February 8, 2018

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
Class 2 Permit Modification Request
WIPP Hazardous Waste Facility Permit
EPA I.D. Number NM4890139088-TSDF
Invoice HWB-WIPP-18-001

Dear Messrs. Shrader and Covert:

The New Mexico Environment Department (NMED) acknowledges receipt of a Class 2 Permit Modification Request (PMR) pertaining to the WIPP Hazardous Waste Facility Permit. The PMR consists of the following item: Clarification of TRU Mixed Waste Disposal Volume Reporting. The PMR submittal letter was dated January 31, 2018 and was received on February 2, 2018.

The New Mexico Hazardous Waste Permit and Corrective Action Fee Regulations, 20.4.2.201.B(2) 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.
If you have any questions regarding this matter, please contact me at 476-6050.

Sincerely,

Ricardo Maestas
WIPP Staff Manager
Hazardous Waste Bureau

Cc: D. Biswell, NMED HWB
    H. Tellez, NMED HWB
    M. McLean, NMED HWB
    J. Valdez, NMED HWB
    File: WIPP '18
Nuclear Waste Partnership LLC
P.O. BOX 2078
Carlsbad, NM 88221-5608
Attn: Philip J. Breidenbach
Invoice # - HWB-WIPP-18-001
Class 2 Permit Modification Request: 1) Clarification of TRU Mixed Waste Disposal Volume Reporting

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Pay This Amount $6,000.00

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: __________________________