PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0040008	001 A

F - FINAL
SED PND DSCHRG TO:DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	31
	(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 AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION 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	NO DISCHARGE			OBSERVED						
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASRM
PH	SAMPLE MEASUREMENT										
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		TWICE/ 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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-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 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
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	NUMBER	YEAR	MO	DAY

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0040008	001 A

F - FINAL

SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	08	01	TO	90	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
MINITARY WASTE DISCHARGED-ASSESSMNT 1 4 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****		YES=1 NO=0	*****	*****	*****	****		ONCE/ MONTH	VISUAL
	PERMIT REQUIREMENT	*****	DAILY MX		*****	*****	*****	****			
SOLIDS, TOTAL DISSOLVED 0 0 9 5 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****			*****	*****				ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	2000 DAILY MX	LBS/DY	*****	*****	REPORT DAILY MX	MG/L			
	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

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.)*

Michael W. Glasson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	6375385	90	10	28

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 WILL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER: UTG040008
(17-19) DISCHARGE NUMBER: 002 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD
FROM YEAR 90 (20-21) MO 08 (22-23) DAY 01 (24-25) TO YEAR 90 (26-27) MO 08 (28-29) DAY 31 (30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO MEASURABLE			OBSERVED						
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		TWICE/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 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-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 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
	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	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTC040008	002 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	08	01	TO	90	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 14 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 5 0 0 0 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

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
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) UTG040008 — PERMIT NUMBER
(17-19) 003 A — DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
90	08	01	90	08	31
(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)
FLOW RATE 00056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXT-GRAV MET 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 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	EXIST=1 NEW=0						ONCE/MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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.)*

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

CONT: MICHAEL W. GLASSON

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

(2-16) UTG040008 PERMIT NUMBER

(17-19) 003 A DISCHARGE NUMBER

P - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	08	01	TO	90	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 00614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 00295 Q 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

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	637-3385	90	10	28
AREA CODE	NUMBER	YEAR	MO	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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16) UTG040008 — PERMIT NUMBER

(17-19) 001 A — DISCHARGE NUMBER

F - FINAL

SED PND DSCHRG TO DEADMAN CR

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
90	09	01	90	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)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO DISCHARGE OBSERVED			*******	*******	*******				
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	****		ONCE/ MONTH	MEASD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******			*******					
	PERMIT REQUIREMENT	*******	*******	****	6.5 DAILY MN	*******	9.0 DAILY MX	SU		ONCE/ MONTH	GR
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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	****	*******	*******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-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	GR
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	****		ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
	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	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED						

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0040008	001 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	09	01	TO	90	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)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
MILITARY WASTE DISCHARGED-ASSESSMNT 0014 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0505 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

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	637-5385	90	10	28

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 LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040008	002 A

F - FINAL
SED PND DSCHRG TO DEADMAN CR

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	09	01	90	09	30

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	115,200			*******	*******	*******			1/3	
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	*******		ONCE/ MONTH	MEASRD
PH	SAMPLE MEASUREMENT	*******	*******		7.9	*******	7.7			1/3	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*******	6.5 DAILY MN	*******	9.0 DAILY MX	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*******	*******		*******	46				1	
00530 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	*******	*******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*******	*******		*******	*******	DNA			DNA	
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*******	*******		*******	*******	1.7			1/3	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*******	*******		*******	*******	0.31			1/3	
01045 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	*******	0		*******	*******	*******			1/3	
45613 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	0 DAILY MX	EG=1 NO=0	*******	*******	*******	*******		ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
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	NUMBER	YEAR	MO	DAY

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040008	002 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	09	01	TO	90	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	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 0614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	0	YES=1 NO=0	******	******	******			1/3	
	PERMIT REQUIREMENT	******	DAILY MX		******	******	******	******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0395 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	724		******	******				1/3	
	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

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	6375385	90	10	28

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UTG040008	003 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	09	01	90	09	30

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRA
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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-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	GRA
FLOATING SOLIDS OR VISIBLE FOAM VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
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 / NUMBER	YEAR / MO / DAY

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

[illegible]: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTG040008	003 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	09	01	TO	90	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)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 5514 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0295 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

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

TELEPHONE		DATE		
801	6575345	9	10	28
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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

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

00208/081089-1725

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER: UTG040008
(17-19) DISCHARGE NUMBER: 001 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	10	01	90	10	31

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO DISCHARGE REPORTED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-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 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	ES=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)*

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT [illegible]

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTG040008	001 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED.PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	10	01	TO	90	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 45514 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 00295 Q 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	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		
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY
			801	6375385	11	1	25

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) UT0040008 — PERMIT NUMBER
(17-19) 002 A — DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
90	10	01	90	10	31
(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	(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	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/MONTH	ESTIM
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		TWICE/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 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-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 03613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	ES=1 NO=0						ONCE/MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
	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	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040008	002 A

