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State of Utah

Department of Environmental Quality

Dianne R. Nielson, Ph.D.
Executive Director

DIVISION OF WATER QUALITY
Walter L. Baker, P.E.
Director

JON M. HUNTSMAN, JR.
Governor

GARY HERBERT
Lieutenant Governor

November 1, 2006

CERTIFIED MAIL
(Return Receipt Requested)

Mr. Mike Glasson
UtahAmerican Energy, Inc.
P.O. Box 1077
Price, UT 84501

C/007/0019

Dear Mr. Glasson:

Subject: Inspection Reports for UPDES Permit Nos. UTG04007 & UTG040008, ANDALEX Resources, Inc.

On October 19, 2006 I met with you and conducted a Compliance Evaluation Inspection at the Centennial Project Mine facility and a Reconnaissance Inspection at the Wildcat Loadout facility in regards to the above referenced UPDES permits.

I appreciated your time to facilitate the inspections. Enclosed are the copies of the inspection reports for your records. If you have any questions with regards to this matter, please contact me at (801) 538-6779 or by e-mail at jstudenka@utah.gov.

Sincerely,

Jeff Studenka

Jeff Studenka
UPDES Permits Section

Enclosures

cc: Darcy O'Connor, EPA Region VIII (w/ encl)
Claron Bjork, Southeastern Utah District Health (w/ encl)
Dave Ariotti, SE District Engineer (w/ encl)
Pam Grubaugh-Littig, Division of Oil Gas & Mines (w/ encl)

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DIV. OF OIL, GAS & MINING

United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding *(i.e., ICIS)*

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac. Type
N	UTG040008	061019	C	S	2
1	3–11	12–17	18	19	20

Remarks (21–66):

Inspection Work Days	Facility Self-Monitoring Evaluation Rating	BI	QA	Reserved
2	5	N	N	
67–69	70	71	72	73–74, 75–80

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*

ANDALEX Centennial Mines Project
~8 miles NE of Price, UT on Airport Road
P.O. Box 902
Price, UT 84501

Entry Time/ Date	Permit Effective Date
10:00/10-19-06	5-1-2003
Exit Time/ Date	**Permit Expiration Date**
11:00/10-19-2006	4-30-2008

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Mike Glasson, Senior Geologist
UtahAmerican Energy, Inc.
(435) 888-4008

Other Facility Data *(e.g., SIC NAICS, and other descriptive information)*

SIC Code 1422

Name, Address of Responsible Official/Title/Phone and Fax Number

Mike Glasson, Senior Geologist
UtahAmerican Energy, Inc.
P.O. Box 1077
Price, UT 84501
(435) 888-4008

Contacted: ☒ Yes ☐ No

Section C: Areas Evaluated During Inspection *(Check only those areas evaluated)*

☒ Permit	☒ Self Monitoring Program	☐ Pretreatment	☐ MS4
☒ Records/Reports	☐ Compliance Schedule	☐ Pollution Prevention	
☒ Facility Site Review	☐ Laboratory	☐ Storm Water	
☒ Effluent/Receiving Waters	☒ Operations & Maintenance	☐ Combined Sewer Overflow	
☒ Flow Measurement	☐ Sludge Handling/Disposal	☐ Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Number(s)	Date:
JEFF STUDENKA, ENVIRONMENTAL SCIENTIST Jeff Studenka	DWQ (801) 538-6779	11-1-2006

Name and Signature of Management Q A Reviewer	Agency/Office/Phone and Fax Number(s)	Date:
MIKE HERKIMER, MANAGER UPDES PERMITS SECTION Mike Herkimer	DWQ (801) 538-6058	11/2/06

INSPECTION PROTOCOL

UPDES Permit #: UTG040008
Inspection Type: Compliance Evaluation Inspection
Inspection Date: October 19, 2006

Jeff Studenka of the Division of Water Quality (DWQ) met with Mike Glasson of UtahAmerian Energy, Inc., ANDALEX Resources Centennial Mines Project facility. The purpose and scope of the inspection were explained and a facility tour was conducted.

FACILITY DESCRIPTION

Location: Approximately 8 miles NE of Price, Utah on Airport Road.

Coordinates: Outfall 001 (sed. pond) – 39° 43' 37" latitude, -110° 43' 18" longitude
Outfall 002 (mine water) – 39° 43' 49" latitude, -110° 43' 18" longitude
Outfall 003 (sed. pond) – 39° 43' 25" latitude, -110° 43' 18" longitude
Outfall 004 (mine water) – 39° 42' 10" latitude, -110° 44' 20" longitude

Average Flow: 0.5 MGD from outfall 004 (No Discharge from 001, 002, 003)

Receiving water: Deadman Canyon ephemeral drainage to Hayes Wash to Price River.

