21

CLIMAX MOLYBDENUM COMPANY
A unit of AMAX Inc.

P.O. BOX 220 • FORT MADISON, IOWA 52627 • (319) 463-7151 Telephone
(319) 463-7315 Rapifax

August 28, 1990

Environmental Protection Agency
Region VII
726 Minnesota Avenue
Kansas City, KS 66061
Attn: Tony Petruska
Re: Request for Information

RECEIVED
AUG 31 1990
IOWA SECTION

Dear Mr. Petruska,

Enclosed is the information requested in your agency's letter of August 7, 1990 regarding waste management at our Fort Madison, Iowa facility. Pursuant to a conversation of Dr. Van Riper of our Golden, Colorado Environmental Affairs office and yourself on August 15th, I have summarized solid and hazardous waste generation rates on an annual basis, and have not included information on domestic and municipal type wastes.

The Fort Madison, Climax Molybdenum facility has both a molybdenum plant which began operation in 1977 and a tungsten plant which began operation in 1981. Both of these plants are mineral processing operations. The indigenous wastes generated from these facilities were excluded from the RCRA hazardous waste regulations by the scope of the original Bevill amendment. Non-indigenous waste such as spent solvents have always been subject to and handled as required under RCRA.

An additional waste stream that is generated at our facility is treated in a "totally enclosed" system and as a result is not characteristically hazardous when discharged. This waste is effluent from a selenium recovery plant, and is only hazardous due to low pH. After neutralization in the totally enclosed system, this water is discharged under an NPDES permit.

One other indigenous waste stream generated at this facility during this exclusionary period met the definition of the hazardous waste. This waste, referred to as the Moly Trisulfide Cake, has been manifested and disposed of in hazardous waste landfills since generation began in 1988, even though not legally required.

Only one non-indigenous waste is generated from this facility and is referenced to as cleaning solvent. As pointed out in the attached data, this solvent is non-halogenated and we contract with Safety-Kleen Corporation to pick up and reclaim the spent solvent.

We believe the enclosed material provides the information your office has requested. If you have any questions, please contact me.

Sincerely,

Thomas E. Anderson, P.E.
Environmental Engineer

R00000283
RCRA Records Center

TEA/cb
Encl.
cc: T. C. Kearns/S. Janic/G. G. Van Riper

Hazardous Waste Activities Information
Climax Molybdenum Co.
Fort Madison, Ia
August 27, 1990

The following information is provided in response to EPA's Request for Information letter received on August 9, 1990.

1. **List of Wastes**

Attached is a table entitled Waste Disposal History which details the waste quantities from this facility since 1985. The wastes include tungsten residue, moly sulfide cake, gypsum sludge, selenium cake, selenium plant effluent, waste elemental sulfur, and cleaning solvent. Of these waste streams the moly sulfide cake and the cleaning solvent are characteristic hazardous wastes.

2. **Waste Analytical Data**

Attached are the latest analytical tests available for each of the waste streams. Two of the waste streams are no longer generated. The waste sulfur is now all recycled and the selenium cake is now sold as a product.

Two of the waste streams are hazardous. The moly sulfide cake is characteristic hazardous because of leachable arsenic. A cleaning solvent used in maintenance is hazardous because of ignitability.

None of the waste streams are now Bevill-excluded wastes.

3. **Hazardous Waste Management Practices**

All hazardous wastes generated at this facility have been disposed of in accordance with RCRA regulations. Training of all plant personnel has been conducted regarding RCRA regulations, personnel safety, release prevention and response, decontamination procedures and facility operating procedures. A Contingency Plan has been written. A description of the management practices for each of our hazardous wastes is a follows:

a. Moly Sulfide Cake

The moly sulfide cake is placed in nonleaking steel boxes and stored in a designated area out of the

weather. Each container is labeled and inspected weekly until shipment. No treatment is done to the waste. All equipment in contact with the waste,ie: shovels, forklift trucks etc., is washed inside the plant generating the waste. The washings are returned to the process. Employees are required to wear dust masks, eye protection, and overalls when working with the waste.

The waste is shipped by bulk dump truck to the disposal sites. Listed below are the transporters and disposal sites used.

Transporters

Heritage Transport
EPA ID No. IND058484114
Phone: 317-241-9406

Beelman Truck Company
EPA ID No. ILD007814825
Phone: 618-768-4411

Chemical Waste Management
EPA ID No. ILD099202681
Phone: 219-423-1665

Disposal Facilities

Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind 46231
EPA ID No. IND093219012
Phone: 319-243-0811

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID No. ALD000622464
Phone: 205-650-9721

b. Cleaning Solvent

The cleaning solvent is used at two locations in the maintenance department. At each location the solvent is contained in a 20 gallon steel drum with a wash sink fitted on top of the drum. Parts are cleaned at the sinks. At regular bimonthly intervals the vendor, Safety-Kleen, replaces the solvent with new ones and immediately transports the used solvent drum for reconditioning. There is no waste storage or treatment on site.

Transporters

Safety-Kleen Corp.
EPA ID No. ILD051060408
Phone: 319-386-3024

Disposal Facilities

Safety-Kleen Corp.
3035 West 73rd Street
Davenport, Ia. 520806
EPA ID No. IAD098027592
Phone: 319-386-3024

4. **Manifests**

Attached are copies of the manifests used to transport both the nonregulated wastes and regulated hazardous wastes generated from our facility since 1985.

Waste Disposal History

Climax Molybdenum Co.

Fort Madison, Ia

	Mineral Processing Wastes (Kg)						Nonindigenous Wastes (Kg)
Date	Tungsten Residue	Moly Trisulfide Cake	Gypsum Sludge (2)	Selenium Cake	Se Plant Effluent (5)	Elemental Sulfur	Cleaning Solvent
1985	3,146,107	0	0	0	4,800,000	0	0
1986	2,819,213	0	0	14,397	4,800,000	8,391	0
1987	888,432	0	0	0 (3)	4,800,000	0 (4)	0
1988	0	184,358	8,485,634	0 (3)	4,800,000	0 (4)	0
1989	2,343,600	169,516	0	0 (3)	4,800,000	0 (4)	78
1990 (1)	550,586	35,180	0	0 (3)	4,800,000	0 (4)	312

– Hazardous Waste

Notes:
(1) – Thru July 1990
(2) – Quanity shipped offsite; annual production 2,000,000 – 3,500,000 kg/year
(3) – Sold as product
(4) – Sulfur is recycled in plant
(5) – Estimated based upon average 40,000 gpd for 330 days/year

ANALYTICAL DATA

CERTIFICATE OF ANALYSIS

CORRESPOND TO

EMS Laboratories, Inc.
7901 West Morris Street
Indianapolis, Indiana 46231
(317) 243-8304

SAMPLE

EMS SAMPLE : 133421
REPORT DATE : 11/17/89
DATE RECEIVED : 10/26/89
DATE COMPLETE : 11/16/89

REPORT TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

BILL TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

DESCRIPTION

RHENIUM CAKE RE89GL-24

DATE :
TIME :

P.O. NUMBER : D 05845

TEST DESCRIPTION / ANALYTE	RESULT	METHOD	DATE / DET. LIMIT	ANALYST / UNITS
ARSENIC, LEACHATE		SW846-7060	11/14/89	SEG
ARSENIC, LEACHATE	: 4.0		1.0	MG/L
INSTRUMENT	: PE 3030 GFAA			
ADDITION 1 (MG/L)	: 0.010			
SAMPLE ABS	: 0.078			
SAMPLE + ADD 1 ABS	: 0.119			
DILUTION	: 1:200			
BARIUM, LEACHATE		SW846-7080	11/10/89	AJD
BARIUM, LEACHATE	: BDL		0.20	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 5.0			
SAMPLE CONC	: 0.11			
SAMPLE + ADD 1 CONC	: 4.65			
DILUTION	: NA			
CADMIUM, LEACHATE		SW846-7130	11/13/89	AJD
CADMIUM, LEACHATE	: BDL		0.02	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 0.5			
SAMPLE CONC	: 0.01			
SAMPLE + ADD 1 CONC	: 0.45			
DILUTION	: NA			
CHROMIUM, LEACHATE		SW846-7190	11/13/89	AJD
CHROMIUM, LEACHATE	: 0.37		0.05	MG/L
INSTRUMENT	: IL S12 FAA			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
ADDITION 1 (MG/L)	1.0			
SAMPLE CONC	0.37			
SAMPLE + ADD 1 CONC	1.39			
DILUTION	NA			
LEAD, LEACHATE		SW846-7420	11/10/89	LMT
LEAD, LEACHATE	BDL		0.20	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	5.0			
SAMPLE CONC	0.01			
SAMPLE + ADD 1 CONC	5.52			
DILUTION	NA			
MERCURY, LEACHATE		SW846-7470	11/08/89	AJD
MERCURY, LEACHATE	BDL		0.0050	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.0020			
SAMPLE (ABS)	0.002			
SAMPLE + ADD 1 (ABS)	0.064			
DILUTION	NA			
SELENIUM, LEACHATE		SW846-7740	11/14/89	PAS
SELENIUM, LEACHATE	BDL		0.050	MG/L
INSTRUMENT	PE 5100 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.001			
SAMPLE + ADD 1 ABS	0.043			
DILUTION	1:10			
SILVER, LEACHATE		SW846-7760	11/13/89	LMT
SILVER, LEACHATE	BDL		0.04	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	0.46			
DILUTION	NA			
TCLP EXTRACTION		SW846-1311	11/06/89	MAS
TCLP EXTRACTION	COMPLETE		NA	NA
TOT. SAMPLE WT., G	100			
LIQUID FRACTION, G	0			
LIQUID FRACTION, ML	0			
9.5 mm SIEVE TEST	PASSED			
> 0.5 PERCENT SOLIDS	YES			
INITIAL PH, STD UNIT	2.0			
ADJUSTED PH	NA			
BUFFER SOLUTION PH	4.92			
EXT. SAMPLE, G	95			
VOL. BUFFER SOLN, ML	1900			
VOL. EXT. FILT., ML	1900			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
TOT. VOL. FILT., ML.....	: 1900			
INITIAL TIME, HRS	: 6335.8			
FINAL TIME, HRS	: 6353.8			
ACID DIGESTION OF LEACHATE FOR FAA OR ICP		SW846-3010	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			
ACID DIGESTION OF LEACHATE FOR GFAA		SW846-3020	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			

ND - Not Detected
NA - Not Applicable
BDL - Below Detection Limit

Approved by : D. Peterson

ENVIRONMENTAL PROTECTION SYSTEMS, INC.

ANALYTICAL DIVISION
P.O. Box 20382 • 160 Upton Drive
Jackson, Mississippi 39209
(601) 922-8242

ANALYTICAL DIVISION
7215 Pine Forest Road
Pensacola, Florida 32506
(904) 944-0301

LABORATORY CERTIFICATIONS: U.S. EPA Inorganic CLP, FL DHRS (#81245), and ADEM (#40230)

LABORATORY REPORT

89.3.142 | 1/3

CLIENT:	EGS Watts	COLLECTED BY:	Client (1810)
LOCATION:	Taylor Ridge, IL	DATE COLLECTED:	Unknown
DATE:	06/09/88	DATE RECEIVED:	05/17/88
INVOICE NO.	3-1230/bcs	DATE ANALYZED:	05/18-06/08/88

LABORATORY SAMPLE IDENTIFICATION

88.325.1 - AMAX Molybdenum Co., Waste Molybdenum Sulfide Cake, W3-719

ANALYSES	IDENTIFICATION NO.				QUALITY CONTROL		
	325.1				STANDARD OR SPIKE VALUE	% RECOVERY	RELATIVE % DEVIATION
Arsenic, Total, mg/Kg	7626						
Arsenic, Total, (EPTOX) mg/L	51.2						
Barium, Total, mg/Kg	<1.0						
Cadmium, Total, mg/Kg	<1.0						
Chromium, Total, mg/Kg	98.3						
Chromium, Hexavalent, (EPTOX) mg/L	<0.02						
Lead, Total, mg/Kg	4.86						
Lead, Total, (EPTOX) mg/L	0.01						
Mercury, Total, mg/Kg	42.6						
Mercury, Total, (EPTOX) mg/L	<0.05						

COMMENT

Analyzed in accordance with Test Methods for Evaluating Solid Wastes, Physical/Chemical Methods, SW-846.

*Quality control data available upon request. All values for calibration verifications, blanks, spikes, and duplicates are within control limits unless specified.

CERTIFICATION

Carl B. Causey
QUALITY ASSURANCE AND QUALITY CONTROL

Vance C. Allen
ANALYTICAL AND BIO-ANALYTICAL SERVICES

This report applies only to the sample investigated and is not necessarily indicative of the quality of apparently identical or similar samples. The liability of the laboratory is limited to the amount paid for the report by the client. The client assumes all liability for the further distribution of this report or its content and [illegible] indemnifies and holds the laboratory harmless against all claims of persons so informed of the contents hereof.

ENVIRONMENTAL PROTECTION SYSTEMS, INC.

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Pensacola, Florida 32506
(904) 944-0301

LABORATORY CERTIFICATIONS: U.S. EPA Inorganic CLP, FL DHRS (#81245), and ADEM (#40230).

