\_

County: \_\_\_\_\_ Township: \_\_\_\_\_

UIC#: \_\_\_\_\_

Transporter: \_\_\_\_\_

Truck No: \_\_\_\_\_

Water Type: \_\_\_\_\_

Volume/Barrels: \_\_\_\_\_ Weight lbs/gals: \_\_\_\_\_

Specific Gravity: \_\_\_\_\_

Driver Name: \_\_\_\_\_