F - FINAL

SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	10	01	90	10	31

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 50014 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0235 Q 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	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 6375385	DATE YEAR 91	MO 1	DAY 2
TYPED OR PRINTED						

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040009	003 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	10	01	TO	90	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		TWICE/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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-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 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		DAILY MX	YES=1 NO=0						ONCE/MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR / MO / DAY

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.)*

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

[illegible]: MICHAEL W. GLASSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
UTG040008	003 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL

SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	10	01	TO	90	10	11
	(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	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPL TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT [illegible]14 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUA
SOLIDS, TOTAL DISSOLVED [illegible]275 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	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]	TELEPHONE	DATE		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE: [illegible]	NUMBER: 375 385	YEAR: [illegible]	MO: 1	DAY: 2

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040008	001 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	11	01	TO	90	11	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	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT	NO DISCHARGE OBSERVED									
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	ESTIMATE
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	SAMPLE MEASUREMENT										
00530 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT										
00545 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT										
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT										
01045 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										
45613 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
	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	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTG040008	001 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	11		TO	90	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMNT 45614 1 0 50 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 00295 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

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		
801	6375385	91	1	25
AREA CODE	NUMBER	YEAR	MO	DAY

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

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) UTG040008 — PERMIT NUMBER
(17-19) 002 A — DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	11	01	TO	90	11	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	(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	108,000	108,000		*******	*******	*******			1	
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	*******		ONCE/ MONTH	MEASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		7.2	*******	7.5+			2	
	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	*******	*******		*******	5.0	7			1	
	PERMIT REQUIREMENT	*******	*******	*******	*******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******	DNA				
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******	20			1	
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******	0.08			1	
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	0		*******	*******	*******			1	
	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		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

[illegible]: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTG040008	002 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
90	11	01	90	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 [illegible]614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	0		******	******	******			1	
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED [illegible]295 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	848		******	******	942				
	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

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

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	637[illegible]	91	1	25

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

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

00122/081089-1725

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040006	003 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	11	01	90	11	30

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	(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	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASUR
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		TWICE/ 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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FRSON EXTL-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 56613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	YES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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)
TYPED OR PRINTED			

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

TDS 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" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UTG040008	003 A

F - FINAL
SED POND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	11	01	TO	90	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 0514 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 0295 Q 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

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	637-5385	92	1	23

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 SHALL BE LIMITED INSTEAD OF TSS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040008	001 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	12	01	TO	90	12	31
	(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 AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION 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	NO DISCHARGE OBSERVED									
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASNG
PH	SAMPLE MEASUREMENT										
00400 1 0 90 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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 20 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 05613 1 0 20 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	ES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

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

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
TYPE: MICHAEL W. GLASSON

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

(2-16) UTG040008 — PERMIT NUMBER
(17-19) 001 A — DISCHARGE NUMBER

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	12	01	TO	90	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	SAMPLE MEASUREMENT	******			******	******	******				
00014 1 0 50 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	*****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******			******	******					
00295 0 0 50 SEE COMMENTS BELOW	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

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	637-5385	91	1	23
AREA CODE	NUMBER	YEAR	MO	DAY

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

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040009	002 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	12	01	TO	90	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	108,000	108,000							1	
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				7.6		7.6			2	
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		WICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT					50.				1	
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						DNA				
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						1.4			1	
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						0.08			1	
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45611 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		0							1	
	PERMIT REQUIREMENT	0	DAILY MX	ES=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		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

NAME MICHAEL A. GLASSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER *(2-16)*: UTG040009

DISCHARGE NUMBER *(17-19)*: 002 A

F - FINAL

SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	12	01	TO		12	31
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

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)*
SANITARY WASTE DISCHARGED-ASSESSMNT	SAMPLE MEASUREMENT	******	0		******	******	******			1	
00014 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******	961		******	******	1067			1	
00295 0 0 0 SEE COMMENTS BELOW	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

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
801	637-5385	91	1	29

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

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--PINNACLE
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16) PERMIT NUMBER: UTG040008
(17-19) DISCHARGE NUMBER: 003 A

F - FINAL
SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	12	01	TO	93	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

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PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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	NO DISCHARGE OBSERVED									
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	EASRD
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				6.5 DAILY MN		9.0 DAILY MX	SU		ONCE/ MONTH	GRA
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 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-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	GRA
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		0 DAILY MX	ES=1 NO=0						ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

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

TDS 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" IN THE APPROPRIATE ROW.

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

NAME ANDALEX RESOURCES--PINNACLE

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

MICHAEL W. GLASSON

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UTG040008	003 A

F - FINAL

SED PND DSCHRG TO DEADMAN CRK

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
90	12	01	90	12	31

MINOR

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (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 50014 1 0 00 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 Q 0 00 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

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	637-5385	91	1	25

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

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