LABORATORY REPORT

89.3.142 | 2/3

CLIENT:	EGS Watts	COLLECTED BY:	Client (1810)
LOCATION	Taylor Ridge, IL	DATE COLLECTED:	Unknown
DATE	06/09/88	DATE RECEIVED:	05/17/88
INVOICE NO	3-1230/bcs	DATE ANALYZED:	05/18-06/08/88

LABORATORY SAMPLE IDENTIFICATION

88.325.1 - AMAX Molybdenum Co., Waste Molybdenum Sulfide Cake, W3-719

ANALYSES	IDENTIFICATION NO.				QUALITY CONTROL		
	325.1				STANDARD OR SPIKE VALUE	% RECOVERY	% RELATIVE DEVIATION
Selenium, Total, mg/Kg	16.1						
Selenium, Total, (EPTOX) mg/L	0.04						
Silver, Total, mg/Kg	<2.0						
Cyanide, Total, mg/Kg	<0.5						
Phenol, Total, mg/Kg	1.88						
Sulfide, Total, mg/Kg	<5.0						
pH, Units	2.04						
Acidity, as $CaCO_3$, (to pH 8.3), mg/L	2265						
Organic Carbon, Total, %	64						
Organic Halides, Total Extractable, mg/Kg	<2.5						

COMMENT

Analyzed in accordance with Test Methods for Evaluating Solid Wastes, Physical/Chemical Methods, SW-846.

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CERTIFICATION

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QUALITY ASSURANCE AND QUALITY CONTROL

Verne C Allen
ANALYTICAL AND BIO-ANALYTICAL SERVICES

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LABORATORY CERTIFICATIONS: U.S. EPA Inorganic CLP, FL DHRS (#81245), and ADEM (#40230)

LABORATORY REPORT

89.3.142 | 3/3

CLIENT:	EGS Watts	COLLECTED BY:	Client (1810)
LOCATION:	Taylor Ridge, IL	DATE COLLECTED:	Unknown
DATE:	06/09/88	DATE RECEIVED:	05/17/88
INVOICE NO.	3-1230/bcs	DATE ANALYZED:	05/18-06/08/88

LABORATORY SAMPLE IDENTIFICATION

88.325.1 - AMAX Molybdenum Co., Waste Molybdenum Sulfide Cake, W3-719

ANALYSES	IDENTIFICATION NO.				QUALITY CONTROL		
	325.1				STANDARD OR SPIKE VALUE	% RECOVERY	% RELATIVE DEVIATION
Residue, Total, (TS), %	50.95						
Flash Point, Close-Cup, °F	>212						
Waste Phase	Single						
Paint Filter Test	Pass						

COMMENT

Analyzed in accordance with Test Methods for Evaluating Solid Wastes, Physical/Chemical Methods, SW-846.

*Quality control data available upon request. All values for calibration verifications, blanks, spikes, and duplicates are within control limits unless specified.

CERTIFICATION

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ANALYTICAL AND BIO-ANALYTICAL SERVICES

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CERTIFICATE OF ANALYSIS

CORRESPOND TO

EMS Laboratories, Inc.
7901 West Morris Street
Indianapolis, Indiana 46231
(317) 243-8304

SAMPLE

EMS SAMPLE : 133422
REPORT DATE : 11/17/89
DATE RECEIVED : 10/26/89
DATE COMPLETE : 11/16/89

REPORT TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

BILL TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

DESCRIPTION

MOS3 CAKE MS89102301

DATE :
TIME :

P.O. NUMBER : D 05845

TEST DESCRIPTION / ANALYTE	RESULT	METHOD	DATE / DET. LIMIT	ANALYST / UNITS
ARSENIC, LEACHATE		SW846-7060	11/14/89	SEG
ARSENIC, LEACHATE	34		5.0	MG/L
INSTRUMENT	PE 3030 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.132			
SAMPLE + ADD 1 ABS	0.169			
DILUTION	1:1000			
BARIUM, LEACHATE		SW846-7080	11/10/89	AJD
BARIUM, LEACHATE	0.23		0.20	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	5.0			
SAMPLE CONC	0.23			
SAMPLE + ADD 1 CONC	4.95			
DILUTION	NA			
CADMIUM, LEACHATE		SW846-7130	11/13/89	AJD
CADMIUM, LEACHATE	BDL		0.02	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	0.02			
SAMPLE + ADD 1 CONC	0.51			
DILUTION	NA			
CHROMIUM, LEACHATE		SW846-7190	11/13/89	AJD
CHROMIUM, LEACHATE	BDL		0.05	MG/L
INSTRUMENT	IL S12 FAA			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
ADDITION 1 (MG/L)	: 1.0			
SAMPLE CONC	: BDL			
SAMPLE + ADD 1 CONC	: 1.86			
DILUTION	: NA			
LEAD, LEACHATE		SW846-7420	11/10/89	LMT
LEAD, LEACHATE	: 0.9		0.20	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 5.0			
SAMPLE CONC	: 0.90			
SAMPLE + ADD 1 CONC	: 6.22			
DILUTION	: NA			
MERCURY, LEACHATE		SW846-7470	11/08/89	AJD
MERCURY, LEACHATE	: BDL		0.0050	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 0.0020			
SAMPLE (ABS)	: 0.002			
SAMPLE + ADD 1 (ABS)	: 0.065			
DILUTION	: NA			
SELENIUM, LEACHATE		SW846-7740	11/14/89	PAS
SELENIUM, LEACHATE	: BDL		0.050	MG/L
INSTRUMENT	: PE 5100 GFAA			
ADDITION 1 (MG/L)	: 0.010			
SAMPLE ABS	: BDL			
SAMPLE + ADD 1 ABS	: 0.038			
DILUTION	: 1:10			
SILVER, LEACHATE		SW846-7760	11/13/89	LMT
SILVER, LEACHATE	: BDL		0.04	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 0.5			
SAMPLE CONC	: 0.02			
SAMPLE + ADD 1 CONC	: 0.49			
DILUTION	: NA			
TCLP EXTRACTION		SW846-1311	11/06/89	MAS
TCLP EXTRACTION	: COMPLETE		NA	NA
TOT. SAMPLE WT., G	: 100			
LIQUID FRACTION, G	: 0			
LIQUID FRACTION, ML	: 0			
9.5 mm SIEVE TEST	: PASSED			
> 0.5 PERCENT SOLIDS	: YES			
INITIAL PH, STD UNIT	: 3.0			
ADJUSTED PH	: NA			
BUFFER SOLUTION PH	: 4.93			
EXT. SAMPLE, G	: 95			
VOL. BUFFER SOLN, ML	: 1900			
VOL. EXT. FILT., ML	: 1900			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
TOT. VOL. FILT., ML.....	: 1900			
INITIAL TIME, HRS	: 6335.8			
FINAL TIME, HRS	: 6353.8			
ACID DIGESTION OF LEACHATE FOR FAA OR ICP		SW846-3010	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			
ACID DIGESTION OF LEACHATE FOR GFAA		SW846-3020	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			

ND - Not Detected
NA - Not Applicable
BDL - Below Detection Limit

Approved by : DL Paterson

CERTIFICATE OF ANALYSIS

CORRESPOND TO

EMS Laboratories, Inc.
7901 West Morris Street
Indianapolis, Indiana 46231
(317) 243-8304

RECEIVED
NOV 0 6 1989
AMAX, Inc.

SAMPLE

EMS SAMPLE : 131642
REPORT DATE : 11/02/89
DATE RECEIVED : 09/29/89
DATE COMPLETE : 11/01/89

REPORT TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

BILL TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

DESCRIPTION

SAMPLE NO. BR89092001
BELT RESIDUE COMPOSITE - AUG & SEPT 1989
P.O. NUMBER : D 05845

DATE : 09/20/89
TIME :

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
ARSENIC, LEACHATE		SW846-7060	10/31/89 0.020	SJE MG/L
ARSENIC, LEACHATE	: 0.12			
INSTRUMENT	: PE 5100 GFAA			
ADDITION 1 (MG/L)	: 0.010			
ADDITION 2 (MG/L)	: 0.020			
ADDITION 3 (MG/L)	: 0.040			
SAMPLE (ABS)	: 0.122			
SAMPLE + ADD 1 (ABS)	: 0.164			
SAMPLE + ADD 2 (ABS)	: 0.202			
SAMPLE + ADD 3 (ABS)	: 0.279			
DILUTION	: 1:4			
BARIUM, LEACHATE		SW846-7080	10/20/89 20.0	AJD MG/L
BARIUM, LEACHATE	: 45.0			
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 2.5			
SAMPLE CONC	: 0.45			
SAMPLE + ADD 1 CONC	: 2.75			
DILUTION	: 1:100			
CADMIUM, LEACHATE		SW846-7130	10/19/89 0:020	LMT MG/L
CADMIUM, LEACHATE	: 0.23			
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 0.5			
SAMPLE CONC	: 0.23			
SAMPLE + ADD 1 CONC	: 0.65			
DILUTION	: NA			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
CHROMIUM, LEACHATE		SW846-7190	10/19/89 0.05	AJD MG/L
CHROMIUM, LEACHATE	BDL			
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	1.0			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	1.12			
DILUTION	NA			
LEAD, LEACHATE		SW846-7420	10/19/89 0.20	LMT MG/L
LEAD, LEACHATE	BDL			
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	5.0			
SAMPLE CONC	0.13			
SAMPLE + ADD 1 CONC	4.40			
DILUTION	NA			
MERCURY, LEACHATE		SW846-7470	10/27/89 0.0050	RLB MG/L
MERCURY, LEACHATE	BDL			
INSTRUMENT	PE 2380			
ADDITION 1 (MG/L)	0.0020			
SAMPLE (ABS)	0.002			
SAMPLE + ADD 1 (ABS)	0.081			
DILUTION	NA			
SELENIUM, LEACHATE		SW846-7740	10/20/89 0.010	WPT MG/L
SELENIUM, LEACHATE	BDL			
INSTRUMENT	PE 5100 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.009			
SAMPLE + ADD 1 ABS	0.027			
DILUTION	1:2			
SILVER, LEACHATE		SW846-7760	10/20/89 0.040	AJD MG/L
SILVER, LEACHATE	BDL			
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	0.49			
DILUTION	NA			
TCLP EXTRACTION		SW846-1311	10/16/89 NA	MAS NA
TCLP EXTRACTION	COMPLETE			
TOT. SAMPLE WT., G	100			
LIQUID FRACTION, G	0			
LIQUID FRACTION, ML	0			
9.5 mm SIEVE TEST	PASSED			
> 0.5 PERCENT SOLIDS	YES			
INITIAL PH, STD UNIT	10.6			
ADJUSTED PH	6.5			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
BUFFER SOLUTION PH	: 2.86			
EXT. SAMPLE, G	: 95			
VOL. BUFFER SOLN, ML.....	: 1900			
VOL. EXT. FILT., ML	: 1900			
TOT. VOL. FILT., ML.....	: 1900			
INITIAL TIME, HRS	: 5570.9			
FINAL TIME, HRS	: 5588.9			
ACID DIGESTION OF LEACHATE FOR FAA OR ICP		SW846-3010	10/18/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			
ACID DIGESTION OF LEACHATE FOR GFAA		SW846-3020	10/18/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			

ND - Not Detected
NA - Not Applicable
BDL - Below Detection Limit

Approved by : _____

CERTIFICATE OF ANALYSIS

CORRESPOND TO

EMS Laboratories, Inc.
7901 West Morris Street
Indianapolis, Indiana 46231
(317) 243-8304

RECEIVED
NOV 0 3 1989
AMAX, Inc.

SAMPLE

EMS SAMPLE : 131641
REPORT DATE : 10/31/89
DATE RECEIVED : 09/29/89
DATE COMPLETE : 10/30/89

REPORT TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

BILL TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

DESCRIPTION

SAMPLE NO. BR89092001
BELT RESIDUE COMPOSITE - AUG & SEPT 1989
P.O. NUMBER : D 05845

DATE : 09/20/89
TIME :

TEST DESCRIPTION / ANALYTE	RESULT	METHOD	DATE / DET. LIMIT	ANALYST / UNITS
ARSENIC, LEACHATE		SW846-7060	10/24/89	WPT
ARSENIC, LEACHATE	0.092		0.020	MG/L
INSTRUMENT	PE 5100 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.120			
SAMPLE + ADD 1 ABS	0.71			
DILUTION	1:4			
BARIUM, LEACHATE		SW846-7080	10/20/89	AJD
BARIUM, LEACHATE	7.9		0.40	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	2.5			
SAMPLE CONC	3.97			
SAMPLE + ADD 1 CONC	6.22			
DILUTION	1:2			
CADMIUM, LEACHATE		SW846-7130	10/19/89	LMT
CADMIUM, LEACHATE	0.21		0.020	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	0.21			
SAMPLE + ADD 1 CONC	0.63			
DILUTION	NA			
CHROMIUM, LEACHATE		SW846-7190	10/19/89	AJD
CHROMIUM, LEACHATE	BDL		0.05	MG/L
INSTRUMENT	IL S12 FAA			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
ADDITION 1 (MG/L)	: 1.0			
SAMPLE CONC	: BDL			
SAMPLE + ADD 1 CONC	: 0.93			
DILUTION	: NA			
LEAD, LEACHATE		SW846-7420	10/19/89	LMT
LEAD, LEACHATE	: BDL		0.20	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 5.0			
SAMPLE CONC	: 0.10			
SAMPLE + ADD 1 CONC	: 4.39			
DILUTION	: NA			
MERCURY, LEACHATE		SW846-7470	10/27/89	RLB
MERCURY, LEACHATE	: BDL		0.0050	MG/L
INSTRUMENT	: PE 2380			
ADDITION 1 (MG/L)	: 0.0020			
SAMPLE (ABS)	: 0.001			
SAMPLE + ADD 1 (ABS)	: 0.081			
DILUTION	: NA			
SELENIUM, LEACHATE		SW846-7740	10/24/89	WPT
SELENIUM, LEACHATE	: BDL		0.010	MG/L
INSTRUMENT	: PE 5100 GFAA			
ADDITION 1 (MG/L)	: 0.010			
SAMPLE ABS	: -0.003			
SAMPLE + ADD 1 ABS	: 0.029			
DILUTION	: 1:2			
SILVER, LEACHATE		SW846-7760	10/20/89	AJD
SILVER, LEACHATE	: BDL		0.040	MG/L
INSTRUMENT	: IL S12 FAA			
ADDITION 1 (MG/L)	: 0.5			
SAMPLE CONC	: 0.01			
SAMPLE + ADD 1 CONC	: 0.47			
DILUTION	: NA			
EP TOXICITY EXTRACTION, WITHOUT ORGANICS		SW846-1310	10/12/89	MAS
EP TOX EXT, W/O	: COMPLETE		NA	NA
TOT SAMPLE WEIGHT, G	: 100			
SOLID PORTION, G	: 100			
LIQUID PORTION, ML	: 0			
9.5 mm SIEVE TEST	: PASSED			
INITIAL DI ADDED, ML	: 1600			
FINAL DI ADDED, ML	: 0			
INITIAL PH	: 10.7			
FINAL PH	: 5.7			
PH ADJUSTMENTS	: ATTACHED			
TOTAL ACID ADDED, ML	: 400			
VOL EXTRACT FILT, ML	: 2000			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
TOT VOL FILTRATES,ML.....	: 2000			
VOL EXTRACT ANAL, ML.....	: 19			
SPIKE SOLUTION, ML	: 1			
ACID DIGESTION OF LEACHATE FOR FAA OR ICP		SW846-3010	10/17/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			
ACID DIGESTION OF LEACHATE FOR GFAA		SW846-3020	10/17/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			

ND - Not Detected
NA - Not Applicable
BDL - Below Detection Limit

Approved by : N. Peterson

CERTIFICATE OF ANALYSIS

CORRESPOND TO

EMS Laboratories, Inc.
7901 West Morris Street
Indianapolis, Indiana 46231
(317) 243-8304

RECEIVED
NOV 20 1989
AMAX, Inc.

