NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if diffr
NAME
ADDRESS
FACILITY
LOCATION

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT										
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	CFD						ONCE/ MONTH	ESTMD
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			SU	6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
00530 1 0 0 SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L		25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
00545 1 0 0 SOLIDS, SETTLEABLE EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			ML/L			0.6 DAILY MX	ML/L		ONCE/ MONTH	GRAB
00556 1 0 0 OIL AND GREASE FREON EXTR-GRAV METH EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L			10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
00665 1 0 0 PHOS, TOTAL (P) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L			2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
51414 1 0 0 FLOATING SOLIDS OR VISIBLE FOAM-VISUAL EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, Preside
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 637 NUMBER 0350

DATE: YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS LIMITED TO END OF PIPE, SOLIDS MAY APPEAR IN THE ATTENUATION POND.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted] COAL CLEANING PLANT

ADDRESS P.O. [redacted]

[redacted] HELLIER [redacted] WV 24819

FACILITY [redacted]

LOCATION [redacted]

ATTN: MR. CANDY MAYNARD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
[redacted]	[redacted]

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	92	07	01	TO	92	07	31

F - FINAL

[redacted] DISCHARGE FROM [redacted]

MINE:

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 50310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			*******	*******	*******				
	PERMIT REQUIREMENT	[illegible]	[illegible] DAILY MX	YES=1 NO=0	[illegible]	[illegible]	[illegible]	[illegible]		ONCE/ MONTH	[illegible]
SOLIDS, TOTAL DISSOLVED 70295 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******			******	*******					
	PERMIT REQUIREMENT	[illegible]	2000 DAILY MX	LBS/DY	[illegible]	[illegible]	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
301	837-0350

DATE

YEAR	MO	DAY
92	07	31

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, [illegible] [illegible] OF LIMITED INTENT OR TSS. REPORT MONTH NOT USED IN THE STATE PGM.

PERMITTEE NAME/ADDRESS *(Include Entity Name/Location if diff)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER *(2-16)*	DISCHARGE NUMBER *(17-19)*

MONITORING PERIOD

	YEAR *(20-21)*	MO *(22-23)*	DAY *(24-25)*		YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
FROM				TO			

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		QUANTITY OR LOADING *(3 Card Only) (46-53)* AVERAGE	QUANTITY OR LOADING *(54-61)* MAXIMUM	UNITS	QUALITY OR CONCENTRATION *(4 Card Only) (38-45)* MINIMUM	QUALITY OR CONCENTRATION *(46-53)* AVERAGE	QUALITY OR CONCENTRATION *(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
FLOW RATE	SAMPLE MEASUREMENT				*******	*******	*******				
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AV.	REPORT DAILY MX.	GPD						ONCE/ MONTH	MEASR
pH	SAMPLE MEASUREMENT	*******	*******			*******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ****	6.5 STD UNITS	*****	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	*****	*****	*** ****	*****	25 30 DAY AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*****	*****	*** ****	*****	*****	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE 00556 EXT-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*****	*****	*** ****	*****	*****	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*****	*****	*** ****	*****	*****	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 84113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*****	0 DAILY MX	PRES=1	*****	*****	*****	*** ****		ONCE/ MONTH	1 HOUR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
CARLIE VAUGHN, PRESIDENT CASTLE VALLEY RESOURCES TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 801	NUMBER 637-0350	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE PER DAY FROM ALL OUTFALLS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if dif)
NAME [redacted]
ADDRESS P.O. BOX 725
[redacted]
TELEPHONE [redacted]
FACILITY [redacted]
LOCATION [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [redacted]
(17-19) DISCHARGE NUMBER: [redacted]

1 - FINAL
DISCHARGE FROM [redacted]

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
92	07	01	92	07	31

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 50610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	LBS=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	TIGRAB
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******			******	******					
	PERMIT REQUIREMENT	******	2000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 12 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO 0 LBS/DY FROM ALL OUTFALLS. [redacted] DISCHARGE PERMIT [redacted]

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if dif*

NAME [redacted]

ADDRESS [redacted]

[redacted]

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
[redacted]	[redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	07	01	TO	[redacted]	[redacted]	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

[redacted] - FINAL

[redacted]

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT				******	******	******				
0056 1 0 0 EFFLUENT GROSS VALUE	2 PERMIT REQUIREMENT	REPORT 30 DAILY AV	REPORT DAILY MX	CFS	[redacted]	[redacted]	[redacted]	**** *****		ONCE/ MONTH	EASTI
[redacted]	SAMPLE MEASUREMENT	******	******			******					
0400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	6.5 DAILY MN	[redacted]	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 0530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******						
	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	[redacted]	25 30 DAY AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 0545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	[redacted]	[redacted]	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE HEXN EXTR-GRAV METH 0556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	[redacted]	[redacted]	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
[redacted], TOTAL (AS FE) 1045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	[redacted]	[redacted]	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 3543 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	2 PERMIT REQUIREMENT	[redacted]	0 DAILY MX	FS=1 NO=2	[redacted]	[redacted]	[redacted]	**** *****		NCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
Charlie Vaughn, President Castle Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[redacted]	637-0350	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR / MO / DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE FOR PER DAY FROM ALL OUTFALLS. [redacted] [redacted] [redacted]

PERMITTEE NAME/ADDRESS (Include facility Name/Location if diff.)
NAME [redacted]
ADDRESS P.O. BOX 248
[redacted] KELLERTON [redacted]
FACILITY [redacted]
LOCATION [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [redacted]

(17-19) DISCHARGE NUMBER: [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	07	01	TO	[redacted]	7	1
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMENT 50614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0.5 DAILY MX	YES=1 NO=0	******	******	******	****		ONCE/ MONTH	ESTIMATE
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******			******	******					
	PERMIT REQUIREMENT	******	1000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 97 MO 07 DAY [redacted]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [redacted] ARE LIMITED INSTEAD OF TSS. PLEASE NOTE NOT ALL OF THE PARAMETERS [redacted].

PERMITTEE NAME/ADDRESS (Include City Name/Location if diff)

NAME [redacted]

ADDRESS [redacted]

[redacted]

FACILITY [redacted]

LOCATION [redacted]

[redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER [redacted]

(17-19) DISCHARGE NUMBER [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	[redacted]	[redacted]	TO	[redacted]	[redacted]	[redacted]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LOW RATE	SAMPLE MEASUREMENT				*******	*******	*******				
0056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	CFS	*******	*******	*******	*** *****		ONCE/ MONTH	MEASRD
H	SAMPLE MEASUREMENT	*******	*******			*******					
0400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*** *****	6.5 DAILY MN	*******	9.0 DAILY MX	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 0530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	*******	*******	*** *****	*******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 0545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*** *****	*******	*******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE 00 ON EXTR-GRAV METH 0556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*** *****	*******	*******	10.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
PHOS, TOTAL (AS P) 0665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*** *****	*******	*******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 0D3 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	0 DAILY MX	VSL	*******	*******	*******	*** *****		ONCE/ MONTH	ISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
Charlie Vaughn, President Castle Valley Resources TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature] SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	637-0350 AREA CODE / NUMBER	YEAR / MO / DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE FOR PER DAY FROM ALL OUTFALLS. [redacted] PRECIPITATION EVENTS, [redacted]

