

0008

Hidden Splendor Resources
Horizon Mine
P.O. Box 32, Helper, Utah 84526
Phone: (435) 472-1313 – Fax: (435) 472-1314

RECEIVED
APR 05 2004
DIV. OF OIL, GAS & MINING

April 1, 2004

Ms. Pamela Grubaugh-Littig
Utah Coal Program
Utah Division of Oil, Gas and Mining
1594 West North Temple – Suite 1210
Box 145801
Salt Lake City, UT 84114-5801

J. McNamee
4/07/04

Dear Pam:

Hidden Splendor Resources respectfully submits the March 2004 – Discharge Monitoring Reports (DMRs) associated with the Horizon Mine UPDES Permit UTG040019.
If you have any questions, please feel free to call me at 435-472-0431.

Sincerely,

Kit Pappas

Kit Pappas

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
NAME **LOBSTAR ENERGY, INC. - HORIZON**
ADDRESS **R C BOX 370
HELPER UT 84526**
FACILITY **LOBSTAR ENERGY, INC. - HORIZON**
LOCATION **HELPER UT 84526**
APPR: **DAVID MILLER**

MINOR
F - FINAL
SEDIMENT POND OUTFALL

875040019
PERMIT NUMBER
001 A
DISCHARGE NUMBER

MONITORING PERIOD
FROM 04 03 01 TO 04 03 31

NO DISCHARGE
NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE		No DISCHARGE			(07)						
00056 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT	REPORT							ONCE/ MEASRD	MONTH
28	SAMPLE MEASUREMENT							(12)			
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT				6.5 MINIMUM		9.0 MAXIMUM	SU		ONCE/ GRAB	MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT							(19)			
00530 2 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT				25 30DA AVG	35 MX 7D AV	70 DAILY MT	MG/L		ONCE/ GRAB	MONTH
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT							(25)			
00545 0 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT						0.5 DAILY MT	ML/L		ONCE/ VISUAL	MONTH
OIL & GREASE	SAMPLE MEASUREMENT							(19)			
00556 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT						10 DAILY MT	MG/L		ONCE/ GRAB	MONTH
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT							(19)			
01045 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT						1.0 DAILY MT	MG/L		ONCE/ GRAB	MONTH
FLOATING SOLIDS OR VISIBLE FOAM - VISUAL	SAMPLE MEASUREMENT			(94)							
45613 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT			0 YES=1 DAILY MT NO=0						ONCE/ VISUAL	MONTH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER KIT PAPPAS / ENV. COORD. TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Kit Pappas</i>	TELEPHONE	DATE		
			435 472-0431 AREA CODE NUMBER	04	04	01 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SETTLABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS DURING RUNOFF EVENTS CAUSED BY LESS THAN THE 10 YR/24 HR PRECIPITATION EVENT. ENTER N.A. WHEN NOT APPLICABLE. IF 30 DAY AVG TDS OF 500 MG/L CANNOT BE ACHIEVED AT EACH OUTFALL, THEN PERMITTEE IS LIMITED TO ONE TON (2000 LBS) PER DAY AS FROM ALL OUTFALLS.

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

01001

8 - FINAL
SEDIMENT POND OUTFALL

NO DISCHARGE 000

NOTE: Read instructions before completing this form.

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

NAME LODESTAR ENERGY, INC. - HORIZON

ADDRESS 8 C BOX 370
HELPER UT 84526

FACILITY LODESTAR ENERGY, INC. - HORIZON

LOCATION HELPER UT 84526

ATTN: DAVID MILLER

010040019
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
04 03 01 TO 04 03 31

PARAMETER	<input checked="" type="checkbox"/>	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SANITARI WASTE DISCHARGED-ASSESSMENT				(94)							
45614 L U U				0 YES=1						ONCE/	VISUAL
EFFLUENT GROSS VALUE				DAILY MAX NO=0						MONTH	
SOLIDS, TOTAL DISSOLVED								(19)			
70295 # U U						REPORT				ONCE/	GRAB
SEE COMMENTS BELOW						30DA AVG		MG/L		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER KIT PAPPAS/ENV. COORD. TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>KIT PAPPAS</i>	TELEPHONE	DATE		
			AREA CODE NUMBER 435 472 0431	YEAR 04	MO 04	DAY 01

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

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EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.