Process: This is an active underground coal mining operation utilizing long-wall technology. Water from the mine is conveyed to a below ground settling pond and pump station, where it is then piped out of the mine from three pump stations and discharged to Deadman Canyon drainage (Outfall 004). Surface water runoff is conveyed to two above ground settling ponds (001 & 003) that have not discharged to date and are not expected to discharge in the foreseeable future. Outfall 002 has not discharge in many years and it is not expected to discharge in the foreseeable future. The Centennial Mines Project facility has recently applied to DWQ for an individual UPDES permit (UT0025674) with provisions for salinity-offset projects to account for TDS loading in excess of the one ton/day loading limit. The individual UPDES permit is currently out for public comment and is anticipated to be effective December 1, 2006, at which time will automatically replace the coverage under the UPDES General Permit for Coal Mining facilities.

INSPECTION SUMMARY

There were no deficiencies noted during the last inspection for follow up. The four outfall locations and two sedimentation ponds were observed as well as the receiving water drainage of Deadman Canyon. DMR forms were reviewed for the month of February 2006 and determined to be complete, with one recommendation as noted below. There were no deficiencies observed.

DEFICIENCIES

No deficiencies with respect to the UPDES permit were noted during the inspection.

REQUIREMENTS

None.

RECOMMENDATIONS:

When completing the monthly DMR forms, the TDS loading requirement should be reported on a separate "SUMA" DMR form to reflect a total loading limit of 1 ton/day, or 2000 lbs/day, for the entire facility.

USEPA REGION 8 NPDES INSPECTION CHECKLIST

NPDES PERMIT #: UT0025674 (UTG040008) INSPECTION DATE: 10-19-06

FACILITY: ANDALEX - Centennial Mines Project

Mike Glassen
UEI
10:00 → 11:00 am

I. PERMIT VERIFICATION

YES NO — **Inspection observations verify information contained in permit.**

Yes No N/A 1. Current copy of permit on site.

Yes No N/A 2. Name, mailing address, contact, and phone number are correct in PCS. If not, indicate correct information on Form 3560.

3. Brief description of the wastewater treatment plant:

Mine water collected underground in sumps → pumped above ground thru 3 different pumping stations → outfall 004. (ND at other 3 outfalls)

Yes No N/A 4. Facility is as described in permit. If not, what is different?

Yes No N/A 5. EPA/State has been notified of any new, different, or increased loading to the WWTP.

Yes No N/A 6. Number and location of discharge points are as described in the permit.

Yes No N/A 7. Name of receiving water(s) is/are correct. → Deadman Canyon ephemeral drainage

Comments: Applied for individual UPDES permit in 2006 to address the TDS loading issue thru salinity-offset projects.

II. RECORDKEEPING AND REPORTING EVALUATION

YES NO — **Records and reports are maintained as required by permit.**

Yes No N/A 1. All required information is current, complete, and reasonably available.

Yes No N/A 2. Information is maintained for the required 3 year period.

3. Sampling and analysis data are adequate and include:

Yes No N/A a. Dates, times, locations of sampling.
Yes No N/A b. Initials of individual performing sampling.
Yes No N/A c. Referenced analytical methods and techniques in conformance with 40 CFR Part 136.
Yes No N/A d. Results of analyses and calibration.
Yes No N/A e. Dates of analyses (and times if required by permit).
Yes No N/A f. Initials of person performing analyses.
Yes No N/A g. Instantaneous flow at grab sample stations. Flow rates recorded at pump station underground, prior to 004.

Yes No N/A 4. Sampling and analysis completed on parameters specified in permit.

Yes No N/A 5. Sampling and analysis done in frequency specified by permit.

Comments:

YES NO **DMR completion meets the self-monitoring reporting requirements.**

Yes No N/A 1. Monitoring for required parameters is performed more frequently than required by permit. Parameter(s)_____

Yes No N/A 2. Analytical results are consistent with the data reported on the DMRs.

Yes No N/A 3. All data collected are summarized on the DMR.

Yes No N/A 4. Monthly, weekly, and/or daily average loading values are calculated properly and reported on the DMR. *(Effluent loadings are calculated using effluent flow.)*

Yes No N/A 5. The geometric mean is calculated and recorded for fecal coliform data.