MITTEE NAME/ADDRESS (Include
ility Name/Location if diff
ME [redacted]
DRESS P.O. BOX 760
[redacted]
CILITY
CATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER [redacted]

(17-19) DISCHARGE NUMBER [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	[redacted]	01	TO	[redacted]	[redacted]	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ANITARY WASTE	SAMPLE MEASUREMENT	******			******	******	******				
ISCHARGED-ASSESSMNT	PERMIT REQUIREMENT	******	03 DAILY MX	YES=1 NO=0	******	******	******	****		NCE/ MONTH	VISUAL
5610 1 0 0											
FFLUENT GROSS VALUE											
OLIDS, TOTAL	SAMPLE MEASUREMENT	******			******	******					
ISSOLVED	PERMIT REQUIREMENT	******	2000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		NCE/ GRAB MONTH	
0 0 0											
E COMMENTS BELOW											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

CHARLIE VAUGHN, PRESIDENT
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	07	21

MMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE [illegible]

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if dif.)
NAME [redacted]
ADDRESS P.O. BOX [redacted]
[redacted] WELLINGTON [redacted] UT 84542
FACILITY [redacted]
LOCATION [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [redacted]

(17-19) DISCHARGE NUMBER: [redacted]

1 - FINAL

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[redacted] PATE	SAMPLE MEASUREMENT				******	******	******				
0056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	[redacted]	[redacted]	[redacted]	[redacted]		ONCE/ MONTH	GRAB
H	SAMPLE MEASUREMENT	******	******			******					
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	6.5 MINIMUM	[redacted]	9.0 DAILY MX	SU		TWICE/ MONTH	GRAB
OLIDS, TOTAL SUSPENDED 0530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******						
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	25 (30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OLIDS, SETTLEABLE 0545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
IL AND GREASE HEXN EXTR-GRAV METH 0556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
ON, TOTAL (AS FE) 1045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
TING SOLIDS OR IBLE FOAM-VISUAL 0151 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	[redacted]	0.0 DAILY MX	YES=1 NO=0	[redacted]	[redacted]	[redacted]	*** ****		NCE/ MONTH	ISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 637 NUMBER -0350

DATE: YEAR [redacted] MO [redacted] DAY [redacted]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE FOR PER DAY FROM ALL OUTFALLS. [redacted] PRECIPITATION EVENTS, SETTLEABL[redacted] [redacted] TO [redacted] OF [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM			01	TO			

NOTE: Read instructions before completing this form.

COMMITTEE NAME/ADDRESS (Include Facility Name/Location if diff.)
NAME
ADDRESS
FACILITY
LOCATION
ATTN: DR. CANDY MENZEMERS

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGES-ASSESSMNT 50110 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	*******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******			******	******					
	PERMIT REQUIREMENT	******	2000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 07 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE DAY PER MAY FROM ALL OUTFALLS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted] PUMP CLEANING PLANT

ADDRESS P.O. BOX 756

[redacted] WELLINGTON UT 84542

[redacted]

FACILITY [redacted]

LOCATION [redacted]

[redacted] EP, CANDY [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [redacted]

(17-19) DISCHARGE NUMBER: [redacted]

5 - FINAL

RUNOFF FROM POND

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	[redacted]	[redacted]	TO	[redacted]	[redacted]	[redacted]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LOW RATE 0056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				******	*******	*******			No Flow	
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	[redacted]	[redacted]	[redacted]	*** *****		ONCE/ MONTH	MEASURD
0400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	9.0 DAILY MX	SU		VICE/ MONTH	GRAB
OLIDS, TOTAL SUSPENDED 0530 P 3 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******						
	PERMIT REQUIREMENT	[redacted]	[redacted]	**** *****	[redacted]	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OLIDS, SETTLEABLE 0545 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	*******					
	PERMIT REQUIREMENT	******	******	*** *****	[redacted]	[redacted]	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
E AND GREASE 4 FXTL-CRUV HEX 0556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** *****	[redacted]	[redacted]	10.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
, TOTAL (AS PB) 1051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** *****	[redacted]	[redacted]	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
LOATING SOLIDS OR VISIBLE FOAM-VISUAL 3151 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	*******	*******				
	PERMIT REQUIREMENT	[redacted]	0 DAILY MX	FS=1	[redacted]	[redacted]	[redacted]	*** *****		ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
637	0350

DATE

YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE TOP PER DAY FROM ALL OUTFALLS. [redacted]

MITTEE NAME/ADDRESS (Include
ity Name/Location if diff
ME HELPER COAL CLEANING PLANT
DRESS P.O. BOX 745
HELPER UT 84526
CILITY
CATION
ITN: MR. CANDY MANZIONE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT0024817

(17-19) DISCHARGE NUMBER: 001

P - FINAL
RUNOFF FROM ROAD

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	07	01	TO	92	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 5614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
	PERMIT REQUIREMENT	*****	05 DAILY MX	LBS/DY	*****	*****	*****	*** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0095 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****			*****	*****					
	PERMIT REQUIREMENT	*****	1000 DAILY MX	LBS/DY	*****	*****	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 07 DAY 31

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

05 IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

MITTEE NAME/ADDRESS (Include
ity Name/Location if diff
ME
DRESS P.O. BOX 70
WELLINGTON UT 84542
CILITY
CATION
: PR. CANDY TERMINALS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT										
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			GPD						ONCE/ MONTH	CALCU
pH	SAMPLE MEASUREMENT										
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			SU				SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L				MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			ML/L				ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE HEM EXTR-GRAV MET 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L				MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			MG/L			2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 03613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			YES=1 NO=2						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 1 | NUMBER 637-0350

DATE: YEAR 92 | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLI

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

F - FINAL

NOTE: Read instructions before completing this form.

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	07	01	TO	92	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ITARY WASTE	SAMPLE MEASUREMENT	******			******	*******	*******				
SCHARGED-ASSESSMNT	PERMIT REQUIREMENT	[illegible]	[illegible]	PS=1 NO=0	[illegible]	[illegible]	[illegible]	*****	I	ONCE/ MONTH	VISUAL
314 1 0 0	SAMPLE MEASUREMENT	******			******	******					
FLUENT GROSS VALU	PERMIT REQUIREMENT	[illegible]	[illegible]	LBS/D	[illegible]	[illegible]	REPORT	MG/L	I	ONCE/ MONTH	GRAB
LIDS, TOTAL	SAMPLE MEASUREMENT										
ISSOLVED	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				
295 0 0 0	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
Charlie Vaughn, President Castle Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	801-637-0350	92	07	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO / DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. [illegible]

COAL SYSTEM, INC.
WELLINGTON PREPERATION PLANT

DISCHARGE WATER MONITORING

LOCATION	SAMPLE NO.	DATE	TIME	SAMPLER	TEMP (C)	FLOW (GPM)	pH	COMMENTS
EMERGENCY SPILLWAY & SEEPAGE	DW 001	8-20-92	12:15	CM				DRY
CEMENT FLUME PUMP HOUSE	DW 002	8-20-92	12:25	CM				Little Seepage
PIPELINE - SLURRY POND	DW 003	8-20-92	12:05	CM				DRY
HEAT DRIER DISCHARGE	DW 004	8-20-92	11:05A	CM				DRY
DISCHG TO PRICE RIVER CULVERT	DW 005	8-20-92	12:40	CM				DRY
CULVERT UNDER RR/HEAD OF YARD	DW 006	8-20-92	11:30A	CM				DRY
CULVERT UNDER RR/NW OF HOPPER	DW 007	8-20-92	11:15A	CM				DRY
N. POND SEEPAGE	DW 008	8-20-92	11:45A	CM				DRY

