August 29, 2017

Todd Shrader, Manager
Carlsbad Field Office
Department of Energy
P.O. Box 3090
Carlsbad, New Mexico 88221-3090

Bruce C. Covert, Project Manager
Nuclear Waste Partnership LLC
P.O. Box 2078
Carlsbad, New Mexico 88221-2078

RE: FEE ASSESSMENT
AUDIT REPORTS REVIEW for AMWTP (A-17-04)
WIPP HAZARDOUS WASTE FACILITY PERMIT
EPA I.D. NUMBER NM4890139088-TSDF
INVOICE HWB-WIPP-A-17-004

Dear Messrs. Shrader and Covert:

The New Mexico Environment Department (NMED) acknowledges receipt of the Transmittal of the Final Report for CBFO Audit A-17-04 of the AMWTP. The audit report cover letter was dated July 12, 2017 and was received by the NMED on July 13, 2017.

The New Mexico Hazardous Waste Permit and Corrective Action Fee Regulations, 20.4.2.201.B(2)(b) NMAC require the assessment of fees. The fee invoice is attached to this letter. Payment is normally due within sixty (60) calendar days from the date that you receive the invoice in accordance with 20.4.2.301.C NMAC. However, because NMED submitted an assessment of supplemental permit fees to the Permittees for the current State fiscal year, and the Permittees transmitted payment of these fees, the fee invoices have been effectively paid under these supplemental fees.
Messrs. Shrader and Covert
August 29, 2017
Page 2

If you have any questions regarding this letter, please contact me at (505) 476-6050

Sincerely,

[Signature]

Ricardo Maestas
WIPP Staff Manager
Hazardous Waste Bureau

cc: D. Biswell, NMED HWB
J. Valdez, NMED HWB
File: WIPP ‘17
New Mexico
Environment Department
Hazardous Waste Bureau

August 29, 2017

Nuclear Waste Partnership LLC
P.O. BOX 2078
Carlsbad, NM 88221-5608
Attn: Philip J. Breidenbach

Invoice # - HWB-WIPP-A-17-004
Transmittal of the Final Audit Report for CBFO Audit A-17-04, Advanced Mixed Waste Treatment Project (AMWTP) TRU Waste Characterization and Certification Activities

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<th>Total Cost</th>
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Make Checks Payable to: NMED/HWB

Mail Checks and Invoice to:
New Mexico Environment Department, HWB
Attn: James Valdez
2905 Rodeo Park Drive East, Bldg 1
Santa Fe, NM 87505

When you provide a check as payment, you authorize the State of New Mexico to either use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

Check Number: ________       Amount Received: ________
Date Received: ________