Yes No N/A 6. Weekly and monthly averaging is calculated properly and reported on the DMR.

Yes No N/A 7. The maximum and minimum values of all data points are reported properly.

Yes No N/A 8. The number of exceedances column (No. Ex.) is completed properly.

Comments: Fill in "No. EX." column for all parameters (ie "Ø" or "1", etc.)

III. WHOLE EFFLUENT TOXICITY TESTING AND REPORTING N/A

YES NO N/A **WET sampling by permittee adequate to meet the conditions of the permit.**

Yes No a. Chain of custody used.

Yes No b. Method of shipment and preservation adequate *(iced to 4°C)*.

c. Type of sample collected _____ *(as required by permit)*.

Yes No d. Holding time met *(received w/in 36 hours)*.

Yes No N/A 2. Lab reports/chain of custody sheets indicate temperature of sample at receipt by lab.

a. Indicate temperature _____

Yes No N/A 3. Permittee has copy of the latest edition of testing methods or Region 8 protocol. *(Latest version is July 1993 - Colorado has its own guidance.)*

Yes No N/A 4. Permittee reviews WET lab reports for adherence to test protocols.

Yes No N/A 5. Lab has provided quality control data, i.e., reference toxicant control charts.

Yes No N/A 6. Permittee has asked lab for QC data.

Yes No N/A 7. Permittee maintains copies of WET lab reports on site for required 3 year period, and makes them available for review by inspectors.

Yes No N/A 8. Evaluation and review of WET data by permittee adequate such that no follow up at lab is necessary. *(Follow up to be conducted by EPA and/or State.)*

Comments: W.E.T. testing not required in permit at this time.

IV. FACILITY SITE REVIEW

YES NO **Treatment facility properly operated and maintained.**

Yes No N/A 1. Standby power or other equivalent provision is provided. Specify type:

Generators

Yes No N/A 2. Facility has an alarm system for power or equipment failures. What kind of problems has the facility experienced due to power failures? NONE

Yes No N/A 3. Treatment control procedures are established for emergencies.

Yes No N/A 4. Facility can be by-passed (internal, collection system, total). Describe by-pass procedures:

Yes No N/A 5. Regulatory agency was notified of any bypassing (treated and/or untreated).

Dates:

Yes No N/A 6. WWTP has adequate capacity to ensure against hydraulic and/or organic overloads.

Yes No N/A 7. All treatment units, other than back-up units, are in service. If not, what and why?

Yes No N/A 8. O&M manual available and up-to-date.

Yes No N/A 9. Procedures for plant O&M, including preventive maintenance schedules, are established and performed on time.

Yes No N/A 10. Adequate spare parts and supplies inventory (including flow meters) are maintained, as well as major equipment specifications and/or repair manuals.

Yes No N/A 11. Up-to-date maintenance and repair records are kept for major pieces of equipment.

12. Number of qualified operators and staff. N/A

How many?	Certification Level
_____	_____
_____	_____
_____	_____

Yes No N/A 13. Certification level meets State requirement?

14. What procedures or practices are used to train new operators? Not Applicable, as facility is not WWTP.

V. SAFETY EVALUATION

YES NO **Facility has the necessary safety equipment.**

Yes No N/A 1. Procedures are established for identifying out-of-service equipment. What are they?
Lock out / tag-out

Yes No N/A 2. Personal protective clothing provided (safety helmets, ear protectors, goggles, gloves, rubber boots with steel toes, eye washes in labs).

Yes No N/A 3. Laboratory safety devices (eyewash and shower, fume hood, proper labeling and storage, pipette suction bulbs) available.

Yes No N/A 4. Plant has general safety structures such as rails around or covers over tanks, pits, or wells. Plant is enclosed by a fence.

Yes No N/A 5. Portable hoists for equipment removal available.

Yes No N/A 6. All electrical circuitry enclosed and identified.

7. Chlorine safety is adequate and includes:

Yes No N/A a. NIOSH-approved 30-minute air pack.
Yes No N/A b. All standing chlorine cylinders chained in place.
Yes No N/A c. All personnel trained in the use of chlorine.
Yes No N/A d. Chlorine repair kit.
Yes No N/A e. Chlorine leak detector tied into plant alarm system.
Yes No N/A f. Ventilation fan with an outside switch.
Yes No N/A g. Posted safety precautions.

Yes No N/A 8. Warning signs (no smoking, high voltage, nonpotable water, chlorine hazard, watch-your-step, and exit) posted.