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

E - FINAL

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUALITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
FLOW RATE	SAMPLE MEASUREMENT										
50056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASURED
PH	SAMPLE MEASUREMENT										
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30-DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE 84066 EFF-GRAV MET 50056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
[illegible], TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 03181 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	0 DAILY MX		99=1 00=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Charlie Vaughn, President Castle Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801-637-0351		92	03	
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE TEST PER DAY FOR ALL DETAILS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLI

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME [illegible]
ADDRESS P.O. BOX 15
[illegible] UT 84 03
FACILITY
LOCATION
ATTN: MR. CANDY WILLIAMS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER [illegible]

(17-19) DISCHARGE NUMBER [illegible]

F - FINAL

DISTRICT FROM [illegible]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	08	01	TO	92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMENT 5610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		YES=1 NO=0	*****	*****	*****				
	PERMIT REQUIREMENT	*****	0 DAILY MX		*****	*****	*****	*****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0 2 3 5 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****			*****	*****					
	PERMIT REQUIREMENT	*****	4000 DAILY MX	LBS/D	*****	*****	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0355

DATE: YEAR 92 MO 08 DAY 31

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE FOR PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

TTEE NAME/ADDRESS (include Name/Location if different)

E [illegible]
ESS P.O. Box 7[illegible]
[illegible]
ITY
TION
[illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [illegible]

(17-19) DISCHARGE NUMBER: 001

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	9[illegible]	[illegible]	01	TO	9[illegible]	[illegible]	[illegible]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

9 - FINAL
[illegible]

REVISED

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible] RATE [illegible] 1 0 0 [illegible]FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DAY AV	REPORT DAILY MX	GPD						ONCE/ MONTH	ESTD
[illegible]0 1 0 0 [illegible]LUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
[illegible]IDS, TOTAL [illegible]PENDED [illegible]0 P 0 0 [illegible] COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DAY AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
[illegible]IDS, SETTLEABLE [illegible]5 6 0 0 [illegible] COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
[illegible]AD GREASE [illegible] EXTR-GRAV METH [illegible] 1 3 0 [illegible] GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
[illegible], TOTAL [illegible] (AS PB) [illegible] 1 0 0 [illegible] GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
[illegible]IV, SOLIDS OF [illegible]LE FOOT-VISUAL [illegible] 1 0 0 [illegible] GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	0 DAILY MX		YES=1						ONCE/ MONTH	TEST

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
[illegible]ie Vaughn, President [illegible]ie Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	301-637-0350	9[illegible]	09	[illegible]
TYPED OR PRINTED		AREA CODE / NUMBER		YEAR	MO	DAY

IMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] LIMITED TO ONE PER DAY FOR ALL PARAMETERS. SAMPLE PROTOCOL FOR [illegible]

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted] COAL CLEANING PLANT

ADDRESS P.O. BOX [redacted]

[redacted] WELLINGTON [redacted] (UT 84542)

FACILITY

LOCATION

CONTACT: MR. CANDY HENDERSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT-0[redacted]

(17-19) DISCHARGE NUMBER: 00[redacted]

F - FINAL

RUNOFF FROM [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	08	01	TO	92	[redacted]	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 50610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		YES=1 NO=0	*****	*****	*****	*** ****		ONCE/ MONTH	VISUAL
	PERMIT REQUIREMENT	*****	0 DAILY MX		*****	*****	*****				
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****		LBS/DY	*****	*****		MG/L		ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	2000 DAILY MX		*****	*****	REPORT DAILY MX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 08 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [redacted] LIMITED INTERNAL TO [redacted] REPORT READ NOT MEETING THE REQUIREMENT.

MITTEE NAME/ADDRESS *(Include*
ility Name/Location if dif
ME
DRESS P.O. BOX 1
WELLINGTO
CILITY
CATION
E: MR. CANDY SANTAMARIA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER: UT0021911 — *(17-19)* DISCHARGE NUMBER: 002

F - FINAL
SUPPORT PROV BOARD

MONITORING PERIOD

FROM YEAR *(20-21)*	MO *(22-23)*	DAY *(24-25)*	TO YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
91	08	01	91	11	30

SENIOR

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUALITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
FLOW RATE	SAMPLE MEASUREMENT				******	******	*******				
0056 1 0 0	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	******	******	******	**** *****		ONCE/ MONTH	EASRP
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			******					
00	PERMIT REQUIREMENT	******	******	**** *****	6.5 DAILY MN	******	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
0400 1 0 0	SAMPLE MEASUREMENT	******	******		******						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** *****	******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******					
0530 P 0 0	PERMIT REQUIREMENT	******	******	**** *****	******	******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******					
SOLIDS, SETTLEABLE	PERMIT REQUIREMENT	******	******	**** *****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
0545 P 0 0	SAMPLE MEASUREMENT	******	******		******	******					
SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** *****	******	******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	******	******		******	******					
HEXN EXTR-GRAV METH	PERMIT REQUIREMENT	******	******	**** *****	******	******	*******	*** *****		ONCE/ MONTH	VISUAL
0556 1 0 0											
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL (AS FE)											
1045 1 0 0											
EFFLUENT GROSS VALUE											
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL											
3111 1 0 0											
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Charlie Vaughn, President	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		801-637-0356		92	08	20
Castle Valley Resources						
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] SEE COMMENTS BELOW. REPORT "NO DISCHARGE" IN THE APPROPRIATE BOX.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

HMITTEE NAME/ADDRESS (Include
ity Name/Location if dif
AME
DDRESS
ACILITY
OCATION

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM		08	01	TO		08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ANITARY WASTE	SAMPLE MEASUREMENT	******			******	******	******				
ISCHARGED-ASSESSMT	PERMIT REQUIREMENT	******	0.50 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
50010 1 0 0	SAMPLE MEASUREMENT	******			******	******					
FFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	2000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
OLIDS, TOTAL	SAMPLE MEASUREMENT										
ISSOLVED	PERMIT REQUIREMENT										
0095 Q 0 0	SAMPLE MEASUREMENT										
EE COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charles Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	08	

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted] COAL CLEANING PLANT

ADDRESS [redacted]

[redacted] WELLINGTON [redacted] UT 84542

FACILITY

LOCATION

OTHER: CR, CANDY MANUFACTURING

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER [redacted]

(17-19) DISCHARGE NUMBER [redacted]

E - FINAL

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	04	01	TO	[redacted]	[redacted]	[redacted]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

