

0031

LAW OFFICES OF  
**VAN COTT, BAGLEY, CORNWALL & M<sup>C</sup>CARTHY**

BENNETT, HARKNESS & KIRKPATRICK  
1874-1890

BENNETT, MARSHALL & BRADLEY  
1890-1896

BENNETT, HARKNESS, HOWAT  
SUTHERLAND & VAN COTT  
1896-1902

SUTHERLAND, VAN COTT & ALLISON  
1902-1907

VAN COTT, ALLISON & RITER  
1907-1917

VAN COTT, RITER & FARNSWORTH  
1917-1947

A PROFESSIONAL CORPORATION

ADDRESS ALL CORRESPONDENCE TO  
POST OFFICE BOX 45340  
84145-0340

FACSIMILE (801) 534-0058

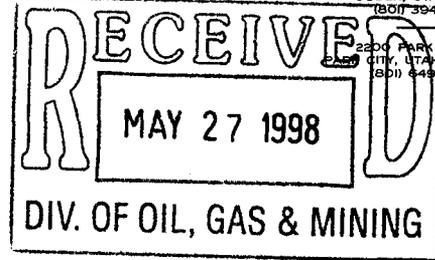
**DENISE A. DRAGOO**  
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E-MAIL: ddragoo@vancott.com

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SALT LAKE CITY, UTAH 84144-0450  
(801) 532-3333

100 WEST LIBERTY  
RENO, NEVADA 89501  
(702) 333-6800

2404 WASHINGTON BOULEVARD  
OGDEN, UTAH 84401  
(801) 394-5783

2200 PARK AVENUE  
SALT LAKE CITY, UTAH 84060-4611  
(801) 449-3589



May 26, 1998

Ms. Pamela Grubaugh-Littig  
Utah Division of Oil, Gas & Mining  
1594 West North Temple, Suite 1210  
Salt Lake City, Utah 84114-5801

**RE: Horizon Mining, LLC**

ACT 1007/020 #4

Dear Ms. Littig:

Enclosed is the revised Certificate of Insurance issued by Acordia ReagerHarris-Lex in accordance with the April 1, 1998, insurance renewal for Horizon Mining, LLC, regarding general liability. This Certificate was revised per your request to reflect changes to the cancellation clause.

Please let me know if you have any questions.

Very truly yours,

Denise A. Dragoo

DAD:jmc:161889

Enclosure

cc: Scott Kiscaden  
Robert Scott

*Amey file ACT/007/020 #7 Copy*

# ACORD. CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)  
5/19/98

**PRODUCER**

Acordia of Kentucky-Lex  
Lexington Green Two, Suite 410  
3201 Nicholasville Road  
Lexington, KY 40503-3311  
606-273-6600

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**

- COMPANY  
**A** Federal Insurance Company
- COMPANY  
**B**
- COMPANY  
**C**
- COMPANY  
**D**

**INSURED**

Horizon Mining, LLC  
c/o Commonwealth Coal  
5413 Patterson Drive, Ste. 205  
Richmond, VA 23226

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOT WITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b>	3710-46-32	4/01/98	4/01/99	GENERAL AGGREGATE \$ 2000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG \$ 1000000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1000000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1000000
					FIRE DAMAGE (Any one fire) \$ 100000
					MED EXP (Any one person) \$ 10000
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
					AGGREGATE \$
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				STATUTORY LIMITS
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EACH ACCIDENT \$
					DISEASE - POLICY LIMIT \$
					DISEASE - EACH EMPLOYEE \$
	<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

Permit #007/020, Horizon Mine #1, Certificate holder is listed as additional insured and lesser as their interest may appear. This policy includes coverage for Property Damage & Personal Injury resulting from use of explosives.

**CERTIFICATE HOLDER**

**CANCELLATION**

Utah Dept of Natural Resources  
Div. of Oil, Gas & Mining  
1594 W. North Temple, Ste 1210  
P.O. Box 195801  
Salt Lake City, UT 84114-5801

**RECEIVED**  
MAY 27 1998

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, FOR FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION ON THE ISSUING COMPANY TO REIMBURSE THE COMPANY FOR ANY LOSS INCURRED BY THE INSURED.

AUTHORIZED REPRESENTATIVE  
*Richard W. Hofffield* 091314000