

0004

From: "Brittin, Kathy" <KBrittin@archcoal.com>
To: <daronhaddock@utah.gov>
CC: "Parkins, Rick" <RParkins@archcoal.com>, "Barbe, Henry" <HBarbe@archcoal...>
Date: 7/30/2008 3:41 PM
Subject: FW: Certificates of Liability Insurance
Attachments: 24e3f29a.pdf

AK Incoming
c/007/0005
c/007/0018
c/007/0039
c/007/0034
c/041/0002
c/007/0016

Sorry, forgot the attachment.

From: Brittin, Kathy
Sent: Wednesday, July 30, 2008 4:36 PM
To: 'daronhaddock@utah.gov'
Cc: Parkins, Rick; Barbe, Henry; Miller, Vicky; Davis, Mike; Hansen, Chris
Subject: Certificates of Liability Insurance

Mr. Haddock,

Attached please find the certificates of insurance for the 7/31/08 - 09 policy period for Canyon Fuel Company, LLC and Mountain Coal Company, LLC. The originals are being overnighted for delivery tomorrow morning.

If you have any questions or need any additional information, please let me know.

Thank you.

Kathy

Kathy L. Brittin
 Risk Manager
 Arch Coal, Inc.
 Direct: 314-994-2800
 Fax: 314-994-2797

***** Email Disclaimer *****

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KATHY L. BRITTIN
Risk Manager

July 30, 2008

Via UPS Next Day

Mr. Daron Haddock
Utah Department of Natural Resources
Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Salt Lake City, UT 84114-5801

Re: Canyon Fuel Company, LLC/Mountain Coal Company, L.L.C.
Certificates of Liability Insurance

Dear Mr. Haddock:

Enclosed are new Certificates of Liability Insurance for the following:

Canyon Fuel Company, LLC: Permits: C007005, C007018, C007039
C007034, C0041002

Mountain Coal Company, L.L.C.: Permit: ACT/007/016

I trust you will find the enclosures to be in order.

Sincerely,

Kathy Brittin
Risk Manager

Enclosures

cc: Rick Parkins, Arch Western Bituminous Group
Chris Hansen, CFC-Skyline
Mike Davis, CFC-Sufco
Vicky Miller, CFC-Dugout
Henry Barbe, MCC

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
CHI-000333513-18

PRODUCER
Marsh USA Inc.
701 Market Street, Suite 1100
St. Louis, MO 63101
Attn: archcoal.certrequest@marsh.com

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

COMPANIES AFFORDING COVERAGE

COMPANY
A ACE American Insurance Company

COMPANY
B

COMPANY
C

COMPANY
D

001950-state-GL8-08-09

Y

INSURED
Canyon Fuel Company, LLC
c/o Arch Western Bituminous Group, L.L.C.
225 N. 5th Street, Suite 900
Grand Junction, CO 81501

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

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	HDOG23744223	07/31/08	07/31/09	GENERAL AGGREGATE	\$ * 500,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	*****\$500,000 general aggregate			PRODUCTS - COMP/OP AGG	\$ 500,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	*****per location*****			PERSONAL & ADV INJURY	\$ 300,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 300,000
	<input checked="" type="checkbox"/> Includes XCU				FIRE DAMAGE (Any one fire)	\$ 50,000
					MED EXP (Any one person)	\$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	
	<input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				OTHER	
	<input type="checkbox"/> INCL				EL EACH ACCIDENT	\$
	<input type="checkbox"/> EXCL				EL DISEASE-POLICY LIMIT	\$
	OTHER				EL DISEASE-EACH EMPLOYEE	\$

Mary E. Eikmeier
MARY E. EIKMEIER
 Notary Public/Notary Seal
 State of Missouri
 St. Louis County
 COMMISSION #07504611
 My Commission Expires: 12-02-2011

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 Permit Dug Out Canyon Mine C007039
 Blasting and use of explosives is not excluded under the policy.

CERTIFICATE HOLDER
 Utah Dept. Of Natural Resources
 Division of Oil, Gas and Mining
 1594 W. North Temple
 Suite 1210
 Salt Lake City, UT 84114-5801

CANCELLATION
 SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENTER BY MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN.