YEAR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT				*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	[redacted]	[redacted]	[redacted]	****		ONCE/ MONTH	EASTI
H	SAMPLE MEASUREMENT	*******	*******			*******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	6.5 MINIMUM	[redacted]	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE HEXN EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	[redacted]	[redacted]	*** ****	[redacted]	[redacted]	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 03613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	[redacted]	0 DAILY MX	FS=1 FS=0	[redacted]	[redacted]	[redacted]	**** ****		ONCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DA
92	08	

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE TOR PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [redacted] LIMITED INSTEAD OF THIS. REPORT "0" DO NOT APPLY TO THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted] COAL CLEANING PLANT

ADDRESS P.O. BOX 150

[redacted] HELPER UT 84526

FACILITY [redacted]

LOCATION [redacted]

ATTN: MR. CANDY HANSBROUGH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PERMIT NUMBER: UTG040 [redacted]

DISCHARGE NUMBER: 001

3 - FINAL

DISCHARGE FROM SLUDGE [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	08	01	TO	92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE	SAMPLE MEASUREMENT	******			******	******	*******				
DISCHARGED-ASSESSMENT	PERMIT REQUIREMENT	******	0.1 DAILY MX	FS=1 NO=0	******	******	******	**** ****		NCE/ MONTH	TISU
50610 1 0 0	SAMPLE MEASUREMENT	******			******	******					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	1000 DAILY MX	LBS/DY	******	******	REPORT DAILY MX	MG/L		NCE/ MONTH	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT										
DISSOLVED	PERMIT REQUIREMENT										
00295 0 0 0	SAMPLE MEASUREMENT										
SEE COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0351

DATE

YEAR	MO	DA
92	08	

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

TSS IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] LIMITED INSTEAD OF TSS. REPORT "0" FOR ANY TSS OR SS ABOVE THE APPROPRIATE DAY.

MITTEE NAME/ADDRESS *(Include*
ility Name/Location if dif
ME
DRESS P.O. BOX 1
WELLINGTO
CILITY
CATION
E: MR. CANDY SANTAMARIA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER: UT0021911 — *(17-19)* DISCHARGE NUMBER: 002

F - FINAL
SUPPORT PROV BOARD

MONITORING PERIOD

FROM YEAR *(20-21)*	MO *(22-23)*	DAY *(24-25)*	TO YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
91	08	01	91	11	30

SENIOR

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUALITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
FLOW RATE	SAMPLE MEASUREMENT				******	******	*******				
0056 1 0 0	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	******	******	******	**** *****		ONCE/ MONTH	EASRP
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			******					
00	PERMIT REQUIREMENT	******	******	**** *****	6.5 DAILY MN	******	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
0400 1 0 0	SAMPLE MEASUREMENT	******	******		******						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** *****	******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	******					
0530 P 0 0	PERMIT REQUIREMENT	******	******	**** *****	******	******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******					
SOLIDS, SETTLEABLE	PERMIT REQUIREMENT	******	******	**** *****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
0545 P 0 0	SAMPLE MEASUREMENT	******	******		******	******					
SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** *****	******	******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	******	******		******	******					
HEXN EXTR-GRAV METH	PERMIT REQUIREMENT	******	******	**** *****	******	******	*******	*** *****		ONCE/ MONTH	VISUAL
0556 1 0 0											
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL (AS FE)											
1045 1 0 0											
EFFLUENT GROSS VALUE											
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL											
3111 1 0 0											
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Charlie Vaughn, President	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		801-637-0356		92	08	20
Castle Valley Resources						
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] SEE COMMENTS BELOW. REPORT "NO DISCHARGE" IN THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [illegible]

ADDRESS [illegible]

[illegible]

FACILITY [illegible]

LOCATION [illegible]

[illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PERMIT NUMBER [illegible]

DISCHARGE NUMBER [illegible]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	[illegible]	[illegible]	TO	[illegible]	[illegible]	[illegible]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

[illegible]

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53) AVERAGE	QUANTITY OR LOADING (46-53) MAXIMUM	QUANTITY OR LOADING (46-53) UNITS	QUALITY OR CONCENTRATION (38-45) MINIMUM	QUALITY OR CONCENTRATION (54-61) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	QUALITY OR CONCENTRATION (54-61) UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible] FLOW RATE	SAMPLE MEASUREMENT										
0056 1 0 0	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						NCE/ MONTH	EASU
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
[illegible]	PERMIT REQUIREMENT						9.0 DAILY MX	SU		NCE/ MONTH	GRAB
0400 1 0 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT										
0530 1 0 0	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
SOLIDS, SETTLEABLE	PERMIT REQUIREMENT						10 DAILY MX	ML/L		ONCE/ MONTH	GRAB
0545 1 0 0	SAMPLE MEASUREMENT										
SEE COMMENTS BELOW	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT										
0556 1 0 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
[illegible], TOTAL (AS FE)	PERMIT REQUIREMENT										
1045 1 0 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT										
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL	SAMPLE MEASUREMENT										
3013 1 0 0	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						NCE/ MONTH	ISOL
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughm, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	08	2[illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible]

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [redacted]

ADDRESS [redacted]

[redacted]

FACILITY [redacted]

LOCATION [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

(2-16) (12-19)

PERMIT NUMBER [redacted]

DISCHARGE NUMBER [redacted]

F - FINAL

DISCHARGE [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	[redacted]	[redacted]	TO	[redacted]	[redacted]	[redacted]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ANITARY WASTE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
ISCHARGED-ASSESSMNT	PERMIT REQUIREMENT	*****	04 51 DAILY MX	YES=1 NO=0	*****	*****	*****	*** *****		ONCE/ MONTH	VISUAL
5614 1 0 0											
FFLUENT GROSS VALUE											
OLIDS, TOTAL	SAMPLE MEASUREMENT	*****			*****	*****					
ISSOLVED	PERMIT REQUIREMENT	*****	2000 DAILY MX	LBS/DAY	*****	*****	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
0295 0 0 0											
EE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, Presidan
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	08	

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE FOR PER DAY FOR ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

PERMITTEE NAME/ADDRESS (Include City Name/Location if ...)

NAME [redacted]

ADDRESS P.O. [redacted]

[redacted] WELLINGTO[redacted]

FACILITY [redacted]

LOCATION [redacted]

[redacted] MI. CANDE MANAGEMENT

NATIONAL POLLUTANT [redacted]ISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHAR[redacted]ITORING REPORT (DMR)
(2-16) (17-19)

PERMIT NUMBER [redacted]

DISCHARGE NUMBER [redacted]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[redacted]	[redacted]	[redacted]	TO	[redacted]	[redacted]	[redacted]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

[redacted] - FINAL

DISCHARGE FROM [redacted]

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LOW RATE	SAMPLE MEASUREMENT										
0056 1 0 0	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	PASS
PH	SAMPLE MEASUREMENT										
00400 1 0 0	PERMIT REQUIREMENT				6.0 INSTANTANEOUS		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT										
0530 1 0 0	PERMIT REQUIREMENT					25 30 DAY AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SEE COMMENTS BELOW											
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT										
0545 1 0 0	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
SEE COMMENTS BELOW											
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT										
0556 1 0 0	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT										
1045 1 0 0	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL	SAMPLE MEASUREMENT										
0151 1 0 0	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISU

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, Presiden
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
801	637-0350	92	09	[redacted]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE TOX PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [redacted]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)

