PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--WILDCAT
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) UTG040007 PERMIT NUMBER

(17-19) 001 A DISCHARGE NUMBER

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)

F - FINAL
SED POND DSCHRG TO WILDCAT WSH
cm 4-25 QC SH 6/6
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	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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)

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--WILDCAT

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
UTG040007	001 A

F - FINAL

SED POND DSCHRG TO WILDCAT MSH

MINOR

NOTE: Read instructions before completing this form.

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)*

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)*
SANITARY WASTE DISCHARGED-ASSESSMNT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	***** *****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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		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.)*	Michael W. Glasson	801 AREA CODE	6375385 NUMBER	91 YEAR	1 MO	25 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 BOX.

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

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

QC SH 6/6

(2-16) PERMIT NUMBER: UTG040007
(17-19) DISCHARGE NUMBER: 001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MONITORING PERIOD
FROM YEAR 90 MO 09 DAY 01 TO YEAR 90 MO 09 DAY 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) 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	SAMPLE MEASUREMENT	NO DISCHARGE OBSERVED			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	*******		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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--WILDCAT

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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

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)

F - FINAL

SED POND DSCHRG TO WILDCAT HSH

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 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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.)*		AREA CODE 801	NUMBER 6375385	YEAR 90	MO 10	DAY 28

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--WILDCAT
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

QC SH 6/6

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	08	01	TO	90	09	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	SAMPLE MEASUREMENT	NO DISCHARGE OBSERVED			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	******		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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
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ATTN: MICHAEL S. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

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

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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)
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	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUL
SOLIDS, TOTAL DISSOLVED 70295 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										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801	6375385	90	10	28

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

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PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
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FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

(2-16)	(17-19)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	07	01	TO	90	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL QC SH 6/6
SED POND DSCHRG TO WILDCAT WSH
Cam 9/25
MINOR
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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	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 50 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	******	****** ****		ONCE/ MONTH	TRASRD
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 P 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 MET	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	*******			*******	*******	*******				
45513 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)*

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.

File ACT/007/033 #7

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

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

(2-16) PERMIT NUMBER: UTG040007
(17-19) DISCHARGE NUMBER: 001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MINOR

MONITORING PERIOD

	YEAR	MO.	DAY		YEAR	MO.	DAY
FROM	90	07	01	TO	90	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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)
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 70295 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	0		*******	*******					
	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 801 | NUMBER 6375385

DATE: YEAR 90 | MO 10 | DAY 28

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 BOX.

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

NAME ANDALEX RESOURCES--WILDCAT

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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

QC SH 6/6

F - FINAL

SED POND DSCHRG TO WILDCAT WSH

CM 4/25

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	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	SAMPLE MEASUREMENT	NO DISCHARGE			******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	******	******	******	**** ****		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	******	******		******						
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	******	******		******	******					
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	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.)*		TELEPHONE	DATE
TYPED OR PRINTED	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--WILDCAT
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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

GC SH 6/6
F - FINAL
SED POND DSCHRG TO WILDCAT WSH
CW 4/25
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)
SANITARY WASTE DISCHARGED-ASSESSMNT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	*******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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		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.)*	M. L. Glasson	801	6375385	90	7	28
TYPED OR PRINTED		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 BOX.

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

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

QC SA 6/16

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

cm 4/25

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	05	01	TO	90	05	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	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	********		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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--WILDCAT

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
UTG040007	001 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	05	01	TO	90	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

QC 5/11 6/6

F - FINAL

SED POND DSCHRG TO WILDCAT WSH

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)
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 70295 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		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.)*	Michael W. Glasson	801 AREA CODE	637-5385 NUMBER	90 YEAR	7 MO	28 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--WILDCAT
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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	04	01	TO	90	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
SED POND DSCHRG TO WILDCAT WSH
MINOR
NOTE: Read Instructions before completing this form.

QC SH 6/6
CM 4/25 4/25

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)
FLOW RATE	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	***** *****		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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 (A3 FB)	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	*******			*******	*******	*******				
99513 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--WILDCAT
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
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH
MINOR

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	90	04	01	TO	90	04	30

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)
SANITARY WASTE DISCHARGED-ASSESSMNT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****			*****	*****	*****				
	PERMIT REQUIREMENT	*****	0 DAILY MX	YES=1 NO=0	*****	*****	*****	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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		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.)*	Michael W. Glasson	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 BOX.

Mar Pin

QC SH 6/6

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ANDALEX RESOURCES--WILDCAT
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) UTG040007 PERMIT NUMBER
(17-19) 001 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO ~~WILDCAT~~ ~~WSH~~ Deadman Ck

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	03	01	TO	90	03	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)
FLOW RATE	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	********		ONCE/ MONTH	MEASRD
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	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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

Michael W. Glasson

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--WILDCAT
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) UTG040007 — PERMIT NUMBER
(17-19) 001 A — DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILDCAT WSH
Deadman Crk
MINOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	03	01	TO	90	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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)
SANITARY WASTE DISCHARGED-ASSESSMNT 45610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			*******	*******	*******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	***** *****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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			TELEPHONE		DATE		
Michael W. Glasson	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	801	6375355	90	4	28
TYPED OR PRINTED		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--WILDCAT
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

7cb Pin

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

QC 4/6/6

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO ~~WILDCAT~~ USH Deadman Ck