Yes No N/A 9. Gas/explosion controls such as pressure-vacuum relief valves, no smoking signs, explosimeters, and drip traps present near anaerobic digesters, enclosed screening or degritting chambers, and sludge-piping or gas-piping structures.

Yes No N/A 10. Emergency phone numbers listed.

Yes No N/A 11. Plant is generally clean, free from open trash areas.

Yes No N/A 12. MSDS sheets, if required, are accessible by employees.

Comments: Mining Facility

VI. FLOW MEASUREMENT

YES NO FLOW MEASUREMENT MEETS THE REQUIREMENTS AND INTENT OF PERMIT

A. PRIMARY EFFLUENT FLOW MEASUREMENT

1. General

Type of primary flow measurement device: Pump meters

Yes No N/A 1. Primary flow measuring device is properly installed and maintained.

Where? At pumping stations underground

Yes No N/A 2. Flow measured at each outfall. Number of outfalls: 4

3. Frequency of routine inspection of primary flow device by operator: 1 /day.

4. Frequency of routine cleaning of primary flow device by operator: ~~As needed~~ 3 week.

Yes No N/A 5. Influent flow is measured before all return lines.

Yes No N/A 6. Effluent flow is measured after all return lines.

Yes No N/A 7. Proper flow tables are used by facility personnel.

8. Design flow: 1 mgd.

Yes No N/A 9. Flow measurement equipment adequate to handle expected ranges of flow rate.

2. Open Channel Primary Flow Measuring Devices

Flumes

Type and size: N/A EFF

Yes No N/A 1. Flume is located in a straight section of the open channel, without bends immediately upstream or downstream.

Yes No N/A 2. Flow entering flume appears reasonably well distributed across the channel and free of turbulence, boils, or other distortions.

Yes No N/A 3. Flume is clean and free of obstructions, debris or deposits.

Yes No N/A 4. All dimensions of flume accurate and level.

Yes No N/A 5. Sides of flume throat are vertical and parallel.

Yes No N/A 6. Side walls of flume are vertical and smooth.

Yes No N/A 7. Flume head is being measured at proper location. *(Location dependent on flume type - see NPDES Compliance Inspection Manual or ISCO book.)*

Yes No N/A 8. Flume is under free flow conditions at all times. *(Flume is not submerged.)*

Weirs

Type: N/A EFF

Yes No N/A 1. Weir is level.

Yes No N/A 2. Weir plate is plumb and its top edges are sharp and clean.

Yes No N/A 3. Downstream edge of weir is chamfered at 45°.

Yes No N/A 4. There is free access for air below the nappe of the weir.

Yes No N/A 5. Upstream channel of weir is straight for at least four times the depth of water level, and free from disturbing influences.

Yes No N/A 6. Distance from sides of weir to side of channel at least 2H.

Yes No N/A 7. Area of approach channel at least 8 x nappe area for upstream distance of 15H. *(If not, is velocity of approach too high?)*

Yes No N/A 8. Weir is under free-flow conditions at all times. *(Weir is not submerged.)*

Yes No N/A 9. The stilling basin of the weir is of sufficient size and clear of debris.

Yes No N/A 10. Head measurements are properly made by facility personnel.

Yes No N/A 11. Weir is free from leakage.

3. Closed Channel Primary Measuring Devices

Electromagnetic Meters

Type and model: N/A EFF

Yes No N/A 1. There is a straight length of pipe or channel before and after the flowmeter of at least 5 to 20 diameters.

Yes No N/A 2. There are no sources of electric noise in the near vicinity.

Yes No N/A 3. Magnetic flowmeter is properly grounded.

Yes No N/A 4. Full pipe requirement is met.

Venturi Meters

Type and model: N/A EFF

Yes No N/A 1. Venturi meter is installed downstream from a straight and uniform section of pipe?

B. Secondary Flow Measurement

1. General

1. What are the most common problems that the operator has had with the secondary flow measurement device? N/A

Yes No N/A 2. Flow records properly kept.
Yes No N/A a. All charts maintained in a file.
Yes No N/A b. All calibration data kept.

Yes No N/A 3. Secondary device calibration records are kept.

a. Frequency of secondary device calibration:____ / year.

4. Frequency of flow totalizer calibration:___ / year.

Yes No N/A 5. Secondary instruments (totalizers, recorders, etc.) are properly operated, calibrated, and maintained.