DISCHARGE NUMBER (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 50610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		YES=1 NO=0	*****	*****	*****	*** ****		ONCE/ MONTH	EQUAL
	PERMIT REQUIREMENT	*****	0 DAILY MX		*****	*****	*****				
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****		LBS/DY	*****	*****	*****	MG/L		ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	2000 DAILY MX		*****	*****	REPORT DAILY MX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	09	30

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS,

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [illegible]

ADDRESS P.O. BOX [illegible]

[illegible] WELLINGTON [illegible]

FACILITY [illegible]

LOCATION [illegible]

[illegible]: NW, CARBON COUNTY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) (1-16)

PERMIT NUMBER [illegible]

DISCHARGE NUMBER [illegible]

MONITORING PERIOD

FROM YEAR [illegible] MO [illegible] DAY [illegible] TO YEAR [illegible] MO [illegible] DAY [illegible]

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

P - TOTAL

DISCHARGE FROM [illegible]

MEAN

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT										
0056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AV	ABSORT DAILY MX	GPD						ONCE/ MONTH	MEASRD
H	SAMPLE MEASUREMENT										
0400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT						9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT										
0530 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT					20 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT										
0545 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE HEXN EXTR-GRAV METH	SAMPLE MEASUREMENT										
0556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL (AS FE)	SAMPLE MEASUREMENT										
1045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL	SAMPLE MEASUREMENT										
3151 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0 DA AV	0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 08 DAY [illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME [illegible] COAL COUNTY INC

ADDRESS P.O. BOX [illegible]

[illegible] WELLINGTON [illegible] UT 84542

FACILITY [illegible]

LOCATION [illegible]

ATTN: MR. CANDY HANSEN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER [illegible]

(17-19) DISCHARGE NUMBER [illegible]

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	[illegible]	05	01	TO	[illegible]	[illegible]	[illegible]
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FINAL

PERMIT [illegible]

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE	SAMPLE MEASUREMENT	******			******	******	******				
DISCHARGED-ASSESSMNT	PERMIT REQUIREMENT	******	03 DAILY MX	FS=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
00614 1 0 0	SAMPLE MEASUREMENT	******			******	******					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	2000 DAILY MX	LBS/D	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT										
70295 Q 0 0	PERMIT REQUIREMENT										
SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Cherlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE 801 NUMBER 637-0351

DATE

YEAR 92 MO 08 DA [illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE 200 PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible]

COAL SYSTEM, INC.
WELLINGTON PREPERATION PLANT

DISCHARGE WATER MONITORING

LOCATION	SAMPLE NO.	DATE	TIME	SAMPLER	TEMP (C)	FLOW (GPM)	pH	COMMENTS
EMERGENCY SPILLWAY & SEEPAGE	IDW 001	9-24-92	8:XA	PTL				DRY
CEMENT FLUME PUMP HOUSE	IDW 002	9-24-92	8:45A	PTL				Little Seepage
PIPELINE - SLURRY POND	IDW 003	9-24-92	9:35A	PTL				DRY
HEAT DRIER DISCHARGE	IDW 004	9-24-92	10:45A	PTL				DRY
DISCHG TO PRICE RIVER-CULVERT	IDW 005	9-24-92	9:10A	PTL				DRY
CULVERT UNDER RR/HEAD OF YARD	IDW 006	9-24-92	11:10A	PTL				DRY
CULVERT UNDER RR/NW OF HOPPER	IDW 007	9-24-92	11:30A	PTL				DRY
W POND SEEPAGE	IDW 008	9-24-92	10:00A	PTL				DRY

MITTEE NAME/ADDRESS (Include
ity Name/Location if diff
ME
DRESS
CILITY
CATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

F - FINAL

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM			01	TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LOW RATE 0056 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			GPD						ONCE/ MONTH	MEASR
0 0400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			SU			9.0 INSTANT	SU		ONCE/ MONTH	GRAB
OLIDS, TOTAL SUSPENDED 0530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 MONTHLY AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OLIDS, SETTLEABLE 0545 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ HOUR	GRAB
IL AND GREASE HEXANE EXTR-GRAV MET 0556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
ON, TOTAL (AS FE) 1045 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
LOATING SOLIDS OR ISIBLE FOAM-VISUAL 0403 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			PS=1						ONCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Charlie Vaughn, President Castle Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		801-637-035		93	03	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

OMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS IT [illegible] TO USE TDS PAY FOR ALL OUTFALLS DURING PRECIPITATION EVENTS, SETTLEABLE SOLI[illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

TTEE NAME/ADDRESS (I
Name/Location if dif
E KELLY #1 COAL CLEANING PLANT
ESS P.O. BOX 716
WELLINGTON UT 84542
LITY
ATION

(2-16) PERMIT NUMBER: UT-0023175

(17-19) DISCHARGE NUMBER: 001

F - FINAL
DISCHG FROM SLURY SY

MINOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

NAME OF CANDY KAMPSCHNEIDER

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ITARY WASTE	SAMPLE MEASUREMENT	*****			*****	*****	*****	****		ONCE/ MONTH	VISUAL
SCHARGED-ASSESSMN	PERMIT REQUIREMENT			FR=1 NO=0							
614 1 0 0	SAMPLE MEASUREMENT	*****			*****	*****	REPORT	MG/L		ONCE/ MONTH	GRAB
FFLUENT GROSS VALU	PERMIT REQUIREMENT			LBS/D							
LIDS, TOTAL	SAMPLE MEASUREMENT										
SSOLVED	PERMIT REQUIREMENT										
295 Q 0 0	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie VAughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY 2

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

TTEE NAME/ADDRESS
Name/Location if dif.
E HELEN COAL CLEANING PLANT
ESS P.O. BOX 715
WELLINGTON UT 84542
ITY
ATION
: MR. CANDY MANZIARES

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE ORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT0022519

(17-19) DISCHARGE NUMBER: 007

F - FINAL
RUNOFF FROM ROADS

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
92	09	01	92	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OW RATE 0056 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT			GPD						ONCE/ MONTH	MEASRD
	PERMIT REQUIREMENT										
00 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT							SU		ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT										
LIDS, TOTAL SPENDED. 530 P 0 0 E COMMENTS BELOW	SAMPLE MEASUREMENT			MG/L						ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT										
LIDS, SETTLEABLE 545 P 0 0 E COMMENTS BELOW	SAMPLE MEASUREMENT			ML/L						ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT										
L AND GREASE PRON EXTR-GRAV METH 556 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT			MG/L						ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT										
ROS, TOTAL (AS PB) 1045 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT			MG/L						ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT										
TING SOLIDS OR SIBLE FOAM-VISUAL 031 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT			FS=1 NO=0						ONCE/ MONTH	VISUAL
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Phoelie Vaughn, President
astle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
801	637-0350

DATE

YEAR	MO	DAY
92	09	30

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

ME WELLINGTON COAL CLEANING PLANT
DRESS P.O. BOX 766
WELLINGTON UT 84542
CILITY
CATION
T: MR. CANDY SANCHEZ

DISCHARGE M[illegible] *TORING REPORT (DMR) (2-16) (17-19)

PERMIT NUMB[illegible]

