Fireproof
C/007/0004 ot
C/007/0006
C/007/0038

0011

MARSH

Marsh USA Inc.
9129 Cross Park Drive
Suite 101
Knoxville, TN 37923
Vicki.D.Nobinger@Marsh.com
www.marsh.com

Fax

To:	**Pamela Grubough-Littig**	From:	Vicki Nobinger, AIS
Date:	September 20, 2006	Fax:	865 769 7800
Organization:	Utah Division of Oil, Gas & Mining	Phone:	865 769 7751
Fax:	801 359 3940	Pages:	4, including cover page
Phone:			
Subject:	**Certificates of Insurance for Foundation Coal Corporation**		

Pamela,

Please see the following certificates. If you have any questions or need further information, please feel free to call Jan Melton-Cate, the Client Advisor on this account, at 865-769-7761 (direct line) or 1-800-443-4086 (WATS).

Thanks.

Vicki

s:\cfl\a-g\foundation coal*mcd documents\09-20-06 fax to state of utah with 3 certs.doc

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MMC Marsh & McLennan Companies

RECEIVED
SEP 20 2006
DIV. OF OIL, GAS & MINING

Fireproof C/007/0004

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

437767-06-07--06-07

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

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. 3

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		07/30/06	07/30/07	GENERAL AGGREGATE	$ 6,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	$ 6,000,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	$ 2,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	$ 2,000,000
	X Includes Blasting				FIRE DAMAGE (Any one fire)	$ 2,000,000
					MED EXP (Any one person)	$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	$
	ANY AUTO				BODILY INJURY (Per person)	$
	ALL OWNED AUTOS					
	SCHEDULED AUTOS				BODILY INJURY (Per accident)	$
	HIRED AUTOS					
	NON-OWNED AUTOS				PROPERTY DAMAGE	$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
	ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
	EXCESS LIABILITY				EACH OCCURRENCE	$
	UMBRELLA FORM				AGGREGATE	$
	OTHER THAN UMBRELLA FORM					$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS / OTHER	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL / 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.

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. ~~XXXX

Inspect c/007/0006

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

437767-06-07--06-07

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COMPANIES AFFORDING COVERAGE

COMPANY A STEADFAST INS CO

COMPANY B N/A

COMPANY C N/A

COMPANY D N/A

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. 2

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		07/30/06	07/30/07	GENERAL AGGREGATE	$ 6,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	$ 6,000,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	$ 2,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	$ 2,000,000
	X Includes Blasting				FIRE DAMAGE (Any one fire)	$ 2,000,000
					MED EXP (Any one person)	$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	$
	ANY AUTO				BODILY INJURY (Per person)	$
	ALL OWNED AUTOS					
	SCHEDULED AUTOS				BODILY INJURY (Per accident)	$
	HIRED AUTOS					
	NON-OWNED AUTOS				PROPERTY DAMAGE	$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
	ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
	EXCESS LIABILITY				EACH OCCURRENCE	$
	UMBRELLA FORM				AGGREGATE	$
	OTHER THAN UMBRELLA FORM					$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS / OTHER	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL / EXCL				EL EACH ACCIDENT	$
					EL DISEASE-POLICY LIMIT	$
					EL DISEASE-EACH EMPLOYEE	$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
RE: Star Point #1 and #2 Mine Permit #C/007/006
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, ITS AGENTS OR REPRESENTATIVES.~~

MARSH USA INC.
BY: Mark C. Benson Mark C. Benson
VALID AS OF: 07/28/06

RECEIVED
SEP 20 2006
DIV. OF OIL, GAS & MINING

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

437767-06-07--06-07

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

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COMPANIES AFFORDING COVERAGE

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

COVERAGES This certificate supersedes and replaces any previously issued certificate for the policy period noted below. 4

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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		07/30/06	07/30/07	GENERAL AGGREGATE	$ 6,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	$ 6,000,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	$ 2,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	$ 2,000,000
	X Includes Blasting				FIRE DAMAGE (Any one fire)	$ 2,000,000
					MED EXP (Any one person)	$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	$
	ANY AUTO				BODILY INJURY (Per person)	$
	ALL OWNED AUTOS					
	SCHEDULED AUTOS				BODILY INJURY (Per accident)	$
	HIRED AUTOS					
	NON-OWNED AUTOS				PROPERTY DAMAGE	$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
	ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
	EXCESS LIABILITY				EACH OCCURRENCE	$
	UMBRELLA FORM				AGGREGATE	$
	OTHER THAN UMBRELLA FORM					$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS / OTHER	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL / 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, ~~[illegible]~~

MARSH USA INC.
BY: Mark C. Benson Mark C. Benson
MM1(3/02)
VALID AS OF: 07/28/06

RECEIVED
SEP 20 2006
DIV. OF OIL, GAS & MINING