AUTHORIZED REPRESENTATIVE of Marsh USA Inc.
 BY: Alfred A. Peterfeso *[Signature]*

MM313/02 VALID AS OF: 07/30/08

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
CHI-000333515-18

PRODUCER

Marsh USA Inc.
701 Market Street, Suite 1100
St. Louis, MO 63101
Attn: archcoal.certrequest@marsh.com

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COMPANIES AFFORDING COVERAGE

001950-state-GL8-08-09

Y

INSURED

Canyon Fuel Company, LLC
c/o Arch Western Bituminous Group, L.L.C.
225 N. 5th Street, Suite 900
Grand Junction, CO 81501

COMPANY
A ACE American Insurance Company

COMPANY
B

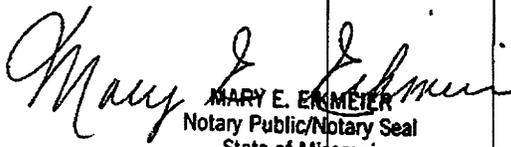
COMPANY
C

COMPANY
D

COVERAGES

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CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT <input checked="" type="checkbox"/> Includes XCU	HDOG23744223 ***\$500,000 general aggregate ***per location***	07/31/08	07/31/09	GENERAL AGGREGATE \$ * 500,000 PRODUCTS - COMP/OP AGG \$ 500,000 PERSONAL & ADV INJURY \$ 300,000 EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	 MARY E. ENMETER Notary Public/Notary Seal State of Missouri St. Louis County COMMISSION #07504611 My Commission Expires: 12-02-2011			COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				WC STATUTORY LIMITS OTH ER EL EACH ACCIDENT \$ EL DISEASE-POLICY LIMIT \$ EL DISEASE-EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 Permit Skyline Mine C007005
 Blasting and use of explosives is not excluded under the policy.

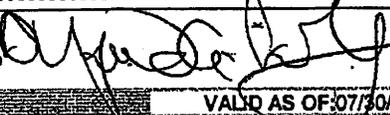
CERTIFICATE HOLDER

Utah Dept. Of Natural Resources
 Division of Oil, Gas and Mining
 1594 W. North Temple
 Suite 1210
 Salt Lake City, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL SEND BY MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN.

AUTHORIZED REPRESENTATIVE of Marsh USA Inc.
 BY: Alfred A. Peterfeso



MM2(3/02)

VALID AS OF: 07/30/08

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
CHI-000178451-17

PRODUCER

Marsh USA Inc.
701 Market Street, Suite 1100
St. Louis, MO 63101
Attn: archcoal.certrequest@marsh.com

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COMPANIES AFFORDING COVERAGE

001950-state-GL8-08-09

Y

INSURED

Mountain Coal Company, L.L.C.
P.O. Box 591
1 Mile East of Somerset - Hwy 133
Somerset, CO 81434

- COMPANY
A ACE American Insurance Company
- COMPANY
B
- COMPANY
C
- COMPANY
D

COVERAGES

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CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	HDOG23744223	07/31/08	07/31/09	GENERAL AGGREGATE \$ * 500,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY *****\$500,000 general aggregate <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR *****per location**** OWNER'S & CONTRACTOR'S PROT <input checked="" type="checkbox"/> Includes XCU				PRODUCTS - COMP/OP AGG \$ 500,000 PERSONAL & ADV INJURY \$ 300,000 EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$ AGGREGATE \$ WC STATUTORY LIMITS OTH ER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				EL EACH ACCIDENT \$ EL DISEASE-POLICY LIMIT \$ EL DISEASE-EACH EMPLOYEE \$
	OTHER				

Mary E. Eikmeier
MARY E. EIKMEIER
 Notary Public/Notary Seal
 State of Missouri
 St. Louis County
 COMMISSION #07504611
 My Commission Expires: 12-02-2011

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 Permit ACT/007/016, Gordon Creek Mines 2, 7, & 8
 Blasting and use of explosives is not excluded under the policy.

CERTIFICATE HOLDER

Utah Dept. Of Natural Resources
 Division of Oil, Gas and Mining
 1594 W. North Temple
 Suite 1210
 Salt Lake City, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL SEND BY MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN.

AUTHORIZED REPRESENTATIVE of Marsh USA Inc.
 BY: Alfred A. Peterfeso

Alfred A. Peterfeso

MM12/02

VALID AS OF: 07/30/08