DISCHARGE NUMBER

F - FINAL
RUNOFF FROM ROADS

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
92	09	01	92	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ANITARY WASTE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
SCHARGED-ASSESSMNT	PERMIT REQUIREMENT	*****	0 DAILY MX	YES=1 NO=0	*****	*****	*****	*****		ONCE/ MONTH	VISUAL
614 1 0 0	SAMPLE MEASUREMENT	*****			*****	*****					
FLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	2000 DAILY MX	185/DY	*****	*****	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
OLIDS, TOTAL	SAMPLE MEASUREMENT										
SSOLVED	PERMIT REQUIREMENT										
295 0 0 0	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

ME/TITLE PRINCIPAL EXECUTIVE OFFICER

arlie VAughn, Presidan
stle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	637-0350	92	09	24

MENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE TOR PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS
LL BE [illegible] INSTEAD OF TSS. REPORT "DOES NOT [illegible]" IF THE APPROPRIATE BOX.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

F - FINAL
BONCE FEE PONDS

NAME/ADDRESS (Include Name/Location if dif
WELL[illegible] COAL CLEANING PLANT
P.O. BOX [illegible]
WELLINGTON UT 84542

PERMIT NUMBER: UTC[illegible]
DISCHARGE NUMBER: [illegible] 3

MONITORING PERIOD
FROM YEAR 92 MO 09 DAY 01 TO YEAR 93 MO [illegible] DAY 30

MINOR

NOTE: Read Instructions before completing this form.

TY
TION
: MR. CANDY VANZANDERS

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (34-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
W RATE	SAMPLE MEASUREMENT										
056 1 0 0	PERMIT REQUIREMENT	[illegible]	[illegible]	GPD						[illegible] MEASRD MONTH	
FLUENT GROSS VALUE	SAMPLE MEASUREMENT	[illegible]	[illegible]			[illegible]					
	PERMIT REQUIREMENT			[illegible]			[illegible]	SU		[illegible] GRAB MONTH	
00 1 0 0	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
FLUENT GROSS VALUE	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
LIDS, TOTAL SPENDED	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
530 P 0 0	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
E COMMENTS BELOW	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
LIDS, SETTLEABLE	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	ML/L		ONCE/GRAB MONTH	
585 P 0 0	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
E COMMENTS BELOW	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
L AND GREASE	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
ON EXTR-GRAV METH	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
556 1 0 0	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
FLUENT GROSS VALUE	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
N, TOTAL (AS FE)	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]						
1045 1 0 0	PERMIT REQUIREMENT			[illegible]		[illegible]	[illegible] DAILY MX	MG/L		ONCE/GRAB MONTH	
FLUENT GROSS VALUE	SAMPLE MEASUREMENT	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]	[illegible]			
LOATING SOLIDS OR ISIBLE FOAM-VISUAL	PERMIT REQUIREMENT			ES=1 NO=0						ONCE/VISUAL MONTH	
5513 1 0 0											
FLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 93 MO 09 DAY [illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABL[illegible] SOLIDS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

F - FINAL

RUNOFF FROM ROADS

EE NAME/ADDRESS (Include
ame/Location if dif
SKELLY COAL CLEANING PLANT
SS Box Box 165
WELLINGTON UT 84542
TY
ION

PERMIT NUMBER: UT0000221 (2-16)

DISCHARGE NUMBER: 006 A (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	08	31	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ITARY WASTE	SAMPLE MEASUREMENT	*****			*****	*****	*****			ONCE/ MONTH	VISUAL
SCHARGED-ASSESSMNT	PERMIT REQUIREMENT	*****	0	YES=1 NO=0							
510 1 0 0	SAMPLE MEASUREMENT	*****			*****	*****					
FLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	2000 DAILY MX	LBS/DY			REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
LIDS, TOTAL	SAMPLE MEASUREMENT										
SSOLVED	PERMIT REQUIREMENT										
295 Q 0 0	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, Presiden
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

5 - FINAL

FACILITY NAME/ADDRESS (Include Name/Location if different)
WELL #1 COAL CLEANING PLANT
P.O. BOX 766
WELLINGTON UT 84542
CITY
STATION
CONTACT: MR. CANDY MANTANARES

(2-16) PERMIT NUMBER: UT0023671

(17-19) DISCHARGE NUMBER: 001

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	01	01	TO	92	03	15
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OW RATE 50056 1 0 0	SAMPLE MEASUREMENT									ONCE/MONTH	GRAB
	PERMIT REQUIREMENT			GPD							
EFFLUENT GROSS VALUE 00400 1 0 0	SAMPLE MEASUREMENT							SU		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT							MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT										
SEE COMMENTS BELOW SOLIDS, SETTLEABLE 00545 1 0 0	SAMPLE MEASUREMENT							ML/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT										
SEE COMMENTS BELOW OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0	SAMPLE MEASUREMENT							MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE IRON, TOTAL (AS FE) 01045 1 0 0	SAMPLE MEASUREMENT							MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 03613 1 0 0	SAMPLE MEASUREMENT									ONCE/MONTH	VISUAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			ES=1 NO=0							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie VAughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0356

DATE: YEAR 92 MO 03 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

ONE MIX PER DAY FROM ALL OUTFALLS DURING PRECIPITATION EVENTS. SETTLEABL SOLIDS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

FACILITY NAME/ADDRESS (Name/Location if d
WELLS [illegible] COAL CLEANING PLANT
ADDRESS P.O. BOX 366
WELLINGTON UT 84542
CITY
STATION

PERMIT NUMBER (2-16): UT0023671

DISCHARGE NUMBER (17-19): 001

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	04	01	TO	92	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

1 - FINAL
DISCHARGE FROM SPECIFIED [illegible]
MINOR

NOTE: Read Instructions before completing this form.

NAME: MR. CANDY HERNANDEZ

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE	SAMPLE MEASUREMENT	*****		YES=1	*****	*****	*****	***		ONCE/ MONTH	VISUAL
DISCHARGED-ASSESSMNT	PERMIT REQUIREMENT			NO=0				****			
50614 1 0 0	SAMPLE MEASUREMENT	*****			*****	*****					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		200 DAILY MX	LBS/DY			REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT										
DISSOLVED	PERMIT REQUIREMENT										
70295 Q 0 0	SAMPLE MEASUREMENT										
SEE COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0359

DATE: YEAR 92 MO 05 D

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] OUTFALLS, DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

TEE NAME/ADDRE
Name/Location if
WELL
ESS P.O. BOX 766
HELLINGTON UT 84542
ITY
TION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

F - FINAL
DISCHARGE FROM

PERMIT NUMBER	DISCHARGE NUMBER
UT0025615	001 F

MINOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	AVERAGE	(46-53) MAXIMUM	(54-61) UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OW RATE	SAMPLE MEASUREMENT										
0056 1 0 0	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASRD
FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						9.0 DAILY MX	SU		ONCE/GRAB MONTH	
00 1 0 0	SAMPLE MEASUREMENT										
FLUENT GROSS VALUE	PERMIT REQUIREMENT										
OLIDS, TOTAL	SAMPLE MEASUREMENT										
ISPENDED	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/GRAB MONTH	
0530 P 0 0 0	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT										
OLIDS, SETTLEABLE	SAMPLE MEASUREMENT										
0545 0 0 0	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/GRAB MONTH	
E COMMENTS BELOW	SAMPLE MEASUREMENT										
IL AND GREASE	PERMIT REQUIREMENT										
PFON EXTR-GRAV METH	SAMPLE MEASUREMENT										
0556 1 0 0	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/GRAB MONTH	
FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
ION, TOTAL (AS FE)	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/GRAB MONTH	
1045 1 0 0	SAMPLE MEASUREMENT										
FLUENT GROSS VALUE	PERMIT REQUIREMENT										
LOATING SOLIDS OR	SAMPLE MEASUREMENT										
ISIBLE FOAM-VISUAL	PERMIT REQUIREMENT			FS=1						ONCE/ MONTH	VISUAL
0613 1 0 0											
FLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, Presiden
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DA
801	637-0350	92	10	2

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

ON DAY FROM ALL OUTFALLS DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

F - FINAL

FACILITY NAME/ADDRESS (include name/Location if dif.)