Floats

Type and model: N/A EFF

Bubblers

Type and model: N/A EFF

Ultrasonic

Type and model: N/A EFF

Electrical

Type and model: N/A EFF

Comments:

2. Flow Verification

Accuracy of Flow Measurement (Secondary against Primary) N/A	
	Type and size of primary device
	EFF:
Reading from primary standard, feet and inches	
Equivalent to actual flow, mgd	
Facility-recorded flow from secondary device, mgd	
Percent Error	
Correction Factor	

Fill in above only if the primary device has been correctly installed, or if correction factor is known.

Comments: Primary measurements only

VII. LABORATORY QUALITY ASSURANCE

YES NO **Laboratory procedures meet the requirements and intent of the permit.**

Yes No N/A 1. Commercial laboratory is used. [Lab not evaluated] — N/A

Parameters	TSS TDS, IRON, O+G
Name	SGS Labs
Address	Huntington, UT
Contact	
Phone	435-653-2311

Yes No N/A 2. According to the permittee, commercial laboratory is State certified (ND & UT only).

Yes No N/A 3. Written laboratory quality assurance manual is available, if the facility does its own lab work.

Yes No N/A 4. Quality control procedures are used. Specify:_____

Yes No N/A 5. Calibration and maintenance of laboratory instruments and equipment is satisfactory.

Yes No N/A 6. Samples are analyzed in accordance with 40 CFR 136.

Yes No N/A 7. Results of last DMR/QA test available. Date: _____

Yes No N/A 8. Facility lab does analyses for other permittees. If yes, list the facilities and their permit numbers.

VIII. COMPLIANCE SCHEDULE STATUS REVIEW

YES NO N/A **The permittee is meeting the compliance schedule**

1. Is the facility subject to a compliance schedule either in its permit or in an order? If facility is subject to an order, note docket number:_____

N/A 2. What milestones remain in the schedule?_____

_____

(Attach additional sheets as necessary.)

Yes No N/A 3. Facility is in compliance with unachieved milestones.

Yes No N/A 4. Facility has missed milestone dates, but will still meet the final compliance date.

IX. PERMITTEE SAMPLING EVALUATION

YES NO **Sampling meets the requirements and intent of the permit.**

Yes No N/A 1. Samples are taken at sampling location specified by permit.

Yes No N/A 2. Locations are adequate for representative samples.

Yes No N/A 3. Flow proportioned samples are obtained.

Yes No N/A 4. Permittee is using method of sample collection required by permit.
Required method: Grab
If not, method being used is:
( ) Grab
( ) Manual
( ) Automatic composite

Yes No N/A 5. Sample collection procedures adequate and include:
Yes No N/A a. Sample refrigeration during compositing.
Yes No N/A b. Proper preservation techniques.
Yes No N/A c. Containers in conformance with 40 CFR 136.3.
Specify any problems:_____

_____

Comments: Samples collected monthly by JBR environmental, Inc.

Facility: ANDALEX - Centennial Mines
Outfall: 004 (UT 604008)

Month of DMR: Feb. 2006

Parameter	Required Monitoring Frequency	Actual Monitoring Frequency	Type of Permit Violation
Flow	1/month	(CONT) 1/month	none
pH	1/month	1/month	none
TSS	1/month	1/month	none
O&G	1/month	1/month	none
IRON	1/month	1/month	none
TDS	1/month	1/month	none
END			

Facility: ANDALEX - Centennial **Month of DMR:** Feb. 2006 **Outfall:** 001

Parameter	Sampling		Analysis		Holding Time Exceded	Bench Sheet Reported Value	Reported Values (DMR)			Calculated Values (DMR)		
	Date	Time	Date	Time			30-Day Avg.	7-Day Avg.	Daily Max	30-Day Avg.	7-Day Avg.	Daily Max
pH	2/14	0915	2/14	0915	NO	8.85	—	—	8.85	—	—	—
TSS	2/14	0915	2/20	1000	NO	<5	<5	<5	<5	—	—	—
O&G	2/14	0915	2/16	1200	NO	<2	—	—	<2	—	—	—
IRON	2/14	0915	2/21	1128	NO	0.25	—	—	0.25	—	—	—
TDS	2/14	0915	2/20	1000	NO	1800	—	—	1800	—	—	—
END	~~2/14~~											

United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding *(i.e., ICIS)*

Transaction Code		NPDES	yr/mo/day	Inspection Type	Inspector	Fac. Type
N		UTG040007	061019	R	S	2
1	2	3–11	12–17	18	19	20

