CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER 0010001-00544

PRODUCER

Marsh USA Risk & Ins Srvs Inc.
60 East South Temple
Suite 1600
Salt Lake City, UT 84111

0009

Chris Brimhall 801-539-7413

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

INSURED

THE SAVAGE COMPANIES
ATTN: DEAN REES
5250 SO. COMMERCE DR., #200
SALT LAKE CITY, UT 84107

COMPANIES AFFORDING COVERAGE

COMPANY A UNITED STATES FID & GUARANTY

COMPANY B FIDELITY & GUARANTY INS. CO.

COMPANY C

COMPANY D

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	DRE2257500	4/01/00	4/01/03	GENERAL AGGREGATE	$ 5,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	$ 5,000,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	$ 5,000,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	$ 5,000,000
					FIRE DAMAGE (Any one fire)	$ 5,000,000
					MED EXP (Any one person)	$
A	AUTOMOBILE LIABILITY	DRE2257200 - MAIN	4/01/00	4/01/03	COMBINED SINGLE LIMIT	$ 5,000,000
	X ANY AUTO				BODILY INJURY (Per person)	$
	ALL OWNED AUTOS					
	SCHEDULED AUTOS				BODILY INJURY (Per accident)	$
	X HIRED AUTOS					
	NON-OWNED AUTOS				PROPERTY DAMAGE	$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
	ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
	EXCESS LIABILITY				EACH OCCURRENCE	$
	UMBRELLA FORM				AGGREGATE	$
	OTHER THAN UMBRELLA FORM					$
B	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	DRE22576-01	4/01/01	4/01/02	X WC STATUTORY LIMITS / OTHER	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL / EXCL				EL EACH ACCIDENT	$ 1,000,000
					EL DISEASE - POLICY LIMIT	$ 1,000,000
					EL DISEASE - EA EMPLOYEE	$ 1,000,000
	OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS

XCU COVERAGES ARE INCLUDED IN THE POLICY FORM. RE: SAVAGE COAL TERMINAL PROCESS AND LOADOUT FACILITY [redacted]

CERTIFICATE HOLDER

STATE OF UT. DIVISION OF OIL,
GAS & MINING
ATTN: PAM LITTIG
PO BOX 145801
SALT LAKE CITY, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 * DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES.

Marsh USA Risk & Ins Srvs Inc.
BY: Chris Brimhall

JHMM1 (2/98) VALID AS OF: 4/01/01

(* 10 DAYS FOR NON-PAYMENT)