EPA NO. [illegible]

Address 190TH NORMANDIE Phone No. 555-14[illegible] Address [illegible]

City, State, Zip TORRANCE, CA 90502 City, State, Zip MONTEREY [illegible]

(5) U.S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA ID NO.	WEIGHT OR VOLUME	UNITS
WASTE MUD & WATER	NON	N/A	4200	GALS.
WASTE				

CONTAINERS NUMBER: 1

TYPE: ☐ DRUMS ☐ BAGS ☐ CARTONS ☒ TANK TRUCK ☐ DUMP TRUCK ☐ OTHER

(6) WASTE CATEGORY 7D (7) EX. HAZ. WASTE PERMIT NO. N/A (8) GENERATING PROCESS MACHINING PROCESS

(9) LIST COMPONENTS:

	CONC. UPPER	RANGE LOWER	UNITS		CONC. UPPER	RANGE LOWER	UNITS
A. MUD	10		☒ % ☐ ppm.	E.			☐ % ☐ ppm.
B. WATER	90		☒ % ☐ ppm.	F.			☐ % ☐ ppm.
C.			☐ % ☐ ppm.	G.			☐ % ☐ ppm.
D.			☐ % ☐ ppm.	Non Hazardous Material 100%			

(10) WASTE PROPERTIES: pH 7.0 ☐ Toxic ☐ Flammable ☐ Corrosive/Irritant ☐ Reactive ☐ Sensitizer ☐ Carcinogen/Mutagen

(11) PHYSICAL STATE: ☐ Solid ☒ Liquid ☒ Sludge ☒ Slurry ☐ Gas ☐ Other

(12) SPECIAL HANDLING INSTRUCTIONS: ☐ Gloves ☐ Goggles ☐ Respirator ☒ Other NONE

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

(13) Dorothy Stout Buyer — Signature of Authorized Agent and Title — Date Shipped 3-2-83

TRANSPORTER (HAULER MUST COMPLETE)

(14) NAME OIL PROCESS CO. S.O. 23572 TRUCK NO. 17 TLR. NO. 119 (15) PICK-UP DATE 3-2-83

TIME ☐ AM ☐ PM

EPA NO. CAD050806850

ADDRESS 5756 Alba Street PHONE NO. (213) 585-5063

CITY, STATE, ZIP Los Angeles, California 90058

(16) Mike Wagner-Driver — Signature of Authorized Agent and Title — Date 3-2-83

TSD FACILITY (FACILITY OPERATOR MUST COMPLETE)

(17) NAME Operating TD Inc. 18 QUANTITY (If Measured) PA 11

EPA NO. CAT080012024 19 STATE FEE (If Any)

PHONE NO.

(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

(21) HANDLING OR DISPOSAL METHOD:

☐ Surface Impoundment ☒ Landfill

☐ Injection Well ☒ Land Treatment

☐ Treatment (Specify)

☐ Recovery or Reuse ☐ Storage/Transfe

(22) NAME

EPA NO.

(23) [signature] — Signature of Authorized Agent and Title — Date Accepted 3-4-83

ORIGINAL

BOE-C6-0120586