



Canyon Fuel Company, LLC
Skyline Mines
HC 35 Box 380
Helper, Utah 84526
(435) 448-6463 Fax: (435) 448-2632

February 18, 2004

Mr. Chris Imbrogno
Department of Environmental Quality
Division of Water Quality
288 North 1460 West
P.O. Box 144870
Salt Lake City, Utah 84114-8470

Lucas
2/18/04

RE: January 2004 DMR for Mountain Coal Company's Gordon Creek Nos. 2, 7,
and 8 Mines

Dear Mike:

Please find enclosed the January 2004 DMR for the Gordon Creek Nos. 2, 7, and 8
Mines. Please note there has been no flow at the monitored discharge point for this
month. Copies of these reports have been forwarded to the Utah Division of Oil,
Gas and Mining.

Sincerely:

Chris D. Hansen
Project Representative
Mountain Coal Company, LLC

enclosures

cc: Pam Grubaugh-Littig, DOGM
Dan Guy, Blackhawk Engineering

RECEIVED

FEB 23 2004

DIV. OF OIL, GAS & MINING

PERMITEE NAME/ADDRESS

(Include Facility Name/Location if different)

NAME Mountain Coal Company
 ADDRESS Gordon Creek Mines
 HC 35 Box 380
 Helper, Utah 84526
 FACILITY Mountain Coal Company
 LOCATION Helper, Utah 84526

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UTG040004
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

SED PND OTFLL-NO FRK/GRDN CRK

Form Approved

OMB No. 2040-0004

F - FINAL

MINOR

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 1	0 1	0 4	0 1	3 1
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: CHRIS HANSEN (PROJECT REPRESENTATIVE)

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)			(4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE 00056 1 0 0	PERMIT REQUIREMENT	REPORT 36DA AVG	REPORT DAILY MX	GPD	*****	*****	*****	*****		ONCE/MONTH	MEASRD
PH 00400 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	6.5	*****	9.0	*****		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 P 0 0	PERMIT REQUIREMENT	*****	*****	*****	25	*****	70	*****		ONCE/MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.5	*****		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0	*****		ONCE/MONTH	GRAB
SOLIDS, TOTAL DISSOLVED 70295 Q 0 0	PERMIT REQUIREMENT	*****	2000	DAILY MX	*****	*****	*****	*****		ONCE/MONTH	GRAB
OIL AND GREASE VISUAL 84066 1 0 0	PERMIT REQUIREMENT	*****	0	INST MAX	*****	*****	*****	*****		WEEKLY	VISUAL

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER CHRIS HANSEN PROJECT REPRESENTATIVE	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.	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE 435	NUMBER 448-2669	YR 04	MO 02

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

Settable Solids shall be limited instead of TSS during runoff events caused by less than the 10 yr/24 hr precipitation event. Enter N.A. when not applicable. If 30 day average TDS of 500 mg/L cannot be achieved at each outfall, then Permittee is limited to one ton (2000 lbs) per day as sum from all outfalls.

PERMITEE NAME/ADDRESS

(Include Facility Name/Location if different)

NAME Mountain Coal Company
 ADDRESS Gordon Creek Mine
 HC 35 Box 380
 Helper, Utah 84526
 FACILITY Mountain Coal Company
 LOCATION Helper, Utah 84526

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UTG040004
 PERMIT NUMBER

SUM A
 DISCHARGE NUMBER

SED PND OTFLL-NO FRK/GRDN CRK 12345

Form Approved

OMB No. 2040-0004

F - FINAL

Total of All Outfalls

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 1	0 1	0 4	0 1	3 1
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: CHRIS HANSEN(PROJECT REPRESENTATIVE)

	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(3 Card Only)		UNITS	(4 Card Only)		UNITS			
		(46-53)	(54-61)		(38-45)	(54-61)				
SOLIDS, TOTAL DISSOLVED 70295 Q O O SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****			
	PERMIT REQUIREMENT	*****	2000	Daily MX lbs/dy	*****	*****	*****		ONCE/MONTH	MEASRD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER
 CHRIS HANSEN
 PROJECT REPRESENTATIVE
 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 statues may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.

Chris Hansen
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE	
435	448-2669	04	02 18
AREA CODE	NUMBER	YR	MO DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS
 If TDS is 500 mg/L or less at each outfall enter N.A. for Sum A

(Reference all attachments here)