SAMPLE

EMS SAMPLE : 133420
REPORT DATE : 11/17/89
DATE RECEIVED : 10/26/89
DATE COMPLETE : 11/16/89

REPORT TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

BILL TO

TOM ANDERSON
AMAX
P.O. BOX 220
FORT MADISON IA 52627

DESCRIPTION

GYPSUM SLUDGE 6P 89102301

DATE :
TIME :

P.O. NUMBER : D 05845

TEST DESCRIPTION / ANALYTE	RESULT	METHOD	DATE / DET. LIMIT	ANALYST / UNITS
ARSENIC, LEACHATE		SW846-7060	11/14/89	SEG
ARSENIC, LEACHATE	BDL		0.020	MG/L
INSTRUMENT	PE 3030 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.000			
SAMPLE + ADD 1 ABS	0.041			
DILUTION	1:4			
BARIUM, LEACHATE		SW846-7080	11/10/89	AJD
BARIUM, LEACHATE	BDL		2.0	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	5.0			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	4.36			
DILUTION	1:10			
CADMIUM, LEACHATE		SW846-7130	11/13/89	AJD
CADMIUM, LEACHATE	BDL		0.02	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	0.01			
SAMPLE + ADD 1 CONC	0.50			
DILUTION	NA			
CHROMIUM, LEACHATE		SW846-7190	11/13/89	AJD
CHROMIUM, LEACHATE	BDL		0.05	MG/L
INSTRUMENT	IL S12 FAA			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
ADDITION 1 (MG/L)	1.0			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	1.86			
DILUTION	NA			
LEAD, LEACHATE		SW846-7420	11/10/89	LMT
LEAD, LEACHATE	BDL		0.20	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	5.0			
SAMPLE CONC	0.03			
SAMPLE + ADD 1 CONC	5.50			
DILUTION	NA			
MERCURY, LEACHATE		SW846-7470	11/08/89	AJD
MERCURY, LEACHATE	BDL		0.0050	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.0020			
SAMPLE (ABS)	0.002			
SAMPLE + ADD 1 (ABS)	0.064			
DILUTION	NA			
SELENIUM, LEACHATE		SW846-7740	11/14/89	PAS
SELENIUM, LEACHATE	BDL		0.050	MG/L
INSTRUMENT	PE 5100 GFAA			
ADDITION 1 (MG/L)	0.010			
SAMPLE ABS	0.009			
SAMPLE + ADD 1 ABS	0.043			
DILUTION	1:10			
SILVER, LEACHATE		SW846-7760	11/13/89	LMT
SILVER, LEACHATE	BDL		0.04	MG/L
INSTRUMENT	IL S12 FAA			
ADDITION 1 (MG/L)	0.5			
SAMPLE CONC	BDL			
SAMPLE + ADD 1 CONC	0.46			
DILUTION	NA			
TCLP EXTRACTION		SW846-1311	11/06/89	MAS
TCLP EXTRACTION	COMPLETE		NA	NA
TOT. SAMPLE WT., G	100			
LIQUID FRACTION, G	0			
LIQUID FRACTION, ML	0			
9.5 mm SIEVE TEST	PASSED			
> 0.5 PERCENT SOLIDS	YES			
INITIAL PH, STD UNIT	11.2			
ADJUSTED PH	2.1			
BUFFER SOLUTION PH	4.96			
EXT. SAMPLE, G	95			
VOL. BUFFER SOLN, ML	1900			
VOL. EXT. FILT., ML	1900			

TEST DESCRIPTION ANALYTE	RESULT	METHOD	DATE DET. LIMIT	ANALYST UNITS
TOT. VOL. FILT., ML.....	: 1900			
INITIAL TIME, HRS	: 6336.0			
FINAL TIME, HRS	: 6354.0			
ACID DIGESTION OF LEACHATE FOR FAA OR ICP		SW846-3010	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			
ACID DIGESTION OF LEACHATE FOR GFAA		SW846-3020	11/09/89	SWS
METALS DIGESTION	: COMPLETE		NA	ML
INITIAL VOL, ML	: 100			
FINAL VOL, ML	: 100			

ND - Not Detected
NA - Not Applicable
BDL - Below Detection Limit

Approved by : D. Peterson

Selenium Plant Effluent

The Selenium Plant Effluent pH is not routinely monitored before it is neutralized. The pH normally ranges between .5 - 2.0. Listed below are typical pH measurements taken in 1988. The acidity can range from 5% - 12%.

Se Plant Effluent pH

07/27/88	1.14
08/23/88	1.18
09/21/88	1.11
10/04/88	1.57
11/01/88	1.68
12/05/88	1.04

Avg	1.32

LABORATORY ANALYSIS

1. E. P. Toxicity Test

   Extraction Analysis

Arsenic	< 0.02 mg/l
Barium	0.2 mg/l
Cadmium	< 0.02 mg/l
Chromium (Total)	< 0.12 mg/l
Chromium (Hexavelent)	< 0.2 mg/l
Copper	0.09 mg/l
Fluoride	0.10 mg/l
Lead	< 0.10 mg/l
Mercury	< 0.02 mg/l
Nitrate	< 1 mg/l
Selenium	0.03 mg/l
Silver	< 0.06 mg/l
Zinc	0.14 mg/l

2. pH of E. P. Extract = 4.26

3. Elemental sulfur only. See attached Material Safety Data Sheet.

RECEIVED

APR - 8 '85

No. 56

MATERIAL SAFETY DATA SHEET

GENIUM PUBLISHING CORPORATION
P.O. BOX 1436, SCHENECTADY, NY 12301 USA
(518) 385-2577

GENIUM PUBLISHING CORP.

SULFUR

Date October 1979

SECTION I. MATERIAL IDENTIFICATION

MATERIAL NAME: SULFUR
DESCRIPTION: Pure sulfur exists in several solid forms. The common forms (S_8 ring) of molecular weight 256.512 are alpha and beta crystalline forms and an amorphous form.
OTHER DESIGNATIONS: Sulphur, Flowers of Sulfur, Sulfur Flour, Sublimed Sulfur, Brimstone, CAS #007 704 349, GE Material D4F11
MANUFACTURER: Available from many sources, including Stauffer Chemical Co., Specialty Chemicals Division, Westport, CT 06880

SECTION II. INGREDIENTS AND HAZARDS	%	HAZARD DATA
Sulfur	ca 100	No TLV Established*

*The Nuisance Dust TLV should govern exposure to solid sulfur in the absence of other standards. ACGIH (1979) is 10 mg/m^3 (total dust) or 5 mg/m^3 (respirable dust).

SECTION III. PHYSICAL DATA

Boiling point at 1 atm, deg C -------- 444.6 Melting point, deg C ---- 112.8-119.0*
Vapor pressure at 20 C, mm Hg -------- <0.0001 Specific gravity, 20/4C - 1.92-2.07*
Water solubility ---------- Insoluble

Appearance & Odor: Yellow rhombic or monoclinic crystals, powder, granular, lump, stick, etc. Pure sulfur has no odor or taste.

*Property depends on allotropic form(s) present and the measurement technique. The transition temperature is about 95 C (slow conversion) between α- and β-crystalline forms.

SECTION IV. FIRE AND EXPLOSION DATA

Flash Point and Method	Autoignition Temp.	Flammability Limits In Air	LOWER	UPPER
>335 F (CC)	Dust Cloud 375 F Undispersed >428 F	Dust, g/m^3	35	1400

Extinguishing Media: Water spray or fog is the most satisfactory. Steam and carbon dioxide may be useful in special cases. Streams of water from a nozzle can scatter molten sulfur and disperse sulfur dust into the air.
Sulfur dust is a moderate explosion hazard when dispersed in air. It is a greater explosion hazard when it is in contact with oxidizing agents. Bulk sulfur is a slight fire hazard when exposed to heat or flame.
Firefighters may need self-contained breathing apparatus for SO_2 protection. Eye protection and full protective clothing may also be indicated in large fires.

SECTION V. REACTIVITY DATA

This combustible material is stable under normal storage and handling conditions. It does not undergo hazardous polymerization.
It ignites and burns readily to form SO_2. It can be dangerously explosive when intimately mixed with oxidizing agents: for example, nitrates, chlorates, chromic anhydride, potassium permanganate, lead dioxide, calcium hypochlorite, etc. Sulfur can react as an oxidizing agent to give highly exothermic reactions, for example with P_2O_3 or phosphorus, with carbides, and with metals. It can react with hydrocarbons and other other organic material when molten to produce H_2S and CS_2.
Dry sulfur is not corrosive to steel or aluminum; moist sulfur is corrosive to steel.

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SECTION VI. HEALTH HAZARD INFORMATION

TLV 5-10 mg/m^3 (See Sect. II)

Sulfur is very low in vapor pressure and very low in toxicity. It should be considered in the nuisance dust category.

Health hazards can arise from reaction products of sulfur, such as SO_2, H_2S, and CS_2 (see MSDS #50, #52, and #350, respectively).

Sulfur dust can irritate the mucous membranes of the respiratory tract and the inner surface of the eyelid. Sensitive persons can experience skin irritation from repeated exposure to sulfur dust. Allergenic responses can occur.

FIRST AID:

Eye Contact: Flush eyes with plenty of running water for at least 15 minutes, including under the eyelids.

Skin Contact: Remove sulfur dust by washing with soap and water. Remove clothing that becomes contaminated with sulfur dust.

Inhalation: Remove from exposure to fresh air.

Remove any worker from exposure to sulfur who shows allergic reactions; such individuals should not be assigned further work where exposed to sulfur without a physician's approval.

SECTION VII. SPILL, LEAK, AND DISPOSAL PROCEDURES

Provide ventilation in spill area (but do not stir up dust). Pick up spilled material for recovery or disposal in a manner that will not produce dusting conditions. (Powdered sulfur should not be scattered nor allowed to accumulate on surfaces from spills or plant operations.)

DISPOSAL: Small amounts of scrap can be disposed of by burning (SO_2 emission). Larger amounts can be buried in a landfill, mixed with 3 parts by weight of calcium carbonate to neutralize the slow generation of sulfuric acid. Contact supplier for further disposal options. Follow Federal, State and local regulations in disposing of this material.

SECTION VIII. SPECIAL PROTECTION INFORMATION

Provide general and exhaust ventilation to meet TLV requirements. Ventilation fans and other electrical services must meet requirements for sulfur dust exposure. (Electrical equipment suitable for Class I, Group D locations has been suggested as satisfactory.) Approved dust respirators should be provided for worker comfort and for protection against any dust exposure above the TLV. Self-contained breathing equipment should be available for fire situations, where SO_2 is generated.

To reduce body contact with sulfur dust workers should use gloves and dust-tight safety goggles. Workers with sensitive skin might further protect themselves with body-covering clothing and by the use of approved protective creams on the hands and face.

Use clean work clothing. Do not use clothing which is impregnated with sulfur dust.

An eyewash station and washing facilities should be readily available where workers are exposed to sulfur dust. Follow good hygienic practice in working with this material. Wash exposed skin with mild soap and water after work periods and before breaks.

SECTION IX. SPECIAL PRECAUTIONS AND COMMENTS

Store in a cool, ventilated area away from sources of heat and ignition and away from oxidizing agents and reactive chemicals (see Sect.V). (Sprinkler protection needed for large amounts of storage.) Guard against conditions or actions that could disperse sulfur dust in air. Provide grounding, humidification, etc. in transferring powdered sulfur to prevent static sparks from electrical charges which are readily developed in this material. Use nonsparking tools.

Follow good design and good housekeeping practices to prevent uncontrolled accumulations of sulfur dust. General dust containing 25% or more sulfur may be almost as explosive in air as 100% sulfur dust.

Avoid dust inhalation.