[illegible] COAL CLEANING PLANT

[illegible] BOX 766

[illegible]

PERMIT NUMBER (2-16): [illegible]

DISCHARGE NUMBER (17-19): [illegible]

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	92	09	01	TO	92	09	30

NOTE: Read instructions before completing this form.

NAME: MR. CANDY MANAGERS

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (3 Card Only) (46-53) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ITARY WASTE	SAMPLE MEASUREMENT	*****		ES=1				*** *****		ONCE/ MONTH	VISUAL
SCHARGED-ASSESSMNT	PERMIT REQUIREMENT	[illegible]	[illegible]	NO=0							
514 1 0 50	SAMPLE MEASUREMENT	*****			*****	*****					
FLUENT GROSS VALUE	PERMIT REQUIREMENT	[illegible]	2000 DAILY MX	LBS/DY	[illegible]	[illegible]	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
LIDS, TOTAL	SAMPLE MEASUREMENT										
SSOLVED	PERMIT REQUIREMENT										
295 Q 0 50	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie VAughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY [illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] DURING PRECIPITATION EVENTS, SETTLEABLE [illegible]

EE NAME/ADDRESS (Include
me/Location if diff.)
WELLS COAL CLEANING PLANT
SS P.O. BOX 765
WELLINGTON UT 84542
TY
ION
: MR. CANDY VANZANTES

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT0024007

(17-19) DISCHARGE NUMBER: 003

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
DISCHARGE FROM SLUDGE
MINE

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
W RATE	SAMPLE MEASUREMENT										
56 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AV	REPORT DAILY MX	GPD						ONCE/MONTH	MEASRD
FLUENT GROSS VALUE	SAMPLE MEASUREMENT							SU			
00 1 0 0	PERMIT REQUIREMENT						DAILY MX			ONCE/MONTH	GRAB
FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
LIDS, TOTAL SPENDED	PERMIT REQUIREMENT					30 DAILY AV	70 DAILY MX	MG/L		ONCE/MONTH	GRAB
30 P 0 0 5	SAMPLE MEASUREMENT										
E COMMENTS BELOW	PERMIT REQUIREMENT						DAILY MX	ML/L		ONCE/MONTH	GRAB
LIDS, SETTLEABLE	SAMPLE MEASUREMENT										
545 R 0 0	PERMIT REQUIREMENT						DAILY MX			ONCE/MONTH	GRAB
E COMMENTS BELOW	SAMPLE MEASUREMENT										
L AND GREASE ON EXTR-GRAV METH	PERMIT REQUIREMENT						DAILY MX	MG/L		ONCE/MONTH	GRAB
56 1 0 0	SAMPLE MEASUREMENT										
FLUENT GROSS VALUE	PERMIT REQUIREMENT						DAILY MX	MG/L		ONCE/MONTH	GRAB
OH, TOTAL (AS FE)	SAMPLE MEASUREMENT										
05 1 0 0	PERMIT REQUIREMENT						DAILY MX	MG/L		ONCE/MONTH	GRAB
FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
LOATING SOLIDS OR ISIBLE FOAM-VISUAL	PERMIT REQUIREMENT			EQ=1						ONCE/MONTH	VISUAL
13 1 0 0	SAMPLE MEASUREMENT										
FLUENT GROSS VALUE	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

arlie Vaughn, President
ebble Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY 2

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DAY FROM ALL OUTFALLS. SETTLING PRECIPITATION PONDS, SETTLEABLE SOLIDS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if d

NAME WELLINGTON COAL CLEANING PLANT

ADDRESS P.O. BOX 765

WELLINGTON UT 84542

FACILITY

LOCATION

ATTN: MR. CANDY MANNEBERG

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT0023612

(17-19) DISCHARGE NUMBER: 003 A

F - FINAL

DISCHARGE FROM SLUDGE LINES

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 50614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
	PERMIT REQUIREMENT			YES=1 NO=0				*** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****			*****	*****					
	PERMIT REQUIREMENT			LBS/DY			REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

TSS IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS WILL BE REPORTED INSTEAD OF TSS. REPORT CODES NOT USED IN THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME [redacted] COAL CLEANING PLANT

ADDRESS P.O. BOX 719

[redacted] WELLINGTON [redacted] UT 84542

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UT0024767

(17-19) DISCHARGE NUMBER: 001

F - FINAL

DISCHARGE FROM SURFACE RUNOFF

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	07	01	TO	92	07	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NAME: MR. CANDY MENZIARDS

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE 00056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			GPD				***		ONCE/MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			***				SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			***			70.0	MG/L		ONCE/MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			***			0.5	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			***			10.0	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			***			7.0	MG/L		ONCE/MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 03613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			ES=1 NO=0				***		ONCE/MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Charlie Vaughn, President Castle Valley Resources	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[redacted] SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801-637-0350	92	09	
TYPED OR PRINTED		AREA CODE / NUMBER	YEAR	MO	DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[redacted] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [redacted] EXCEED THIS LIMIT. REPORT "DNQ" OR "NO" IN THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if d

NAME [redacted] COAL CERAMIC PLANT

ADDRESS P.O. BOX 766

WELLINGTON UT 84542

FACILITY

LOCATION

ATTN: MR. CANDY VANZANDTS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: UTG040015

(17-19) DISCHARGE NUMBER: 001

F - FINAL

DISCHARGE FROM SLURRY PONDS

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53) AVERAGE (3 Card Only)	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (38-45) MINIMUM (4 Card Only)	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITTARY WASTE DISCHARGED-ASSESSMNT 75614 1 0 50 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
	PERMIT REQUIREMENT			YES=1 NO=0				*** ****		ONCE/ MONTH	TRIBUT
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****			*****	*****					
	PERMIT REQUIREMENT			LBS/DY			REPORT	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Charlie Vaughn, President
Castle Valley Resources

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 08 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] BE REPORTED INSTEAD OF TSS. [illegible] PLEASE NOTE IN THE APPROPRIATE BOX.