Com 4/25

MINOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	02	01	TO	90	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	********		ONCE/ MONTH	MEASRD
PH	SAMPLE MEASUREMENT	*******	*******			*******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	********	6.5 DAILY MN	*******	9.0 DAILY MX	SU		WICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*******	*******		*******						
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	*******	*******		*******	*******					
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--WILDCAT

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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL

SED POND DSCHRG TO ~~WILDCAT WSH~~ Deadman Gk

CM 4/25

MINOR

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	02	01	TO	90	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	0 DAILY MX	YES=1 NO=0	******	******	******	**** ****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 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		TELEPHONE		DATE		
Michael W. Glasson	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	801	6375385	90	4	28
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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) Jan Pia - Summers

NAME ANDALEX RESOURCES--WILDCAT

ADDRESS P.O. BOX 902

PRICE UT 84501

FACILITY

LOCATION

ATTN: MICHAEL R. GLASSON

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

QC Ck 6/16

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

F - FINAL

SED POND DSCHRG TO ~~WILDCAT WSH~~ Deadman Crk

Chk 4/25

MINOR

NOTE: Read Instructions before completing this form.

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

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	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	***** *****		ONCE/ MONTH	MEASRD
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 P 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--WILDCAT
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL H. GLASSON

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

MONITORING PERIOD

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

F - FINAL
SED POND DSCHRG TO ~~WILDCAT MSH~~ Deadman Crk
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)
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 70295 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			TELEPHONE		DATE		
Michael H Glasson	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 H Glasson	AREA CODE 801	NUMBER 637 5305	YEAR 90	MO 4	DAY 28
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--WILDCAT
ADDRESS P.O. BOX 902
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

QC SH 6/6

(2-16) UTG040007 PERMIT NUMBER

(17-19) 001 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	12	01	TO	89	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

1 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	SAMPLE MEASUREMENT				*******	*******	*******			NO DISCHARGE	
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	****		ONCE/ MONTH	CALCD
	SAMPLE MEASUREMENT	*******	*******			*******				NO DISCHARGE	
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	*******	*******		*******					NO DISCHARGE	
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	*******	*******		*******	*******				NO DISCHARGE	
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	*******	*******		*******	*******				NO DISCHARGE	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	**** ****	*******	*******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*******	*******		*******	*******				NO DISCHARGE	
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	*******			*******	*******	*******			NO DISCHARGE	
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		
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--WILDCAT
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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MINOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	12	01	TO	89	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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 85614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******			NO DISCHARGE	
	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	*****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 0 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******			*******	*******				NO DISCHARGE	
	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			TELEPHONE		DATE		
MICHAEL W. GLASSON SENIOR GEOLOGIST	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.)*		801	637-5385			
TYPED OR PRINTED		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--WILDCAT
ADDRESS P.O. BOX 902
PRICE UT 84501
FACILITY
LOCATION
ATTN: MICHAEL W. GLASSON

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

QC SH 6/6

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

Cm 4/26

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UTG040007	001 A

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	89	11	01	TO	89	11	30

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	SAMPLE MEASUREMENT				*******	*******	*******			NO DISCHARGE	
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	CFD	*******	*******	*******	*****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	*******	*******			*******				NO DISCHARGE	
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	*******	*******		*******					NO DISCHARGE	
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	*******	*******		*******	*******				NO DISCHARGE	
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	*******	*******		*******	*******				NO DISCHARGE	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*******	*******		*******	*******				NO DISCHARGE	
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	*******			*******	*******	*******			NO DISCHARGE	
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)

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--WILDCAT
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
UTG040037	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	11	01	TO	89	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)
SANITARY WASTE DISCHARGED-ASSESSMNT 45514 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******			NO DISCHARGE	
	PERMIT REQUIREMENT	*******		YES=1 NO=0	*******	*******	*******	*******		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******			*******	*******				NO DISCHARGE	
	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			TELEPHONE		DATE		
MICHAEL W. GLASSON SENIOR GEOLOGIST	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.)*		801	637-5385			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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--WILDCAT

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)
UTG040007	001 A
PERMIT NUMBER	DISCHARGE NUMBER

QC SH 6/6

F - FINAL

SED POND DSCHRG TO WILDCAT WSH

CM 4/25

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	10	01	TO	89	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	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)
FLOW RATE	SAMPLE MEASUREMENT				******	******	******			NO DISCHARGE	
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	******	******	******	**** ****		ONCE/ MONTH	MEASRD
	SAMPLE MEASUREMENT	******	******			******				NO DISCHARGE	
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	******	******		******					NO DISCHARGE	
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	******	******		******	******				NO DISCHARGE	
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	******	******		******	******				NO DISCHARGE	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******				NO DISCHARGE	
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	******			******	******	******			NO DISCHARGE	
45613 1 0 0 EFFLUENT GROSS VALUE	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.)		TELEPHONE	DATE
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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--WILDCAT
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
UTG040007	001 A

F - FINAL
SED POND DSCHRG TO WILDCAT WSH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	10	01	TO	89	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

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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)
SANITARY WASTE DISCHARGED-ASSESSMNT	SAMPLE MEASUREMENT	*******			*******	*******	*******			NO DISCHARGE	
45614 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	0 DAILY MX	YES=1 NO=0	*******	*******	*******	*****		ONCE/ MONTH	VISUAL
SOLIDS, TOTAL [illegible]SSOLVED	SAMPLE MEASUREMENT	*******			*******	*******				NO DISCHARGE	
70295 Q 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			TELEPHONE		DATE		
MICHAEL W. GLASSON SENIOR GEOLOGIST	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.)*		801	637-5385			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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