DATA SOURCE(S) CODE: 1-10,24,25

APPROVALS: MIS, CRD J. M. Nielsen

Industrial Hygiene and Safety O. Thrift

MEDICAL REVIEW: 12/79

Judgments as to the suitability of information herein for purchaser's purposes are necessarily purchaser's responsibility. Therefore, although reasonable care has been taken in the preparation of such information, Genium Publishing Corporation extends no warranties, makes no representations and assumes no responsibility as to the accuracy or suitability of such information for application to purchaser's intended purposes or for consequences of its use.

MANIFESTS

5-047-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IAD 000222653
Manifest Document No. 88115
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
CLIMAX MOLYBDENUM CO
HWY 61 S P O BOX 220
FORT MADISON IA 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name
SAFETY-KLEEN CORP.
6. US EPA ID Number
ILD 051060408

C. State Transporter's ID

D. Transporter's Phone 319 386-3024

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN CORP. 5-047-01
3035 WEST 73RD STREET
DAVENPORT, IA 52806
10. US EPA ID Number
IAD 098027592

G. State Facility's ID

H. Facility's Phone
319 386-3024

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)	X	2	DM	172	P	D001
b.						
c.						
d.						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information 9030 17712522 188115 5-047-01-5062 0617
IF UNDELIVERABLE, RETURN TO GENERATOR.FOR RECYCLE
EMERGENCY RESP#1-708-888-4660
SKDOT# A: 501 B: C: D:

16. GENERATOR'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 national government regulations

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: KENNETH OUGH
Signature: Kenneth Ough
Date: Month 07 Day 25 Year 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lynn Thesson
Signature: Lynn Thesson
Date: Month 07 Day 25 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dennis M. Shannon
Signature
Date: Month 07 Day 25 Year 90

SAFETY-KLEEN CORP.

RECEIVED
SEP 27 1990
CLIMAX MOLYBDENUM COMPANY
FORT MADISON, IOWA

GENERATOR

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

90290

6

ORIGINAL-RETURN TO GENERATOR

5-047-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IAD 000222653
Manifest Document No. 73591
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
CLIMAX MOLYBDENUM CO
HWY 61 S P O BOX 220
FORT MADISON IA 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name
SAFETY-KLEEN CORP.
6. US EPA ID Number
ILD 051060408

C. State Transporter's ID
D. Transporter's Phone 319 386-3024

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN CORP. 5-047-01
3035 WEST 73RD STREET
DAVENPORT, IA 52806
10. US EPA ID Number
IAD 098027592

G. State Facility's ID
H. Facility's Phone
319 386-3024

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)	X	2	DM	172	P	D001
b.						
c. NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE						
d. THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L).						

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information 9022 15975766 473591 5-047-01-5062 0417
IF UNDELIVERABLE, RETURN TO GENERATOR.FOR RECYCLE
EMERGENCY RESP#1-708-888-4660
SKDOT# A: 501 B: C: D:

16. **GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BRIAN MEIEROTTO
Signature: Brian Meierotto
Date: Month 05 Day 31 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lynn Claussen
Signature: Lynn Claussen
Date: Month 05 Day 31 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dennis M. Shannon
Signature:
Date: Month 05 Day 31 Year 90

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290

6

ORIGINAL - RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

5-047-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IAD 000222653
Manifest Document No.: 11206
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
CLIMAX MOLYBDENUM CO
HWY 61 S P O BOX 220
FORT MADISON IA 52627
4. Generator's Phone (319)463-7151

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 051060408
7. Transporter 2 Company Name
8. US EPA ID Number

C. State Transporter's ID
D. Transporter's Phone 319 386-3024
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN CORP. 5-047-01
3035 WEST 73RD STREET
DAVENPORT, IA 52806
10. US EPA ID Number: IAD 098027592

G. State Facility's ID
H. Facility's Phone 319 386-3024

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)	X	2	DM	172	P	D001
b.						
c.						
d.						

NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (500 MG/L).

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information 9006 12839585 211206 5-047-01-5062 0417
IF UNDELIVERABLE, RETURN TO GENERATOR.
FOR RECYCLE
SKDOT# A: 501 B: C: D:

16. GENERATOR'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 national government regulations

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: BRIAN J. MEIEROTTO
Signature: Brian J. Meierotto
Date: Month 02 Day 06 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lynn Clausen
Signature: Lynn Clausen
Date: Month 02 Day 06 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

RECEIVED
FEB 0 9 1990
AMAX, Inc.

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dennis M. Shannon
Signature
Month 02 Day 06 Year 90

SAFETY-KLEEN CORP.

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

90290

6

ORIGINAL-RETURN TO GENERATOR

GENERATOR

TRANSPORTER

FACILITY

INSTRUCTIONS FOR COMPLETION OF THIS FORM. REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

5-047-01

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IAD 000222653
Manifest Document No.: 99871
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
CLIMAX MOLYBDENUM CO
HWY 61 S P O BOX 220
FORT MADISON IA 52627
4. Generator's Phone (319)463-7151

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 051060406
7. Transporter 2 Company Name
8. US EPA ID Number

C. State Transporter's ID
D. Transporter's Phone 319 386-3024
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN CORP. 5-047-01
3035 WEST 73RD STREET
DAVENPORT, IA 52806
10. US EPA ID Number: IAD 098027592

G. State Facility's ID
H. Facility's Phone 319 386-3024

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)	X	2	DM	172	P	D001
b.						
c.						
d. NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (500 MG/L).						

RECEIVED
DEC 1 8 1989
AMAX, Inc.

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
8950 11317211 599871 5-047-01-5062 0417
IF UNDELIVERABLE, RETURN TO GENERATOR.
FOR RECYCLE
SKDOT# A: 501 B: C: D:

16. **GENERATOR'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 national government regulations

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Date: Month 12 Day 12 Year 89

17. Transporter 1 Acknowledgement of Receipt of Materials
TRANSPORTER — Printed/Typed Name: Lynn Clausen — Signature: Lynn Clausen — Date: Month 12 Day 12 Year 89

18. Transporter 2 Acknowledgement of Receipt of Materials
TRANSPORTER — Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space
FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
FACILITY — Printed/Typed Name: Dennis M. Sharron — Signature — Date: Month 12 Day 12 Year 89

SAFETY-KLEEN CORP.

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

90290

6

ORIGINAL - RETURN TO GENERATOR

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

Reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

5-047-01

Please print or type. (Form designed for use on elite (12 pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: IAD 000222653
Manifest Document No.: 26310
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
CLIMAX MOLYBDENUM CO
HWY 61 S P O BOX 220
FORT MADISON IA 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number
B. State Generator's ID

5. Transporter 1 Company Name: SAFETY-KLEEN CORP.
6. US EPA ID Number: ILD 051060408
C. State Transporter's ID
D. Transporter's Phone 319 386-3024

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
SAFETY-KLEEN CORP. 5-047-01
3035 WEST 73RD STREET
DAVENPORT, IA 52806
10. US EPA ID Number: IAD 098027592
G. State Facility's ID
H. Facility's Phone 319 386-3024

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

	HM	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)	X	2	DM	172	P	D001
b.						
c.						
d.						

RECEIVED
APR - 6 1990
AMAX, Inc.

NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L).

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
9014 14389498 826310 5-047-01-5062 0417
IF UNDELIVERABLE, RETURN TO GENERATOR.
FOR RECYCLE, EMERGENCY RESP#1-708-888-4660
SKDOT# A: 501 B: C: D:

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: BARBARA HOTOP
Signature: Barbara Hotop
Date: Month 04 Day 03 Year 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Lynn Claussen
Signature: Lynn Claussen
Date: Month 04 Day 03 Year 90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Dennis M. Swanson
Signature
Date: Month 04 Day 03 Year 90

GENERATOR — TRANSPORTER — FACILITY

U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

INSTRUCTIONS FOR COMPLETION OF THIS FORM, REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20.

EPA Form 8700-22 (Rev. 9-88) previous editions obsolete

SAFETY-KLEEN CORP.

90290 6

ORIGINAL - RETURN TO GENERATOR

T. Gridson

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

CLIMAX MOLYBDENUM
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 534038, 534039.

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 10 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature:

Pamela Moore

Title: Regulatory Document Control Clerk

Date: 03/14/90

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. M 2 5

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy. 61 S., Fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: CWMA 534039

B. State Generator's ID: N/A

5. Transporter 1 Company Name: Chemical Waste Management

6. US EPA ID Number: I L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

D. Transporter's Phone: 219/423-1655

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) 022090-0019 CWM 022091-2042 CWM Profile Number J75492 OAK	01	DT	37120	P	D0004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
State of origin of waste is Iowa as Required by A.D.E.M.
RQ 100
022091-2042

K. Handling Codes for Wastes Listed Above
a. L b. c. d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA Section 3004 (C1).
Work Order #. 9003/0002-01 Purchase Order #:

16 GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month Day Year
Darrell Roberts	Darrell S. Roberts	0 3 0 9 9 0

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
WAYNE PLUNKETT	Wayne Plunkett	0 3 0 9 9 0

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

19. Discrepancy Indication Space
All Emptied in the Phillips Cwm 10.
3-10-90

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month Day Year
Willie Smith	Willie Smith	

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

037890

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. R 1 5 0

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy. 61 S., Fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: CWMA 534038

B. State Generator's ID: N/A

5. Transporter 1 Company Name: Chemical Waste Management

6. US EPA ID Number: T L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

D. Transporter's Phone: 219/423-1655

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) CWM011191-1073	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON-HAZARDOUS WASTE ✓ CWM Profile Number J75493 OAK	0 0 1	D T	4 0 1 4 0	P	N/H
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Tungsten Residue
State of origin of waste is Iowa as required by A.D.E.M.

K. Handling Codes for Wastes Listed Above
a. L
b.
c.
d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA Section 3004 (C1).

Work Order #: Purchase Order #: 9003 0 0 1-01

16. GENERATOR'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 labelled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name	Signature	Month Day Year
Darrell G. Roberts	Darrell G. Roberts	0 3 0 9 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
R L Walker	R. L. Walker	0 9 0 9 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month Day Year
Dorothy Oliver	Dorothy Oliver	0 3 1 0 90

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

4020

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
JAN 1 6 1990
AMAX, Inc.

CLIMAX MOLYBDENUM
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 534005.

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: Pam Moore

Pamela Moore

Title: Regulatory Document Control Clerk

Date: 01/11/90

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

MN20 M420

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 6 5 3 — Manifest Document No. H 2 4

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy. 61 S., fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: CWMA 534005

B. State Generator's ID: N/A

5. Transporter 1 Company Name: Chemical Waste Management

6. US EPA ID Number: I L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

D. Transporter's Phone: 219/423-1665

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492 OAK	1	DT	40440	P	D004
b. CWM Profile Number		1/10/90 (SZ)			
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
State of origin of waste is Iowa as Required by A.D.E.M.
RQ100

K. Handling Codes for Wastes Listed Above
a. L
b.
c.
d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA Section 3004 (c1)

Work Order #:

Purchase Order #: 90D110023-01

16. GENERATOR'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 national government regulations.

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Printed/Typed Name	Signature	Month Day Year
Darrell G. Roberts	Darrell G. Roberts	01 09 90

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year
ROY LYNN WILSON	Roy Lynn Wilson	01 10 90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month Day Year

FACILITY

19. Discrepancy Indication Space
Connected the tape (Acc.D) per Thomas Anderson 1/10/90 (SZ)

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month Day Year
Dwight Lewis	Dwight Lewis	01 10 90

EPA Form 8700-22 (Rev. 9/86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

4 of 6 D

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. M 2 3

2. Page 1 of 1

Information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy. 61 S., Fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: CWMA 534345

B. State Generator's ID: N/A

5. Transporter 1 Company Name: Chemical Waste Management

6. US EPA ID Number: I L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

D. Transporter's Phone: 219/423-1665

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492 OAK	1	DT	41000	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
State of origin of waste is Iowa as Required by A.D.E.M.

K. Handling Codes for Wastes Listed Above
a. c.
b. d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA Section 3004 (C1)

Work Order #. Purchase Order #: 89/103652-01

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Darrell G. Roberts — Signature: Darrell G. Roberts — Month Day Year: 1 1 0 2 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Curtis Clardy — Signature: Curtis Clardy — Month Day Year: 1 1 0 2 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Roger McKinnis — Signature: Roger McKinnis — Month Day Year: 1 1 0 3 8 9

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
SEP 1 1 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 485836.

