

STATE OF LOUISIANA LA Public Service Commission Post Office Box 91154 Baton Rouge, Louisiana 70821-9154

LA. PUBLIC SERVICE COMMISSION Hone: TRANSPORTATIONLPSC Website: www.lpsc.louisiana.gov

(225) 342-4439 or (888) 342-5717

The commission maintains a listing of all Intrastate Motor Carriers which contains certain general information as requested on this form which should be completed and immediately returned to this office. *I understand the Commission must be notified in writing of any changes to our company's account. This is to inform the Commission of the following changes:

COMPANY NAME*: Heckmann Water Re	esources (CVR) Inc. dba Nuverra Envi	ronmental Solutions LPSC#: 7412-A & 7438-A	
*If your company name has changed, y	ou must contact this office t	o obtain the proper name change application.	
NEW MAILING ADDRESS: 111111 K	Katy Frwy., Ste. 1006 Houston	, TX 77079	
NEW PHYSICAL ADDRESS: 11111	Katy Frwy., Ste. 1006 Housto	n, TX 77079	
TELEPHONE: (832) 539-470	fAX	: (832)384-8493	
OTHER CONTACT NUMBERS: (1	
EMAIL carly.pitre		@ nuverra.com	
COMPANY TAX REPORTING YEAR (M	ark ONLY one box) & FEIN#	20-2291795	
Company's Tax reporting ye Company's Tax reporting ye	ar is on a CALENDAR basis repo ar is on a FISCAL basis reportin	orting January 01 to December 31 each year. g from to each year. Month/Day Month/Day	
LIST ALL COMPANY OWNERS, OFF	ICERS AND/OR MEMBERS a	nd PERCENTAGES OF OWNERSHIP:	
Name	Title ☐ President or ☐ M	Percentage of Ownership	
	☐ Vice President or		
	☐ Secretary or ☐ N		
LIST ALL COMPANY REGULATORY	CONTACTS FOR EACH CAT	EGORY BELOW:	
Name Annual Reports: Carly Pitre	Phone Number 832-539-4701	Email carly.pitre@nuverra.com	
Renewals: Carly Pitre	832-539-4701	carly.pitre@nuverra.com	
Insurance: Carly Pitre	632-539-4701 carly.pitr	e@nuverra.com	
All Other Regulatory: Carly Pitre	832-539-4701	carly.pitre@nuverra.com	
LIST ALL COMPANY TERMINALS: 525 Park Rd. Frierson, LA 71027			
	m may be shared with the Louisiana Depa	riment of Revenue for purposes of Inspection and Supervision Fees.	
Carly Pitre		MARIL	
Printed Name of person providing inform	nation	Signature	