



**INDUSTRIAL & SPECIAL WASTE FACILITY ANNUAL  
REPORT**  
NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY  
DIVISION OF WASTE MANAGEMENT  
12-2025

Telephone: 701.328.5166  
Fax: 701.328.5200  
Website: <https://deq.nd.gov/WM>

Please complete the form and sign. Attach additional pages as necessary.

Clear Fields

**1. Facility Information**

Facility Name	Owner/Operator Name	Telephone Number	
Facility Mailing Address	City	State	ZIP Code
Facility Location Address	City	State	ZIP Code
Email Address	Permit Number		

**2. Calendar Period Covered by Report ( Ex. January 1<sup>st</sup> – December 31<sup>st</sup>)**

From	To	Year
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**3. Annual Total Quantity of Each Waste Category Disposed of:**

Waste Type	Total Waste Amount	Unit of Measurement
Coal Combustion Residual (CCR) Special Waste		Tons
Industrial Waste		Tons
Inert Waste		Tons
Special Waste		Tons
Total Oilfield Special Waste (for the reporting period)		Tons
a. Exploration Waste		Tons
b. Production Waste**		Tons

**\*\* Below please include the number of random sampling & analysis conducted during the reported period for production waste**

**4. Number of Random Production Sampling & Analysis Conducted During the Reporting Period**

*This question is **ONLY** applicable to Oilfield Special Waste Facilities*

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**5. Amount of Waste Put Into Each Surface Impoundment(s) During the Reporting Period:**

*This question may not be applicable to all facilities*

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**6. Noncompliance (Explain Any Occurrences of Noncompliance)**

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**7. Construction and/or Closure Projects** (Discuss Any Construction or Closure Activities)

**8. Name, Date, and Signature of Preparer**

Signature	Date
Printed Name	

**OPTIONAL ANNUAL INFORMATION BELOW:**

**1. Remaining Landfill Capacity for Each Landfill Unit**

Estimated Capacity of Total Cubic Yards Remaining for Permitted Disposal Area

**2. Operation – Provide the tipping fee for each type of waste the facility accepts.**

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*Please check the box if the information you have provided meets the requirements for confidential business information in accordance with NDCC Subdivision 44-04-18.4(2)(a)) and you want to keep it confidential.*

E-mail a completed form to: [solidwaste@nd.gov](mailto:solidwaste@nd.gov) or mail completed form to:

**North Dakota Department of Environmental Quality  
Solid Waste Program  
4201 Normandy Street  
Bismarck, ND 58503-1324**