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: _____

Pamela Moore

Title: Regulatory Document Control Clerk

Date: 09/01/89

Customer

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)* Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. M 2 2

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy. 61 South, Fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: CWMA 485836

B. State Generator's ID: N/A

5. Transporter 1 Company Name: Chemical Waste Management

6. US EPA ID Number: I L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

D. Transporter's Phone: 219/423-1655

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid, ORM-E NA9189 (EPA-EPIDXT) CWM Profile Number J75492	1	DT	39480	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

HA

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake

~~"I CERTIFY THAT NO ABSORBANT HAS BEEN ADDED TO~~ THE ABOVE WASTE WHICH WOULD PROHIBIT ITS BEING LANDFILLED PER RCRA SECTION 3004 (C1)"

PER Jon Anderson DATE 8/30/89

K. Handling Codes for Wastes Listed Above
a. D b. ST c. d.

15. Special Handling Instructions and Additional Information

Work Order #: Purchase Order #: 8908290560 1

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Darrell G. Roberts — Signature: Darrell G. Roberts — Month Day Year: 0 8 2 8 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Curtis Clardy — Signature: Curtis Clardy — Month Day Year: 0 8 2 8 8 9

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
Cert fax'd per Jon Anderson 8/30/89 (see 3)
also, Chemical added (sec. J)

DF

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Nelwyn Armistead — Signature: Nelwyn Armistead — Month Day Year: 0 8 2 9 8 9

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
JUL 10 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 485805, 485806

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: Pamela Moore

Pamela Moore

Title: Regulatory Document Control Clerk

Date: 07/03/89

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. TAD000222653 Manifest Document No. M21

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone 319-463-7151

A. State Manifest Document Number CWMA 485806

B. State Generator's ID N/A

5. Transporter 1 Company Name Chemical Waste Management Beaman Truck Company

6. US EPA ID Number ILD099202681 ILD007181415

C. State Transporter's ID

D. Transporter's Phone 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number ILD099202681 ALD006232464

G. State Facility's ID

H. Facility's Phone 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492	1	DT	41,220	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
W.O. #

K. Handling Codes for Wastes Listed Above
a. L
b.
c.
d.

15. Special Handling Instructions and Additional Information

Work Order #: Purchase Order #: PO 8906280530 1

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Month Day Year: 06 21 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Curtis Clardy — Signature: Curtis Clardy — Month Day Year: 06 21 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: Roger McKinnis — Signature: Roger McKinnis — Month Day Year: 06 28 89

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

GENERATOR No. 2 (Must Accompany Shipment)

41,360

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

Form Approved. OMB No. 2050-0039. Expires 9-30-91

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. R 4 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone 319-463-7151

A. State Manifest Document Number CWMA 485805

B. State Generator's ID NA

5. Transporter 1 Company Name
Chemical Waste Management

6. US EPA ID Number I L D 0 9 9 2 0 2 6 8 1

C. State Transporter's ID

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone 219-423-1655

E. State Transporter's ID

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number A L D 0 0 0 6 2 2 4 6 4

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone 205/652-9721

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13.	14.	
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75493 OAK	1	DT	4612	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Tungsten Residue

K. Handling Codes for Wastes Listed Above
a. L b. c. d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA section 3004 (C1).

Work Order #: Purchase Order #: 890629032-01

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Month Day Year: 10 6 12 9 8 9

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Curtis Clardy — Signature: Curtis Clardy — Month Day Year: 06 28 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John Smithers — Signature: John Smithers — Month Day Year: 06 30 89

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

45600

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
FEB 13 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA -

454993, 454995, 454996, 454997, 454998, 454999, 455301, 455302, 455303, 455304 .

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: Pam Moore

Pam Moore

Title: Regulatory Document Control Clerk

Date: 02/09/89

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
FEB 13 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA -

454989, 454990, 454994, .

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

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Signature: Pam Moore/cwn

Pam Moore

Title: Regulatory Document Control Clerk

Date: 02/08/89

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
FEB 13 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA -

443006, 443008, 443010, 454986, 454988, 454992, .

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

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Signature: Wyanthia Newton

WYANTHIA NEWTON

Title: Regulatory Document Control Clerk

Date: 02/07/89

TOM A.

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
FEB 09 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA -

443003, 443004, 443005, 443009, 454987, .

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

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Signature: Pam Moore

Pam Moore

Title: Regulatory Document Control Clerk

Date: 02/02/89

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622161
(205) 652-9721 - Document Control

RECEIVED
FEB 27 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 439049.

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622161), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: Martheia Newton

WYANTHIA NEWTON

Title: Regulatory Document Control Clerk

Date: 02/22/89

418 - 411

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved OMB No 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: IAD000223653 Manifest Document No. M119

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number: CWMA 439051

B. State Generator's ID: NA

5. Transporter 1 Company Name: Beelman Truck Company

6. US EPA ID Number: ILD007818425

C. State Transporter's ID

D. Transporter's Phone: 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: ALD006246424

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number 011375492	1	DT	39660	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
W.O. #890224036

K. Handling Codes for Wastes Listed Above
a. ~~D004~~ L
b.
c.
d.

15. Special Handling Instructions and Additional Information
I certify that no absorbant has been added to the above waste which would prohibit it being landfilled per RCRA section 3004 (C1).

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Month Day Year: 10 12 13 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: WAYNE SKAGGS 418#
Signature: Wayne Skaggs
Month Day Year: 10 12 13 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Robert SIMPSON
Signature: Robert Simpson
Month Day Year: 12 24 89

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete.

Chemical Waste Management, Inc.
Emelle Facility
P.O. Box 55
Emelle, Alabama 35459
EPA ID Number: ALD000622464
(205) 652-9721 - Document Control

RECEIVED
MAR 03 1989
AMAX, Inc.

CLIMAX MOLYBDENUM COMPANY
HWY 61 SOUTH
FORT MADISON, IA 52627

ACKNOWLEDGEMENT OF RECEIPT OF WASTE SHIPMENT

Generator's name ....: CLIMAX MOLYBDENUM COMPANY
Generator's US EPA ID: IAD000222653

Enclosed is/are your Generator Number Two copy/copies for Alabama manifest number(s): CWMA - 439051.

This copy is to acknowledge that Chemical Waste Management, Inc., of Emelle, Alabama has received your shipment. As a requirement of 40 CFR 264.12 (b), this letter also serves to inform you that this facility has the proper permits and will accept your shipment upon completion of waste analysis procedures specified in the facility's Waste Analysis Plan and as determined in the approved waste profile submitted for this/these waste(s).

As of July 11, 1988, Chemical Waste Management, Inc, Emelle, Alabama, (ALD000622464), is operating under a RCRA permit issued by US E.P.A., Region IV and also interim status from the Alabama Department of Environmental Management, (ADEM).

If you have any questions regarding manifests, please call (205) 652-9721 and ask for "Document Control". For questions regarding Waste Approval, Profiles, or Lab Samples, ask for "Customer Service". If you are interested in arranging an audit or site tour, please ask for the "Customer Service Representative."

Signature: Pam Moore

Pam Moore

Title: Regulatory Document Control Clerk

Date: 02/27/89

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

EXPIRATION EXTENDED TO 12/31/88

Form Approved OMB No 2050-0039 Expires 9 30 88

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 2 2 6 5 3 — Manifest Document No. 1 1 3

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627 319-463-7151

4. Generator's Phone ( )

A. State Manifest Document Number: CWMA 443006

B. State Generator's ID: NA

5. Transporter 1 Company Name: Beelman Truck Company

6. US EPA ID Number: I L D 0 0 7 8 1 4 8 2 5

C. State Transporter's ID

D. Transporter's Phone: 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492	1	DT	40320	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
WO #890131056

K. Handling Codes for Wastes Listed Above
a. ~~D004~~ c.
b. D01 d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Month Day Year: 10/13/89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: DAVID R SEYLER — Signature: David R Seyler — Month Day Year: 10/13/89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name — Signature — Month Day Year

EPA Form 8700 22 (Rev 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

EXPIRATION EXTENDED TO 12/31/88

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. T|A|D|0|0|0|2|2|2|6|5|3| Manifest Document No. |M|1|2

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone 319-463-7151

A. State Manifest Document Number CWMA 443005

B. State Generator's ID NA

5. Transporter 1 Company Name
Beelman Truck Company

6. US EPA ID Number |I|L|D|0|0|7|8|1|4|8|2|5

C. State Transporter's ID

D. Transporter's Phone 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number |A|L|D|0|0|0|6|2|2|4|6|4

G. State Facility's ID

H. Facility's Phone 205/652-9721

11. US DOT Description *(Including Proper Shipping Name, Hazard Class, and ID Number)*	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492	1	DT	45060	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
WO #890131056

"I CERTIFY THAT NO ABSORBANT HAS BEEN ADDED TO THE ABOVE WASTE WHICH WOULD PROHIBIT ITS BEING LANDFILLED PER RCRA SECTION 3004 (C1)"

PER Thomas Anderson DATE 1/31/89 cls

K. Handling Codes for Wastes Listed Above
a. ~~D004~~ D001
b.
d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson | Signature: Thomas E. Anderson | Month Day Year: 01/30/89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Bryan Heck | Signature: Bryan Heck | Month Day Year: 01/30/89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

FACILITY

19. Discrepancy Indication Space
add absorbant clause per Thomas Anderson 1/31/89 cls — Line 11J

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: B McNiff | Signature: B McNiff | Month Day Year: 1/31/89

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

EXPIRATION EXTENDED TO 12/31/88

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3 — Manifest Document No. M 1 6

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy61 South
Fort Madison, IA 52627 319-463-7151

4. Generator's Phone ( )

A. State Manifest Document Number CWMA 443004

B. State Generator's ID NA

5. Transporter 1 Company Name
Beelman Truck Company

6. US EPA ID Number I L D 0 0 7 8 1 4 8 2 5

C. State Transporter's ID

D. Transporter's Phone 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492	1	DT	47360	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
WO #890131056

"I CERTIFY THAT NO ABSORBANT HAS BEEN ADDED TO THE ABOVE WASTE WHICH WOULD PROHIBIT ITS BEING LANDFILLED PER RCRA SECTION 3004 (C1)"
PER Thomas Anderson DATE 1/31/89 CKS

K. Handling Codes for Wastes Listed Above
a. ~~D004~~ b. D07 c. d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Month Day Year: 01 30 89

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: GARY L WITTY — Signature: Gary L Witty — Month Day Year: 01 30 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

FACILITY

19. Discrepancy Indication Space
Line 15 - odd alignment Clause. Per Thomas Anderson. 1/31/89 CKS

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: B Miller — Signature: B Miller — Month Day Year: 1 31 89

EPA Form 8700-22 (Rev 9-86) Previous edition is obsolete

GENERATOR No. 2 (Must Accompany Shipment)

HAZARDOUS WASTE MANIFEST

(As Required By The Alabama Department of Environmental Management)

EXPIRATION EXTENDED TO 12/31/88

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. 1 A D 0 0 2 2 6 5 3 — Manifest Document No. 1 M 1 5

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa

4. Generator's Phone 319-463-7151

A. State Manifest Document Number: CWMA 443003

B. State Generator's ID: NA

5. Transporter 1 Company Name: Beelman Truck Company

6. US EPA ID Number: I L D 0 0 7 8 1 4 8 2 5

C. State Transporter's ID

D. Transporter's Phone: 618-768-4411

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
CHEMICAL WASTE MANAGEMENT, INC.
Emelle Facility
Alabama Highway 17 at Mile Marker 163
Emelle, Alabama 35459

10. US EPA ID Number: A L D 0 0 0 6 2 2 4 6 4

G. State Facility's ID

H. Facility's Phone: 205/652-9721

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ, Hazardous Waste Solid ORM-E NA9189 (EPA-EPTOXI) CWM Profile Number J75492	1	DT	43020	P	D004
b. CWM Profile Number					
c. CWM Profile Number					
d. CWM Profile Number					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake
WO#890131056
"I CERTIFY THAT NO ABSORBANT HAS BEEN ADDED TO THE ABOVE WASTE WHICH WOULD PROHIBIT ITS BEING LANDFILLED PER RCRA SECTION 3004 (C1)"
PER Thomas Anderson DATE 1/31/89 [illegible]

K. Handling Codes for Wastes Listed Above
a. ~~D004~~ D-81
b.
c.
d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson — Signature: Thomas E. Anderson — Month Day Year: 01 13 89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Rickey Goodman 5126 — Signature: Rickey Goodman — Month Day Year: 01 13 89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Month Day Year

19. Discrepancy Indication Space
Line 11J - add Absorbant Clause to Manifest Per Thomas Anderson 1/31/89 [illegible]

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Kent Jones — Signature: Kent Jones — Month Day Year: 01 31 89

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

GENERATOR No. 2 (Must Accompany Shipment)

[redacted] OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3
Manifest Document No. M.1.4.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone 319-463-7151

A. State Manifest Document Number INA 0277604
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number: I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E NA9189 (EPA-EPTTOXI)	1	TT	13	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed, Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 10 Day 24 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed, Typed Name: Clyde Bunch Jr
Signature: Clyde Bunch
Date: Month 10 Day 24 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed, Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed, Typed Name: Mike Fulk
Signature: Mike Fulk
Date: Month 10 Day 24 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4330 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0277604

EPA Form 8700-22
Previous editions are obsolete
State Form 11865 (R/4 88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

OCT 25 REC'D

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0132702
DATE 10/26/88 24

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
OCT 28 1988
AMAX, Inc.

W.S. NO.	TRACTOR NO.
07052150	123
PURCHASE ORDER NO.	**TRAILER NO.**
D 02323	2002/RC 30
RELEASE NO.	**DRIVER NO.**
	0153
IUHWM NO.	**GEN WM NO.**
INA0277604	M14

E-2 OK to unload GF

08:26 AM 10 25 88 40880

3-9 P.M. PICK UP 260480

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
< AS NOTED AT LEFT

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
4 BBW		13.04	
	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S)	ESTIMATED QUANTITY
D004	13T 20 yds

SPECIAL CHARGES			INITIALS
TSD WAITING		MINUTES	
DROP		DRUMS	
[illegible]		DRUMS	
DEMURRAGE	210	MINUTES	SAD
ROLL USED		FEET	
PUMPING		DRUMS	
[illegible]		YES OR NO	
CRIBS	1	NO USED	SAD
[illegible]		YES OR NO	
EXTRA LABOR		HOURS	
OTHER FEES			

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME ARRIVAL / DEPARTURE

GENERATOR 2150 EPA IDENTIFICATION NO: IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 319-463-7151

[illegible] proper condition for transportation with proper placards according to the applicable regulations of the Dept. of Transportation and the EPA

SIGNATURE Sharon Davenport PRINT NAME: SHARON DAVENPORT DATE: 10-24-88

TRAVEL TIME ARRIVAL / DEPARTURE

TRANSPORTER 8000 EPA IDENTIFICATION NO IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

[illegible] waste for transport. Carrier certifies that the equipment specified [illegible] is in proper condition for the transportation of this material.

