

0009

MARSH

Jan Melton-Cate AAI, CISR, CPIW
Asst. Vice President - Mining Practice

Marsh USA Inc.
9129 Cross Park Drive, Suite 101
Knoxville, TN 37923
jan.melton-cate@marsh.com
www.marsh.com

Fireproof
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Fax

To:	Pamela Grubough-Littig	From:	Jan Melton-Cate
Date:	July 29, 2005	Fax:	865 769 7800
Organization:	Indiana DNR	Phone:	865 769 7761
Fax:	801-359-3940	Pages:	4
Phone:	801-538-5268		
Subject:	Utah Certificates - Willow Creek, Star Point #1 & #2, Castle Gate (Foundation Coal Corporation) 7/30/05		

Pam,

Thanks for speaking with me regarding certificates for Foundation Coal Corporation. I've enclosed the certificates per our conversation will overnight the originals today.

If you need anything else on the certificates or have any questions, please let me know as soon as possible before I overnight them.

Regards,



RECEIVED
JUL 29 2005
DIV. OF OIL, GAS & MINING

The information contained in this facsimile message is confidential, may be privileged, and is intended for the use of the individual or entity named above. If you, the reader of this message, are not the intended recipient, the agent, or employee responsible for delivering this transmission to the intended recipient, you are expressly prohibited from copying, disseminating, distributing, or in any other way using any of the information contained in this facsimile message.

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER

PRODUCER

MARSH USA INC.
P.O. BOX 36012
KNOXVILLE, TN 37930-6012
Attn: Jan Melton-Cate (865) 769-7761

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

- COMPANY
A STEADFAST INS CO
- COMPANY
B N/A
- COMPANY
C N/A
- COMPANY
D N/A

437767-05-06-

INSURED

Foundation Coal Corporation
999 Corporate Boulevard, Suite 300
Linthicum Heights, MD 21090-2227

COVERAGES

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY		07/30/05	07/30/06	GENERAL AGGREGATE \$ 6,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG \$ 6,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,500,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,500,000
	<input checked="" type="checkbox"/> Includes Blasting				FIRE DAMAGE (Any one fire) \$ 1,500,000
	<input checked="" type="checkbox"/> Includes Contractual Liability				MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
<input type="checkbox"/> HIRED AUTOS					
<input type="checkbox"/> NON-OWNED AUTOS					
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$	
<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	
				EACH ACCIDENT \$	
				AGGREGATE \$	
EXCESS LIABILITY				EACH OCCURRENCE \$	
<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$	
<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTHER	
THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT \$	
				EL DISEASE-POLICY LIMIT \$	
				EL DISEASE-EACH EMPLOYEE \$	
OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: Willow Creek Mine Permit #C/007/038
General Liability includes a Blanket Additional Insured where required by written contract, but subject to the policy terms, conditions, and exclusions.
General Liability includes XCU coverage.

CERTIFICATE HOLDER

State of Utah
Division of Oil, Gas & Mining
1594 West North Temple, Suite 1210
P.O. Box 145801
Salt Lake City, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Mark C. Benson

Mark C. Benson

MM1(3/02)

VALID AS OF: 07/29/05

MARSH

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CERTIFICATE NUMBER

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COMPANIES AFFORDING COVERAGE

COMPANY
A STEADFAST INS CO

COMPANY
B N/A

COMPANY
C N/A

COMPANY
D N/A

437767-05-06-

INSURED

Foundation Coal Corporation
999 Corporate Boulevard, Suite 300
Linthicum Heights, MD 21090-2227

COVERAGES

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CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY		07/30/05	07/30/06	GENERAL AGGREGATE	\$ 6,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 6,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,500,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 1,500,000
	<input checked="" type="checkbox"/> Includes Blasting				FIRE DAMAGE (Any one fire)	\$ 1,500,000
	<input checked="" type="checkbox"/> Includes Contractual Liability				MED EXP (Any one person)	\$ 5,000
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT
<input type="checkbox"/> ANY AUTO			BODILY INJURY (Per person)	\$		
<input type="checkbox"/> ALL OWNED AUTOS			BODILY INJURY (Per accident)	\$		
<input type="checkbox"/> SCHEDULED AUTOS			PROPERTY DAMAGE	\$		
<input type="checkbox"/> HIRED AUTOS						
<input type="checkbox"/> NON-OWNED AUTOS						
GARAGE LIABILITY						
<input type="checkbox"/> ANY AUTO			AUTO ONLY - EA ACCIDENT	\$		
			OTHER THAN AUTO ONLY:	\$		
			EACH ACCIDENT	\$		
			AGGREGATE	\$		
EXCESS LIABILITY						
<input type="checkbox"/> UMBRELLA FORM			EACH OCCURRENCE	\$		
<input type="checkbox"/> OTHER THAN UMBRELLA FORM			AGGREGATE	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
<input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL			WC STATUTORY LIMITS	OTHER		
<input type="checkbox"/> OTHER			EL EACH ACCIDENT	\$		
			EL DISEASE-POLICY LIMIT	\$		
			EL DISEASE-EACH EMPLOYEE	\$		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: Star Point #1 and #2 Mine Permit #C/007/008
General Liability includes a Blanket Additional Insured where required by written contract, but subject to the policy terms, conditions, and exclusions.
General Liability includes XCU coverage.

CERTIFICATE HOLDER

State of Utah
Division of Oil, Gas & Mining
1584 West North Temple, Suite 1210
P.O. Box 145801
Salt Lake City, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Mark C. Benson

Mark C. Benson

MM1(3102)

VALID AS OF: 07/29/05

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COMPANIES AFFORDING COVERAGE

- COMPANY
A STEADFAST INS CO
- COMPANY
B N/A
- COMPANY
C N/A
- COMPANY
D N/A

437767-05-06-

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A	GENERAL LIABILITY		07/30/05	07/30/06	GENERAL AGGREGATE	\$ 6,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 6,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,500,000
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	<input checked="" type="checkbox"/> Includes Blasting				FIRE DAMAGE (Any one fire)	\$ 1,500,000
	<input checked="" type="checkbox"/> Includes Contractual Liability				MED EXP (Any one person)	\$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
<input type="checkbox"/> HIRED AUTOS						
<input type="checkbox"/> NON-OWNED AUTOS						
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:		
				EACH ACCIDENT	\$	
				AGGREGATE	\$	
EXCESS LIABILITY				EACH OCCURRENCE	\$	
<input type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$	
<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTY-ER	
<input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT	\$	
				EL DISEASE-POLICY LIMIT	\$	
				EL DISEASE-EACH EMPLOYEE	\$	
OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: Castle Gate Mine Permit #C/007/004, Carbon County, UT
General Liability includes a Blanket Additional Insured where required by written contract, but subject to the policy terms, conditions, and exclusions.
General Liability includes XCU coverage.

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State of Utah
Division of Oil, Gas & Mining
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BY: Mark C. Benson

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