DRESS P.O. BOX 766
WELLINGTON UT 84542
CILITY
CATION
TTN: MR. CANDY HANZANARES

PERMIT NUMBER: UTG040016
DISCHARGE NUMBER: 001 A
DISCHARGE FROM SLUDGE POND

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
ANITARY WASTE	SAMPLE MEASUREMENT	******			******	******	*******				
ISCHARGED-ASSESSMNT	PERMIT REQUIREMENT			ES=1 NO=0				*** ****		ONCE/ MONTH	VISUAL
5614 1 0 0	SAMPLE MEASUREMENT	******			******	******					
FFLUENT GROSS VALUE	PERMIT REQUIREMENT		2800	LBS/D			REPORT	MG/L		ONCE/ MONTH	GRAB
OLIDS, TOTAL	SAMPLE MEASUREMENT										
ISSOLVED	PERMIT REQUIREMENT										
0295 Q 0 0	SAMPLE MEASUREMENT										
EE COMMENTS BELOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Charlie Vaughn, President
Castle Valley Resources
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 637-0350

DATE: YEAR 92 MO 09 DAY 30

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

OF IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS. "REPORT" DOES NOT APPLY TO THE APPROPRIATE PAR.

COAL SYSTEM, INC.
WELLINGTON PREPERATION PLANT

DISCHARGE WATER MONITORING

LOCATION	SAMPLE NO.	DATE	TIME	SAMPLER	TEMP (C)	FLOW (GPM)	pH	COMMENTS
EMERGENCY SPILLWAY & SEEPAGE	DW 001	10-27-92	9:10A	CM				DRY
CEMENT FLUME-PUMP HOUSE	DW 002	10-27-92	9:25A	CM				
PIPELINE - SLURRY POND	DW 003	10-27-92	9:50A	CM				DRY
HEAT DRIER DISCHARGE	DW 004	10-27-92	12:15P	CM				DRY
DISCHG TO PRICE RIVER-CULVERT	DW 005	10-27-92	10:20A	CM				DRY
CULVERT UNDER RR/HEAD OF YARD	DW 006	10-27-92	12:30P	CM				DRY
CULVERT UNDER RR/NW OF HOPPER	DW 007	10-27-92	12:50P	CM				DRY
N. POND SEEPAGE	DW 008	10-27-92	10:50A	CM				DRY

NE033629

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

PERMIT NUMBER (2-15)

DISCHARGE NUMBER (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

E - FINAL

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
T O C	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASURE
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE | NUMBER

DATE

YEAR | MO | DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IS LIMITED TO ONE DOM PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM		11	11	TO	92	12	11
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		2000 DAILY MX	(2/D)			REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

J. J. Hanlon Pres.

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
401	467-9512

DATE

YEAR	MO	DAY
92	12	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

IT LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] BY TURBIDITY INSTEAD OF TSS. REPORT "NO DISCHARGE" IN THE APPROPRIATE BOX.

EPA Form 3320-1 (12-89) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

(2-16)

PERMIT NUMBER

(17-19)

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX							ONCE/ MONTH	EASU
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
601	1-13-402

DATE

YEAR	MO	DA
92	10	2

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

DISCHARGE FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS EXCEEDED LIMITS. REPORT "0" DOES NOT APPLY TO THE APPROPRIATE BOX.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)* DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

F - FINAL

DISCHARGE FROM SLAG LINES

MINOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM		11	01	TO	92	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible]	SAMPLE MEASUREMENT	*****			*****	*****	*****				
[illegible]	PERMIT REQUIREMENT	*****	0 DAILY MX	YES=1 NO=0	*****	*****	*****	*****		ONCE/ MONTH	VISUAL
[illegible]	SAMPLE MEASUREMENT	*****			*****	*****					
[illegible]	PERMIT REQUIREMENT	*****	2000 DAILY MX	LBS/DY	*****	*****	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

[illegible] Vaughn Pres.

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DA
701	[illegible] 9513	92	10	27

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] IS LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] IS LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE BOX.

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)

DISCHARGE NUMBER (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX							ONCE/ MONTH	EASR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.6 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			YES=1 NO=0						ONCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE | NUMBER

DATE

YEAR | MO | DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

(PREVIOUS EDITIONS OF THIS FORM MAY NOT BE USED.)

PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location ...nt)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

F - FINAL

DISCHARGE FROM SEDIMENT PONDS

MINOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	1	01	TO	92	1	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible]	SAMPLE MEASUREMENT	[illegible]			[illegible]	[illegible]	[illegible]				
	PERMIT REQUIREMENT	[illegible]	DAILY MX	YES=1 NO=0	[illegible]	[illegible]	[illegible]	[illegible]		NCE/ MONTH	VISUAL
[illegible]	SAMPLE MEASUREMENT	[illegible]			[illegible]	[illegible]					
	PERMIT REQUIREMENT	[illegible]	2000 DAILY MX	LBS/DA	[illegible]	[illegible]	REPORT DAILY MX	MG/L		NCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

[illegible] Piper

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
717	657-9512

DATE

YEAR	MO	DAY
92	10	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE BOX.

EPA Form 3320-1 (Rev. 2-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER

(17-19) DISCHARGE NUMBER

F - FINAL

DISCHARGE FROM SETTLEMENT POND

MINOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	(PD						NCE/ MONTH	EASRI
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MIN		9.0 DAILY MX	SU		NCE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		NCE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		NCE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		NCE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		NCE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	FS=1 NO=C						NCE/ MONTH	VISUA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

[illegible] Vaughn, Pres.

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE [illegible] NUMBER 467-9513

DATE

YEAR 93 MO 10 DA 27

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] LIMITED TO 0.0- TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE BOX.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

PAGE OF

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER *(2-16)*	DISCHARGE NUMBER *(17-19)*

1 - FINAL

MONITORING PERIOD	YEAR *(20-21)*	MO *(22-23)*	DAY *(24-25)*		YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
FROM				TO			

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		QUANTITY OR LOADING *(3 Card Only)* *(46-53)* AVERAGE	QUANTITY OR LOADING *(54-61)* MAXIMUM	UNITS	QUALITY OR CONCENTRATION *(4 Card Only)* *(38-45)* MINIMUM	QUALITY OR CONCENTRATION *(46-53)* AVERAGE	QUALITY OR CONCENTRATION *(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	E.S=1 C=0						ONCE/ MONTH	VISUA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		2000 DAILY MX				REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Vaughn Rice	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		AREA CODE	NUMBER	YEAR	MO	DA
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	717	687-9181	92	10	27

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] LIMITED TO ONE TON PER DAY FROM ALL OUTFALLS. DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS [illegible] LIMITED INSTEAD OF TSS. REPORT "NODI NOT APPLY" IN THE APPROPRIATE ROW.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE OF

PERMITTEE NAME/ADD (Include Facility Name/Location if

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT CHARGE ELIMINATION SYSTEM (NPDES)
DISCHARG NITORING REPORT (DMR)

(2-16) (17-19)

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM		1	1	TO		1	1
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX							ONCE/ MONTH	EASR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					15 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE | NUMBER

DATE

YEAR | MO | DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

[illegible] FOR THE DAY FROM ALL OUTFALLS. [illegible] PRECIPITATION EVENTS. SETTLEABLE SOLIDS [illegible] "NOT APPLY" IN THE APPROPRIATE BOX.

NOT REUSED

PAGE [illegible] OF