SIGNATURE Clyde Bunch PRINT NAME: Clyde Bunch DATE: 10-24-88

UNLOADING TIME ARRIVAL / DEPARTURE

TSD FACILITY 9000 EPA IDENTIFICATION NO. IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 317-243-0811

[illegible] of the waste for treatment and/or disposal in accordance with all applicable regulations.

SIGNATURE Mike Fuller PRINT NAME: Mike Fuller DATE 10-24-88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS 317/243-0811 812/579-5238 812/372-6286

MAIL TO GENERATOR

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. M.5.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number
INA 0273591
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	TT	14	T	D004
b Returned					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 09 Day 15 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Burch
Signature: Clyde Burch
Date: Month 09 Day 15 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name
Signature
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

INA0273591

Form 8700-22
's editions are obsolete
m 11865 (R 4 88)

COPY 3. OUT OF STATE GENERATOR/TSD MAIL TO IDEM

National Response Center at 800/424-8802 or 202/426-2675.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. IAD000222653 | Manifest Document No. M13

2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number INA 0277603

B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport

6. Use EPA ID Number: IND058484114

C. State Transporter's ID

D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231

10. Use EPA ID Number: IND093219012

G. State Facility's ID

H. Facility's Phone 319/243-0811

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E NA9189 (EPA-EPTTOXI)	1	TT	0.15.12	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson | Signature | Date: Month 10 Day 17 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Bunch | Signature: Clyde Bunch | Date: Month 10 Day 17 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19. 10-15-88
Printed/Typed Name: Mark Martin | Signature: Mark Martin | Date: Month Day Year

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0277603

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4 88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0132511
DATE 10/17/88

NOV 14 REC'D

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
NOV 1 8 1988
AMAX, Inc.

OKTO UNLOAD

10:39 AM 10 18 88 71440

07:28 PM 11 13 88 39300

3-9 P.M. PICK UP 30140 ETK

W.O. NO.	TRACTOR NO.
07052150	123
PURCHASE ORDER NO.	**TRAILER NO.**
D 02323	2002/R023
RELEASE NO.	**DRIVER NO.**
	0153
UHWM NO.	**GEN WM NO.**
INA0741603	M13

PROTECTIVE EQUIPMENT CLASS
GL, GOGL, APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
AS NOTED AT LEFT

LBS. / GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		16.07	
% BSW	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MOSS CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S) D004

ESTIMATED QUANTITY ~~20 Yds~~ 15 1/2 Y

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

SPECIAL CHARGES		INITIALS
TSD WAITING	____ MINUTES	
DAPOLE	____ DRUMS	
[illegible]	____ DRUMS	
[illegible]	240 MINUTES	SLD
[illegible]	____ FEET	
PUMPING	____ DRUMS	
[illegible]	____ YES OR ____ NO	
LINER	1 NO. USED	SLD
[illegible]	____ YES OR ____ NO	
EXTRA LABOR	____ HOURS	
[illegible]		

LOADING TIME

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO: IAD000222653
319-463-7151

[illegible] conditions for transportation with proper placards according to [illegible] Department of Transportation and the EPA.

SIGNATURE Sharon Davenport Security PRINT NAME SHARON DAVENPORT DATE 10-17-88

TRAVEL TIME

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO: IND058484114
317-241-9406

[illegible] proper container for the transportation of the

SIGNATURE Clyde Bunch PRINT NAME: Clyde Bunch DATE: 10-17-88

INLOADING TIME

TSD FACILITY 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND093219012
317-243-0811

[illegible] in accordance [illegible] all applicable [illegible] 11-13-88

SIGNATURE Mark Martin PRINT NAME: Mark Martin DATE: ~~10-13-88~~

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS: 317/243-0811 812/579-5238 812/372-6286

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3 | Manifest Document No. M.1.2. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number INA 0277601
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number: I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTOXI)	1	T.T	16	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR — Printed Typed Name: Thomas E. Anderson | Signature | Date Month 09 Day 30 Year 88

TRANSPORTER — 17. Transporter 1 Acknowledgement of Receipt of Materials
Printed Typed Name: Richard Whittaker | Signature: Richard Whittaker | Date Month 09 Day 30 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed Typed Name | Signature | Date Month Day Year

FACILITY — 19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed Typed Name: TERRY THACKER | Signature | Date Month 10 Day 02 Year 88

INA0277601

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION

INDIANAPOLIS, IN

OCT 03 REC'D

HES

HERITAGE ENVIRONMENTAL SERVICES, INC
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO. 0131079

DATE 09/30/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

OK TO UNLOAD

RECEIVED
OCT 10 1988
AMAX, Inc.

Rolloff PO-Box 15

04:48 PM 09 30 88 72620

05:48 AM 10 03 88 39860

32760

W.B. NO.	TRACTOR NO.
07052150	107
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	20-01
RELEASE NO.	**DRIVER NO.**
	0173
UHWM NO.	**GEN WM NO.**
IND037760001	

PROTECTIVE EQUIPMENT CLASS
GL, GOGL, APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
att/gloves

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		16.35	
% BSW	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S)
D004

ESTIMATED QUANTITY
~~20 yds, 16T~~

SPECIAL CHARGES			INITIALS
LOADING		MINUTES	
HAUL		DRUMS	
[illegible]		DRUMS	
DEMURRAGE	180	MINUTES	
HOSE USED		FEET	
PUMPING		DRUMS	
[illegible]		YES OR NO	
LINER	1	NO USED	
STOP OFF CHARGE		YES OR NO	
EXTRA LABOR		HOURS	
OTHER			

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150 EPA IDENTIFICATION NO IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 319-463-7151

SIGNATURE Jeff Madden PRINT NAME Jeff Madden DATE 9-30-88

TRAVEL TIME

TRANSPORTER 8000 EPA IDENTIFICATION NO IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

SIGNATURE Richard Whittaker PRINT NAME Richard Whittaker DATE: 9/30/88

UNLOADING TIME

TSD FACILITY 9000 EPA IDENTIFICATION NO: IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 317-243-0811

SIGNATURE Terry Thacker PRINT NAME TERRY THACKER DATE 2 Oct 88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS: 317/243 0811 812/579 5238 812/372-6286

MAIL TO GENERATOR

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3
Manifest Document No. M.I.I.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number
INA 0273600
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone 317/241-9406
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone 319/243-0811

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I.N.D.0.5.8.4.8.4.1.1.4
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number I.N.D.0.9.3.2.1.9.0.1.2

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ Hazardous Waste Solid ORME-E, NA9189, (EPA-EXTTOXI)	1	T T	15	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson — Signature — Date: Month 09 Day 29 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Whitaker — Signature — Date: Month 09 Day 29 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: MARK W. IRVIN — Signature — Date: Month 9 Day 29 Year 88

GENERATOR
TRANSPORTER
FACILITY

INA0273600

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3 | Manifest Document No. N.1.0. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number: INA 0273599
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone: 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number: I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone: 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E NA9189, (EPA-EPTTOXI)	1	TT	16	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson | Signature: Thomas E. Anderson | Date Month 09 Day 28 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Richard Whittaker | Signature: Richard Whittaker | Date Month 09 Day 28 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Date Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: TERRY THACKER | Signature | Date Month 10 Day 02 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4530 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273599

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

OCT 03 REC'D

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

RECEIVED
OCT 10 1988
AMAX, Inc.

DOCUMENT NO. 0130840
DATE 09/28/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT MADISON, IA 52627

05:45 PM 09 28 88 72220

03:26 PM 10 02 88 41040

31180

Rolloff Box
RO-23 out
RO-23 IN

W.S. NO	TRACTOR NO.
07052150	107
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	20-01
RELEASE NO.	**DRIVER NO.**
	0173
IUHWM NO.	**GEN WM NO.**
IND093219012	

PROTECTIVE EQUIPMENT CLASS
GL, GOGL, APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
atl / [illegible]

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		15,59	
H BSW	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MOSS CARE

DOT DESCRIPTION
UN, HAZARDOUS WASTE SOLID, NOS, DRM-E, NA9189, (EPA-EP TOXICITY)

HAZARD CODE(S)
D004

ESTIMATED QUANTITY
20 yds 16T

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
205	MINUTES	
	FEET	
	DRUMS	
	YES OR NO	
1	NO. USED	
	YES OR NO	
	HOURS	

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627
EPA IDENTIFICATION NO. IAD000222653
319-463-7151

SIGNATURE [illegible] PRINT NAME: Jeff Madden DATE: 9-28-88

TRAVEL TIME

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
EPA IDENTIFICATION NO. IND058484114
317-241-9406

SIGNATURE Richard Whittaker PRINT NAME Richard Whittaker DATE: 9/28/88

UNLOADING TIME

TSD FACILITY 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W MORRIS STREET
INDIANAPOLIS, IN 46231
EPA IDENTIFICATION NO. IND093219012
317-243-0811

SIGNATURE [illegible] PRINT NAME: TERRY THACKER DATE: 20 Oct 88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS: 317/243-0811 812/579 5238 812/372-6286

MAIL TO GENERATOR

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3 Manifest Document No. N·9

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, IA 52627

4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number INA 0273597

B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport

6. Use EPA ID Number: I·N·D·0·5·8·4·8·4·1·1·4

C. State Transporter's ID

D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231

10. Use EPA ID Number: I·N·D·0·9·3·2·1·9·0·1·2

G. State Facility's ID

H. Facility's Phone 319-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTOXI)	1	TT	14	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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GENERATOR — Printed/Typed Name: Thomas E. Anderson — Signature: [signature] — Date: Month 09 Day 27 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
TRANSPORTER — Printed/Typed Name: Clyde Burch — Signature: [signature] — Date: Month 09 Day 27 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
FACILITY — Printed/Typed Name: TERRY TRACHTX — Signature: [signature] — Date: Month 10 Day 02 Year 88

INA0273597

In Case of a Spill Call the Indiana Office of Environmental Response at 317/241-4508 (Day or Night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO. 0130748
DATE 09/27/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

OK TO UNLOAD

RECEIVED
OCT 17 1988
AMAX, Inc.

W.S. NO.	TRACTOR NO.
07052150	151
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	2004/R070
RELEASE NO.	**DRIVER NO.**
	0153
UHWM NO.	**GEN WM NO.**
INA0273597	M9

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
< AS NOTED AT LEFT

DATE 02 22 88 68300

40500

A M PICK UP

LBS / GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
% BSW	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MMS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S) D004

ESTIMATED QUANTITY 20 yds. 147

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

SPECIAL CHARGES		INITIALS
[illegible]	____ MINUTES	
[illegible]	____ DRUMS	
[illegible]	____ DRUMS	
[illegible]	150 MINUTES	9
[illegible]	____ FEET	
[illegible]	____ DRUMS	
[illegible]	____ YES OR ____ NO	
[illegible]	1 NO USED	9
[illegible]	____ YES OR ____ NO	
[illegible]	____ HOURS	
[illegible]		

LOADING TIME
GENERATOR 2150 — EPA IDENTIFICATION NO. IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 — 319-463-7151

[illegible] in proper condition for transportation with proper placard [illegible] of the Dept. of Transportation and the EPA.

SIGNATURE: Jeff Madden — PRINT NAME: Jeff Madden — DATE: 9-27-88

TRAVEL TIME
TRANSPORTER 8000 — EPA IDENTIFICATION NO: IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

[illegible] container for the transportation of th[illegible]

SIGNATURE: Clyde Burch — PRINT NAME: Clyde Burch — DATE: 9-27-88

UNLOADING TIME
TSD FACILITY 9000 — EPA IDENTIFICATION NO: IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 — 317-243-0811

[illegible] in accordance with all applicable regulations

SIGNATURE: Terry Thacker — PRINT NAME: TERRY THACKER — DATE: 10/02/88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS: 317/243 0811 812/579 5938 812/372-6286

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I A D 0 0 0 2 2 2 6 5 3
Manifest Document No.: M 8
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number: INA 0273596
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 317/241-9406
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: 319/243-0811

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I N D 0 5 8 4 8 4 1 1 4
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number: I N D 0 9 3 2 1 9 0 1 2

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, [redacted] NA9189, (EPA-EPTOXI)	1	TT	14	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed Typed Name: Thomas E. Anderson | Signature | Date Month 9 Day 26 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed Typed Name: Lyle Finch | Signature: Lyle Bond | Date Month 09 Day 26 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed Typed Name | Signature | Date Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed Typed Name: MARK W. FRIEN | Signature: Mark W. Frien | Date Month 9 Day 26 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273596

EPA Form 8700-22
Previous editions are obsolete.
11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

SEP 27 RECD

DOCUMENT NO. 0130720
DATE 09/26/88

ATTN: TOM ANDERSON
AMAX, INC.
FT MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
OCT 03 1988
AMAX, Inc.