Remarks (21–66)

Inspection Work Days	Facility Self-Monitoring Evaluation Rating	BI	QA	Reserved
2	5	N	N	
67–69	70	71	72	73–74 / 75–80

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*

ANDALEX Wildcat Loadout Facility
~1 Mile West of Helper, UT on Consumers Road
P.O. Box 902
Price, UT 84501

Entry Time/ Date	Permit Effective Date
11:00/10-19-06	5-1-2003
Exit Time/ Date	**Permit Expiration Date**
11:30/10-19-2006	4-30-2008

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Mike Glasson, Senior Geologist
UtahAmerican Energy, Inc.
(435) 888-4008

Other Facility Data *(e.g., SIC NAICS, and other descriptive information)*

SIC Code 1422

Name, Address of Responsible Official/Title/Phone and Fax Number

Mike Glasson, Senior Geologist
UtahAmerican Energy, Inc.
P.O. Box 1077
Price, UT 84501
(435) 888-4008

Contacted ☒ Yes ☐ No

Section C: Areas Evaluated During Inspection *(Check only those areas evaluated)*

☒ Permit	☒ Self Monitoring Program	☐ Pretreatment	☐ MS4
☒ Records/Reports	☐ Compliance Schedule	☐ Pollution Prevention	
☒ Facility Site Review	☐ Laboratory	☐ Storm Water	
☒ Effluent/Receiving Waters	☒ Operations & Maintenance	☐ Combined Sewer Overflow	
☐ Flow Measurement	☐ Sludge Handling/Disposal	☐ Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Number(s)	Date:
JEFF STUDENKA, ENVIRONMENTAL SCIENTIST Jeff Studenka	DWQ (801) 538-6779	11-1-2006
Name and Signature of Management Q A Reviewer	**Agency/Office/Phone and Fax Number(s)**	**Date:**
MIKE HERKIMER, MANAGER UPDES PERMITS SECTION Mike Herkimer	DWQ (801) 538-6058	11/2/06

INSPECTION PROTOCOL

UPDES Permit #: UTG040007
Inspection Type: Reconnaissance Inspection
Inspection Date: October 19, 2006

Jeff Studenka of the Division of Water Quality (DWQ) met with Mike Glasson of UtahAmerian Energy, Inc., ANDALEX Resources Wildcat load out facility. The purpose and scope of the inspection were explained and a facility tour was conducted.

FACILITY DESCRIPTION

Location: Approximately 1 mile West of US 6 on Consumers Road, near Helper, Utah

Coordinates: Outfall 001 – 39° 39' 11" latitude, -110° 54' 56" longitude
Outfall 002 – 39° 39' 16" latitude, -110° 54' 58" longitude
Outfall 003 – 39° 39' 21" latitude, -110° 54' 53" longitude
Outfall 004 – 39° 39' 28" latitude, -110° 54' 53" longitude
Outfall 005 – 39° 39' 34" latitude, -110° 54' 53" longitude
Outfall 006 – 39° 39' 14" latitude, -110° 55' 11" longitude

Average Flow: 0.0 MGD (No Discharge to date from the six sedimentation ponds)

Receiving water: Wildcat Wash (no flow)

Process: This is an active coal storage yard and railroad load out facility. Coal from the nearby mines is trucked to the Wildcat load out facility, where it is stored on site until it is loaded on railroad cars for further transportation. Surface water runoff for the load out facility is conveyed to six settling ponds, which all have the potential to discharge to Wildcat Wash, but have not discharged to date. All six sediment ponds were observed with standing water, but not expected to discharge in the foreseeable future. Mr. Glasson indicated that sediment ponds A & B (with outfalls 001 & 002) are to be removed and that one new sedimentation pond and outfall will be constructed in the near future to replace them. I requested that Mr. Glasson provide DWQ with the relevant information and permit modification request as soon as the project is under way.

INSPECTION SUMMARY

There were no deficiencies noted during the last inspection for follow up. The six outfall locations and sedimentation ponds were observed as well as the receiving water drainage of Wildcat Wash. DMR forms were reviewed and determined to be complete, with one recommendation as noted below. There were no deficiencies observed.

DEFICIENCIES

No deficiencies with respect to the UPDES permit were noted during the inspection.

REQUIREMENTS

None.

RECOMMENDATIONS:

When completing the monthly DMR forms, the TDS loading requirement should be reported on a separate "SUMA" DMR form to reflect a total loading limit of 1 ton/day, or 2000 lbs/day, for the entire facility.