00082/030810-1430 This is a 4-part form. PAGE 2 OF 2

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

NAME **LODESTAR ENERGY, INC. - HORIZON**
ADDRESS **H C BOX 370**
HELPER UT 34526

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

07C040019 PERMIT NUMBER 002 A DISCHARGE NUMBER

MINOR

F - FINAL SRM
PIPE TO JEWKES CRK TO N F GORD

FACILITY **LODESTAR ENERGY, INC. - HORIZON**
LOCATION **HELPER UT 34526**
ATTN: **DAVID MILLER**

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
04	03	01		04	03	31

NO DISCHARGE
NOTE: Read instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE		350		(07) GPM							
00055 1 0 0 EFFLUENT GROSS VALU		REPORT 30DA AVG	REPORT DAILY MX	GPD						ONCE/ MONTH	MEASRD
PH						7.9	(12)				
00400 1 0 0 EFFLUENT GROSS VALU					6.5 MINIMUM	9.0 MAXIMUM	SO			ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED						19	(19)				
00530 P 0 0 SEE COMMENTS BELOW					25 30DA AVG	35 DAILY MX	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE							0.5	DAILY MX	ML/L	ONCE/ MONTH	GRAB
00545 0 0 0 SEE COMMENTS BELOW											
OIL & GREASE						2	(19)				
00556 1 0 0 EFFLUENT GROSS VALU						10	DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)						0.308	(19)				
01045 1 0 0 EFFLUENT GROSS VALU						1.0	DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL			0	(94)							
45613 1 0 0 EFFLUENT GROSS VALU			0 YES=1 DAILY MX NO=0							ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
KET PAPPAS / ENV. COORD.
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Ket Pappas

TELEPHONE **435 472-0431**
DATE **04 04 01**
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SETTLABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS DURING RUNOFF EVENTS CAUSED BY LESS THAN THE 10 YR/24 HR PRECIPITATION EVENT. ENTER N.A. WHEN NOT APPLICABLE. IF 30 DAY AVG TDS OF 500 MG/L CANNOT BE ACHIEVED AT EACH OUTFALL, THEN PERMITTEE IS LIMITED TO ONE TON (2000 LBS) PER DAY AS SHOWN FROM ALL OUTFALLS.

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

NAME **LOBNSTAR ENERGY, INC. - HORIZON**
ADDRESS **H C BOX 370**
HELPER UT 84526

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

076040019 **002**
PERMIT NUMBER DISCHARGE NUMBER

MINOR

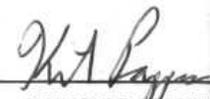
F - FINAL SRM
TYPE TO JEWKES CRK TO N F GORD

FACILITY **LOBNSTAR ENERGY, INC. - HORIZON**
LOCATION **HELPER UT 84526**

MONITORING PERIOD
FROM **04 03 01** TO **04 03 31**

NO DISCHARGE
NOTE: Read instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SANITARY WASTE DISCHARGED-ASSESSMEN 45014 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT		0	(94)							
	PERMIT REQUIREMENT		0 DAILY MAX	YES=1 NO=0						ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 K 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT					415	(19)				
	PERMIT REQUIREMENT					REPORT 30DA AVG		MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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KIT PAPPAS / ENV. COORD. TYPED OR PRINTED		435 432-0431	04 04 01
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR MO DAY

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COMMERCIAL TESTING & ENGINEERING CO.

GENERAL OFFICES: 1919 SOUTH HIGHLAND AVE., SUITE 210-B, LOMBARD, ILLINOIS 60148 • TEL: 630-953-9300 FAX: 630-953-9306

SINCE 1908®



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Committed To Excellence

ADDRESS ALL CORRESPONDENCE TO:

 P.O. BOX 690
 PRICE, UT 84501
 TEL: (435) 448-2644
 FAK: (435) 448-2637


 March 24, 2004

 HIDDEN SPLENDOR RESOURCES INC.
 57 WEST 200 SOUTH, SUITE 400
 SALT LAKE CITY UT. 84101
 Kit Pappas

 Sample identification by
 HIDDEN SPLENDOR RESOURCES

ID:UPDES-002

RECEIVED 1320

SAMPLED 0800

FIELD MEASUREMENTS

 FLOW 350 TEMP 13
 COND. 630 pH 7.9

 Kind of sample Water
 reported to us

Sample taken at HORIZON MINE

Sample taken by K.P.

Date sampled March 12, 2004

Date received March 12, 2004

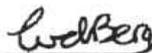
NOTES:

Page 1 of 1

Analysis report no. 59-26200

Parameter	Result	MRL	Units	Method	Analyzed	
					Date/Time	Analyst
Iron, Total	0.308	0.050	mg/l	EPA 200.7	03-18-2004	1615 JJ
Oil & Grease	<2	2	mg/l	EPA 413.1	03-17-2004	0900 BLP
Solids, Total Dissolved	415	30	mg/l	EPA 160.1	03-18-2004	0900 ND
Solids, Total Suspended	19	5	mg/l	EPA 160.2	03-18-2004	0900 ND

 Respectfully submitted,
 COMMERCIAL TESTING & ENGINEERING CO.



Skyline Laboratory

 MEMBER


OVER 40 BRANCH LABORATORIES STRATEGICALLY LOCATED IN PRINCIPAL COAL MINING AREAS, TIDEWATER AND GREAT LAKES PORTS, AND RIVER LOADING FACILITIES

F-485

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