08:55 PM 09/27/88 68300

03:34 AM 09/27/88 39680

W.S. NO.	TRACTOR NO.
07052150	151
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	2004/R010
RELEASE NO.	**DRIVER NO.**
	0153
UHWM NO.	**GEN WM NO.**
INAC073596	INS

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
at 1pm

Disposal Loading
EW
Etank

LBS. / GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
X BSW	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOSS CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S)
D004

ESTIMATED QUANTITY
~~20 bbl~~ 14 T

SPECIAL CHARGES		INITIALS
	DRUMS	
	DRUMS	
180	MINUTES	J
	FEET	
	DRUMS	
	YES OR NO	
1	NO USED	J
	YES OR NO	
	HOURS	

PROCESS CODES T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150 — EPA IDENTIFICATION NO IAD000222653
AMAX, INC
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 — 319-463-7151

SIGNATURE Jeff Mudd — PRINT NAME Jeff Mudd — DATE: 9-26-88

TRAVEL TIME

TRANSPORTER 8000 — EPA IDENTIFICATION NO. IND058484114
HERITAGE TRANSPORT, INC.
7901 W MORRIS STREET
INDIANAPOLIS, IN 46231 — 317-241-9406

SIGNATURE Clyde Bunch — PRINT NAME: Clyde Bunch — DATE: 9-26-88

UNLOADING TIME

TSD FACILITY 9000 — EPA IDENTIFICATION NO: IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W MORRIS STREET
INDIANAPOLIS, IN 46231 — 317-243-0811

SIGNATURE Mark W. Irvin — PRINT NAME: MARK W. IRVIN — DATE: 9-26-88

EMERGENCY OR SPECIAL ASSISTANCE TELEPHONE NUMBERS 317/243-0811 812/579-5238 812/372-6286

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

(10)

PLEASE PRINT OR TYPE (Form designed for use on elite (12 pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. M5
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number
INA 0273591
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	TT	14	T	D004
b					
c					
d					

Returned

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 09 Day 15 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Burch
Signature: Clyde Burch
Date: Month 09 Day 15 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name
Signature
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

INA 0273591

National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4 88)

COPY 2. GENERATOR MAIL TO GENERATOR STATE

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3
Manifest Document No. 47
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Company
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number
INA 0273595
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris Street
Indianapolis, IN 46231
10. Use EPA ID Number I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	tt	12	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson
Signature
Date: Month 09 Day 21 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month 09 Day 21 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Arnell Glenn
Signature
Date: Month 09 Day 26 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273595

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION

INDIANAPOLIS, IN

SEP 27 RECD

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0130295

DATE 09/21/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
OCT 03 1988
AMAX, Inc.

09 21 88 64220

11:13 PM 09 26 88 40080

24140 Dump load LG

W.S. NO.	TRACTOR NO.
07052150	151
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	2004/RO 11
RELEASE NO.	**DRIVER NO.**
	0153
IUHWM NO.	**GEN WM NO.**
IUA0273595	MT

PROTECTIVE EQUIPMENT CLASS
GL, GOGL, APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS

LBS./GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		12,07	
MESW	BEFORE UNLOADING	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXI CITY)

HAZARD CODE(S)
D004

ESTIMATED QUANTITY
~~20,05~~, 127

SPECIAL CHARGES		INITIALS
USD WAITING	MINUTES	
LABOR	DRUMS	
TIME	DRUMS	
[illegible]	150 MINUTES	J
HOSE USED	FEET	
[illegible]	DRUMS	
[illegible]	YES OR NO	
[illegible]	1 NO USED	J
[illegible]	YES OR NO	
[illegible]	HOURS	
[illegible]		

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150 — EPA IDENTIFICATION NO: IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 — 319-463-7151

[illegible] properly [illegible] and labeled and are in proper condition for transportation with proper placards according to applicable regulations of Department of Transportation and the EPA.

SIGNATURE Jeff Madden — PRINT NAME Jeff Madden — DATE 9-21-88

TRAVEL TIME

TRANSPORTER 8000 — EPA IDENTIFICATION NO IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

[illegible] is a proper container for the transportation of this [illegible]

SIGNATURE Clyde Bunch — PRINT NAME Clyde Bunch — DATE 9-21-88

UNLOADING TIME

[illegible] 9000 — EPA IDENTIFICATION NO IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 — 317-243-0811

[illegible] in accordance with all applicable regulations.

SIGNATURE Darnell Glenn — PRINT NAME DARNELL GLENN — DATE 9-26-88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS 317/243-0811 812/579 5238 812/372-6286

MAIL TO GENERATOR

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12 pitch) typewriter) Form Approved. OMB No. 2050-0039 Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. 7116
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, IA 52627
4. Generator's Phone 319-463-7151

A. State Manifest Document Number INA 0273594
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone 317-241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, IN 46231
10. Use EPA ID Number: I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORM-E-E, NA9189, (EPA-EPTTOXI)	1	T.T	13	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed Typed Name: Thomas E. Anderson
Signature
Date: Month 09 Day 20 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed Typed Name: [redacted] Whittaker
Signature
Date: Month 09 Day 20 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed Typed Name: MARK W. EKVIN
Signature
Date: Month 9 Day 21 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273594

EPA Form 8700-22
Previous editions are obsolete
State Form 11865 (R 4 88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION

INDIANAPOLIS, IN

SEP 27 REC'D

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO. 0130230

DATE 09/20/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
OCT 03 1988
AMAX, Inc.

Rolloff
RO-41-out
RO-41-IN

04:25 PM 09 20 88 65760

02:55 AM 09 27 88 40040

25720 ol tunload 19

E-TK

8 A.M. PICK UP

W.S. NO.	TRACTOR NO.
07052150	107
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	20-01
RELEASE NO.	**DRIVER NO.**
	0173
IUHWM NO.	**GEN WM NO.**
IND073535914	M6

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
(AS NOTED AT LEFT

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		12580	
W BSW	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXI CITY)

HAZARD CODE(S)
D004 D010

ESTIMATED QUANTITY
~~20 yds~~ 13T

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
	120 MINUTES	J
	FEET	
	DRUMS	
	1 NO. DRUM	J
	YES OR NO	
	HOURS	

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO. IAD000222653
319-463-7151

SIGNATURE Jeff M. PRINT NAME: Jeff Madden DATE: 9/20/88

TRAVEL TIME

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND058484114
317-241-9406

SIGNATURE Richard Whittaker PRINT NAME: Richard Whittaker DATE 9/20/88

UNLOADING TIME

TSD FACILITY 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND093219012
317-243-0811

SIGNATURE Mark A. Ervin PRINT NAME: MARK W. ERVIN DATE: 9.27.8

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS 317/243-0811 812/579-5238 812/372-6286

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3
Manifest Document No. 115
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa, 52627
4. Generator's Phone 319-463-7151

A. State Manifest Document Number
INA 0273593
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, IN 46231
10. Use EPA ID Number I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, HAZARDOUS WASTE SOLID ORME-E, NA9189, (EPA-EPTOXI)	1	T T	15	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

GENERATOR

Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 09 Day 19 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Burnett
Signature: Clyde Burnett
Date: Month 09 Day 19 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name:
Signature:
Date: Month Day Year

INA0273593

A Form 8700-22
evious editions are obsolete
ale Form 11865 (R/4 88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION

INDIANAPOLIS, IN

SEP 22 1988

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO. 0130013

DATE 09/19/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

W.S. NO. 07052150

TRACTOR NO. 127

PURCHASE ORDER NO. D0225

TRAILER NO. 2004/R011

RELEASE NO.

DRIVER NO. 0153

IUHWM NO. INA0273593

GEN WM NO. M5

PROTECTIVE EQUIPMENT CLASS 70500

GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS

40560 Autoload
E-TK
29940
— have M. Martin
Check first.

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		14.97	
WASTE	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME

MOS3 CAKE

DOT DESCRIPTION

RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S) D004 D010

ESTIMATED QUANTITY 15T ~~20yd~~

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
	240 MINUTES	J
	FEET	
	DRUMS	
	YES OR NO	
	NO LOAD	
	YES OR NO	
	HOURS	

PROCESS CODES T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150 — EPA IDENTIFICATION NO. IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 — 319-463-7151

SIGNATURE Jeff Madden — PRINT NAME Jeff Madden — DATE: 9-19-88

TRAVEL TIME

TRANSPORTER 8000 — EPA IDENTIFICATION NO. IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

SIGNATURE Clyde Burch — PRINT NAME Clyde Burch — DATE: 9-19-88

LOADING TIME

TSD FACILITY 9000 — EPA IDENTIFICATION NO. IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 — 317-243-0811

SIGNATURE Mark W. Irwin — PRINT NAME: MARK W. IRWIN — DATE: 9-20-88

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS 317/243 0811 812/579 5238 812/372-6286

MAIL TO GENERATOR

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. M·6
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627

4. Generator's Phone (319) 463-7151

A. State Manifest Document Number INA 0273592
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	T·T	14	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 9 Day 16 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: John R. Smith
Signature: John R. Smith
Date: Month 9 Day 16 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Burch
Signature: Clyde Burch
Date: Month 9 Day 18 Year 88

19. Discrepancy Indication Space
Load rejected Excess amount of paper filters.
Returned to generator. Mark Martin 9-17-88

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19
Printed/Typed Name
Signature
Month Day Year

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273592

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0129851
DATE 09/16/88

SEP 22

RECEIVED
SEP 30 1988
AMAX, Inc.

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

Rejected
M. Martin

A.W.S. NO.	TRACTOR NO.
07052150	123
PURCHASE ORDER NO.	TRAILER NO.
D-0225	2002
RELEASE NO.	DRIVER NO.
	053
IUHWM NO.	GEN WM NO.
INA0273592	M5

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS

R.O. #11

LBS. / GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
W.S.W.	AFTER UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOSS CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S) D004 D010

ESTIMATED QUANTITY ~~20 yds~~ 14 T

SPECIAL CHARGES		INITIALS
	MILES	
	HOURS	
	DRUMS	
	120 MINUTES	2
	FEET	
	DRUMS	
	YES OR NO	
	NO USED	
	YES OR NO	
	HOURS	

PROCESS CODE: T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150 EPA IDENTIFICATION NO. IAD000222653
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627 319-463-7151

SIGNATURE: Jeff Madden PRINT NAME: Jeff Madden DATE: 9-16-88

TRAVEL TIME

TRANSPORTER 8000 EPA IDENTIFICATION NO. IND058484114
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
317-241-9406

Transportas #2 Clyde Bunch
SIGNATURE: John R. Smith PRINT NAME: Clyde Bunch John R. Smith DATE: 9-16-88

UNLOADING TIME

TSD FACILITY 9000 EPA IDENTIFICATION NO. IND093219012
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231 317-243-0811

SIGNATURE: PRINT NAME: DATE:

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS: 317/243 0811 812/579 5238 812/372-6286

MAIL TO GENERATOR

PARTMENT OF ENVIRONMENTAL MANAGEMENT
E OF SOLID AND HAZARDOUS WASTE MANAGEMENT
O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I A D 0 0 0 2 2 2 6 5 3
Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone ( ) 319-463-7151

A. State Manifest Document Number
INA 0273593
B. State Generator's ID

5. Transporter 1 Company Name
Heritage Transport
6. Use EPA ID Number I N D 0 5 8 4 8 4 1 1 4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, IN 46231
10. Use EPA ID Number I N D 0 9 3 2 1 9 0 1 2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, HAZARDOUS WASTE SOLID ORM-E, NA9189, (EPA-EPTOXI)	1	TT		T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
1. D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson
Signature
Date: Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name
Signature
Date: Month Day Year

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0273593

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 8. GENERATOR COPY

SERVICE LOCATION

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO.

DATE

W.O. NO.	TRACTOR NO.
PURCHASE ORDER NO.	TRAILER NO.
RELEASE NO.	DRIVER NO.
UHWM NO.	GEN WM NO.

PROTECTIVE EQUIPMENT CLASS

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
	1/10 MINUTES	
	FEET	
	DRUMS	
	YES OR NO	
	NO USED	
	YES OR NO	
	HOURS	

LBS - GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
% BSW	RELEASE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME

DOT DESCRIPTION

HAZARD CODES | ESTIMATED QUANTITY

PROCESS CODE

GENERATOR | EPA IDENTIFICATION NO.

LOADING TIME

SIGNATURE | PRINT NAME: | DATE:

TRANSPORTER | EPA IDENTIFICATION NO.

TRAVEL TIME

SIGNATURE | PRINT NAME: | DATE:

TSD FACILITY | EPA IDENTIFICATION NO.

UNLOADING TIME

SIGNATURE | PRINT NAME | DATE:

EMERGENCY TELEPHONE ASSISTANCE TELEPHONE NUMBERS 317/243 0811 812/579 5238 812/372 6286

GENERATOR

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I A D 0 0 0 2 2 2 6 5 3
Manifest Document No.: M5
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

A. State Manifest Document Number: INA 0273591
B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone: 317/241-9406
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID
H. Facility's Phone: 319/243-0811

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I N D 0 5 8 4 8 4 1 1 4
7. Transporter 2 Company Name
8. Use EPA ID Number

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number: I N D 0 9 3 2 1 9 0 1 2

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORM-E-E, NA9189, (EPA-EPTOXI)	1	TT	14	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 9 Day 15 Year 88

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Brandt
Signature: Clyde Brandt
Date: Month 09 Day 15 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: John R. Smith
Signature: John R. Smith
Date: Month . Day . Year .

19. Discrepancy Indication Space
Load Rejected due to excess trash and wood incompatible with waste analysis plan
Return to Generator
Mark Martin 9-15-88

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name
Signature
Month . Day . Year .

GENERATOR
TRANSPORTER
FACILITY

INA0273591

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

SEP 19

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0129689
DATE 09/15/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

67780

RECEIVED
SEP 23 1988
AMAX, Inc.

Rejected by Mark Martin
DO NOT UNLOAD

OK to Bill for Dave KT

W.S. NO.	TRACTOR NO.
07052150	182
PURCHASE ORDER NO.	TRAILER NO.
D0225	2004/10-11
RELEASE NO.	DRIVER NO.
	0153
UHWM NO.	GEN. WM NO.
INA0213591	MS

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
(AS NOTED AT LEFT

8 A.M. PICK UP
CONTACT TOM ANDERSON

TO GENERATOR
(John Smith RETURN LOAD)

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
W.B.S.W.	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOSS CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S): D004 D010
ESTIMATED QUANTITY: 20 yds.

SPECIAL CHARGES		INITIALS
[illegible]	____ MINUTES	
[illegible]	____ DRUMS	
[illegible]	____ DRUMS	
[illegible]	120 MINUTES	J
[illegible]	____ FEET	
[illegible]	____ DRUMS	
[illegible]	____ YES OR ____ NO	
[illegible]	1 NO. USED	J
[illegible]	____ YES OR ____ NO	
[illegible]	____ HOURS	
[illegible]		

PROCESS CODE: T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO. IAD000222653
319-463-7151

[illegible] in proper condition for transportation with proper placards [illegible] and the EPA

SIGNATURE Jeff Madden PRINT NAME Jeff Madden DATE: 9-15-88

TRAVEL TIME

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND058484114
317-241-9406

[illegible] proper [illegible] transportation of the

SIGNATURE Clyde Barnett PRINT NAME Clyde Barnett DATE 9-15-88

UNLOADING TIME

FACILITY 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND093219012
317-243-0811

[illegible] in accordance with all applicable [illegible]

SIGNATURE PRINT NAME DATE:

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBERS 317/243-0811 812/579-5238 812/372-6286

MAIL TO GENERATOR

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. M·4
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number INA 0273590
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone 317/241-9408

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number: I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTOXI)	1	T·T	16	T	D004
b					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

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Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month · Day · Year ·

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Bunch
Signature: Clyde Bunch
Date: Month 09 Day 14 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month · Day · Year ·

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: MARK W. FRITZ
Signature: Mark W. Fritz
Date: Month 9 Day 4 Year 88

GENERATOR
TRANSPORTER
FACILITY

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0273590

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO.
0129567

DATE
09/14/88

SEP 15 1988

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
SEP 19 1988
AMAX, Inc.

WM NO.	TRACTOR NO.
07052150 D7052150	127
PURCHASE ORDER NO.	TRAILER NO.
D0225 D0225	2004
RELEASE NO.	DRIVER NO.
	0153
UHWM NO.	GEN WM NO.
INA 0273590	M4

06:42 PM 09/14/88 73040

Dr Fanload 8

07:19 PM 09/14/88 40560

32480 E-TK

AM

PRIMITIVE EQUIPMENT CLASS
6L, 6DGL, APRON OR POTIVER

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
AS NOTED AT LEFT

Attachment

LBS / GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		16.24	
% BSW	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
	90 MINUTES	TEA
	FEET	
	DRUMS	
	YES OR NO	
	1 NO USED	TEA
	YES OR NO	
	HOURS	

COMMON NAME: MOSS CAKE

RQ, HAZARDOUS WASTE SOLID, NOS, ORM-E, NA9189, (EPA-EP TOXICITY)

DOT CODE	HAZARD CODE(S)	ESTIMATED QUANTITY
		~~20 yds~~ 16T

PROCESS CODE: T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR: 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO: IAD000222653

319-463-7151

SIGNATURE: Thomas E. Anderson PRINT NAME: Thomas E. Anderson DATE: 9-14-88

TRAVEL TIME

TRANSPORTER: 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO: IND058484114

317-241-9406

SIGNATURE: Clyde Burch PRINT NAME: Clyde Burch DATE: 9-14-88

UNLOADING TIME

DISPOSAL FACILITY: 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO: IND093219012

317-243-0811

SIGNATURE: Mark W. Ford PRINT NAME: MARK W. FORD DATE: 9.14.88

EMERGENCY TELEPHONE ASSISTANCE TELEPHONE NUMBERS: 317/243-0811 812/579-5238 812/372-6286

MAIL TO GENERATOR

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I.A.D.0.0.0.2.2.2.6.5.3
Manifest Document No. M 3
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number INA 0273589
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I.N.D.0.5.8.4.8.4.1.1.4
C. State Transporter's ID
D. Transporter's Phone: 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number: I.N.D.0.9.3.2.1.9.0.1.2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	TT	15	T	D004
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 7 Day 13 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Bunch
Signature: Clyde Bunch
Date: Month 07 Day 13 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: Mike Fuller
Signature: Mike Fuller
Date: Month 9 Day 14 Year 88

INA0273589

EPA Form 8700-22
Previous editions are obsolete
State Form 11865 (R/4-88)

COPY 4. TSD MAIL TO GENERATOR

In case of a spill call the Indiana Office of Environmental Response at 317/243-5000 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

SERVICE LOCATION

INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

SEP 14 1988

DOCUMENT NO.
0129474

DATE
09/13/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

W.B. NO.	TRACTOR NO.
07052150	127
PURCHASE ORDER NO.	TRAILER NO.
D0225	2004/10-11
RELEASE NO.	DRIVER NO.
	0153
UHWM NO.	GEN WM NO.
INAD273589	M3

04:28 AM 09 14 88 70040

05:08 AM 09 14 88 40420

296020

RECEIVED
SEP 19 1988
AMAX, Inc.

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
< AS NOTED AT LEFT

A.M. PICK UP
CONTACT TOM ANDERSON

LBS./GALS.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		14.81	
% BSW	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S)
D004 D010

ESTIMATED QUANTITY
~~20 yds~~, 15T

SPECIAL CHARGES		INITIALS
WAITING	MINUTES	
	DRUMS	
	DRUMS	
	90 MINUTES	JM
	FEET	
	DRUMS	
	YES OR NO	
	1 NO USED	JM
	YES OR NO	
	HOURS	

PROCESS CODE: T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO. IAD000222653

319-463-7151

SIGNATURE Jeff Madden PRINT NAME Jeff Madden DATE: 9/13/88

TRAVEL TIME

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND058484114

317-241-9406

SIGNATURE Clyde Bunch PRINT NAME Clyde Bunch DATE: 9-13-88

UNLOADING TIME

DISPOSAL SITE 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND093219012

317-243-0811

SIGNATURE Mike Fuller PRINT NAME: Mike Fuller DATE: 9/13/88

TELEPHONE NUMBERS 317/243-0811 812/579-5238 812/372-6286

OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No.: M·2
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but Items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Ft. Madison, IA 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number: INA 0225112
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone: 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind. 46231
10. Use EPA ID Number: I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone: 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a. RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI)	1	T	14	T	D004
b.					
c					
d					

J. Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15. Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 09 Day 12 Year 88

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Bunch
Signature: Clyde Bunch
Date: Month 09 Day 12 Year 88

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: MARK W. FRIEN
Signature: Mark W. Frien
Date: Month 09 Day 12 Year 88

GENERATOR

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0225112

A Form 8700-22 (Rev. 9-86)
vious editions are obsolete.
e Form 11865

DISTRIBUTION.
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243-0811

DOCUMENT NO. 0129424
DATE 09/12/88

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

RECEIVED
SEP 19 1988
AMAX, Inc.

68480

12:22 AM 09 13 88 40600

27880

CONTACT JIM ANDERSON

W.B. NO	TRACTOR NO.
07052150	127
PURCHASE ORDER NO.	**TRAILER NO.**
D0225	2004/1041
RELEASE NO	**DRIVER NO.**
	0153
UHWM NO	**GEN WM NO.**
NA0000112	M2

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
(AS NOTED AT LEFT

LBS. / GAL.	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
		1394	
W.B.S.W.	**BEFORE UNLOADING**	**NUMBER OF DRUMS**	**NET GALLONS**

COMMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODE(S) D004 D010

ESTIMATED QUANTITY ~~20 yds.~~ 14 T

SPECIAL CHARGES		INITIALS
	PUMPS	
	DRUMS	
	DRUMS	
90	MILES	
	FEET	
	DRUMS	
	YES OR NO	
1	NO. USED	
	YES OR NO	
	HOURS	

PROCESS CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING TIME
GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627
EPA IDENTIFICATION NO IAD000222653
319-463-7151

SIGNATURE Jeffrey Madden PRINT NAME Jeffrey Madden DATE: 9-12-88

TRAVEL TIME
TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
EPA IDENTIFICATION NO IND058484114
317-241-9406

SIGNATURE Clyde Burch PRINT NAME Clyde Burch DATE: 9-12-88

UNLOADING TIME
FACILITY 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231
EPA IDENTIFICATION NO IND093219012
317-243-0811

SIGNATURE Mark W. Irvin PRINT NAME MARK W. IRVIN DATE: 9-12-88

TELEPHONE NUMBERS: 317/243-0811 812/579-5238 812/372-6286

MAIL TO GENERATOR

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. I·A·D·0·0·0·2·2·2·6·5·3
Manifest Document No. ··M·1·
2. Page 1 of 1
Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address
Climax Molybdenum Co.
Hwy 61 South
Fort Madison, Iowa 52627
4. Generator's Phone (319) 463-7151

A. State Manifest Document Number INA 0225113
B. State Generator's ID

5. Transporter 1 Company Name: Heritage Transport
6. Use EPA ID Number: I·N·D·0·5·8·4·8·4·1·1·4
C. State Transporter's ID
D. Transporter's Phone 317/241-9406

7. Transporter 2 Company Name
8. Use EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Heritage Environmental Services
7901 West Morris St.
Indianapolis, Ind 46231
10. Use EPA ID Number: I·N·D·0·9·3·2·1·9·0·1·2
G. State Facility's ID
H. Facility's Phone 319/243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol.	I. Waste No.
a RQ, Hazardous Waste Solid ORME-E, NA9189, (EPA-EPTTOXI	·1·	T·T	13.25 ~~1·6~~	T	D004
b					
c					
d					

J Additional Descriptions for Materials Listed Above
Molybdenum Sulfide Cake, Exempt from RCRA by paragraph, 261.4

K. Handling Codes for Wastes Listed Above
D004

15 Special Handling Instructions and Additional Information

16. GENERATOR'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 national government regulations.

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GENERATOR
Printed/Typed Name: Thomas E. Anderson
Signature: Thomas E. Anderson
Date: Month 0·9 Day 0·7 Year 8·8

TRANSPORTER
17 Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Clyde Bunch
Signature: Clyde Bunch
Date: Month 0·9 Day 0·7 Year 8·8

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Date: Month · Day · Year ·

FACILITY
19 Discrepancy Indication Space
#13 – Confirmed with Tom Anderson on 9/9/88 – Judy R. Mayo, HES

20 Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.
Printed/Typed Name: DARNELL GLENN
Signature: Darnell Glenn
Date: Month 0·9 Day 0·7 Year 8·8

INA 0225113

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

DISTRIBUTION.
PAGE 1 (white) TSD MAIL TO GENERATOR
PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE
PAGE 3 (light green) TSD MAIL TO TSD STATE
PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM
PAGE 5 (light blue) TSD COPY
PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

SERVICE LOCATION
INDIANAPOLIS, IN

HES

HERITAGE ENVIRONMENTAL SERVICES, INC.
CORPORATE HEADQUARTERS
7901 WEST MORRIS STREET
INDIANAPOLIS, INDIANA 46231
317/243 0811

DOCUMENT NO. 0129092
DATE 09/07/88

SEP 08 RCD

RECEIVED
SEP 14 1988
AMAX, Inc.

ATTN: TOM ANDERSON
AMAX, INC.
FT. MADISON
PO BOX 220
FT. MADISON, IA 52627

WASTE NO 07052150	**TRACTOR NO.** 127
PURCHASE ORDER NO D0225	**TRAILER NO.** 8004/A041
RELEASE NO	**DRIVER NO.** 0153
UHWL NO IND025113	**GEN WM NO.** M1

PROTECTIVE EQUIPMENT CLASS
GL,GOGL,APRON OR PCTYVEK

EQUIPMENT NEEDED

SPECIAL INSTRUCTIONS
(AS NOTED AT LEFT

09 07 88 67220

09 152 PM 09-07-88 40720

Retumload
1g
26500 E tank
pH=2.0
VOL DSCRP

8 A.M. PICK UP
CONTACT TOM ANDERSON

LBS./GALS	BEFORE UNLOADING	NET WEIGHT	GROSS GALLONS
4 BSW	BEFORE UNLOADING	NUMBER OF DRUMS	NET GALLONS

13.25

SPECIAL CHARGES		INITIALS
	MINUTES	
	DRUMS	
	DRUMS	
90	MINUTES	TEA
	FEET	
	DRUMS	
	YES OR NO	
1	NO USED	TEA
	YES OR NO	
	HOURS	

CONMON NAME
MOS3 CAKE

DOT DESCRIPTION
RQ,HAZARDOUS WASTE SOLID,NOS,ORM-E,NA9189,(EPA-EP TOXICITY)

HAZARD CODES D004 D010

ESTIMATED QUANTITY 16 T approx.

ROUTE CODE T-23, T-40, T-37, D-85, CITY SEWER

LOADING HERE

GENERATOR 2150
AMAX, INC.
CANADA TUNGSTEN LTD. DIVISION
HIGHWAY 61 SOUTH
FT. MADISON, IA 52627

EPA IDENTIFICATION NO IAD000222653
319-463-7151

SIGNATURE Thomas E. Anderson PRINT NAME Thomas E Anderson DATE: 9-7-88

TRAVEL HERE

TRANSPORTER 8000
HERITAGE TRANSPORT, INC.
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO IND058484114
317-241-9406

SIGNATURE Clyde Bunch PRINT NAME Clyde Bunch DATE: 9-7-88

DESTINATION HERE

DESTINATION 9000
HERITAGE ENVIRONMENTAL SERVICES INC.
INDIANAPOLIS
7901 W. MORRIS STREET
INDIANAPOLIS, IN 46231

EPA IDENTIFICATION NO. IND093219012
317-243-0811

SIGNATURE Darnell Glenn PRINT NAME DARNELL GLENN DATE: 9-7-88

EMERGENCY TELEPHONE NUMBERS 317/243 0811 812/579 6286 812/372 6286

MAIL TO GENERATOR