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

NAME ANDALEX RESOURCES--WILDCAT

ADDRESS P.O. BOX 902

[illegible] UT 84501

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
UT0040007	004 A
PERMIT NUMBER	DISCHARGE NUMBER

QC CH 6/6

F - FINAL

SED POND DSCHRG TO WILCAT WASH

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	11	01	TO	91	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	(54-61) AVERAGE	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	******			******	******	******				
	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	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]	TELEPHONE		DATE		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801 AREA CODE	6375385 NUMBER	92 YEAR	1 MO	28 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 ASS. REPORT "DOES NOT APPLY" IN THE APPROPRIATE ROW.

EPA Form 3320-[illegible] (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.) OF

[illegible]/[illegible]1-17[illegible]

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

NAME [illegible]

ADDRESS [illegible]

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER [illegible]

(17-19) DISCHARGE NUMBER [illegible]

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MINOR

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
91	10	01	91	10	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	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.

EPA Form 3320 [illegible]. 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.)

[illegible]/[illegible]21-1711

OF

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

NAME [illegible]

ADDRESS [illegible]

[illegible] UT 84511

FACILITY

LOCATION

ATTN: MICHAEL W. GLASSON

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

(2-16)	(17-19)
[illegible]	004 A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

GC GH 4/6

P - FINAL
SED POND DSCHNG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	10	01	TO	91	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)		(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 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	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	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801	6375355	92	1	28
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

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EPA Form 3320-[illegible] (9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.) OF

[illegible]

QC 94 4/6

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)

Form Approved. OMB No. 2040-0004 Approval expires 6-30-91

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UTG040007	004 A

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	09	01	TO	91	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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	(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	ESTIMA
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	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)

Form Approved. OMB No. 2040-0004 Approval expires 6-30-91

(2-16) UT0040007 PERMIT NUMBER

(17-19) 004 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	09	01	TO	91	09	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 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******	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										
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	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		DATE		
801	635385	91	10	28
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. GRASSOM

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

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

(2-16) UTG040007 PERMIT NUMBER
(17-19) 004 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	08	01	TO	91	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR
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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

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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)

Form Approved. OMB No. 2040-0004 Approval expires 8-30-91

(2-16) UTG040007 PERMIT NUMBER
(17-19) 004 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
91	08	01	91	08	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	(54-61) AVERAGE	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

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
801	637-5385	91	10	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 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 H. GLASSON

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

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

(2-16)	(17-19)
UTG040047	004 A
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

CM 9-24

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	07	01	TO	91	07	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	(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	BEASRD
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

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		DATE		
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.

EPA Form 3320-[illegible] 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.)

00253/900521-1731

PAGE 1 OF

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)

Form Approved. OMB No. 2040-0004 Approval expires 8-30-91

(2-16) UTG040007 PERMIT NUMBER
(17-19) 004 A DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	07	01	TO	91	07	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 (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SANITARY WASTE DISCHARGED-ASSESSMENT 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

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	TELEPHONE NUMBER	DATE YEAR	DATE MO	DATE DAY
801	6375385	91	10	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 ROW.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME [illegible]
ADDRESS [illegible]
[illegible]
FACILITY
LOCATION
[illegible] MICHAEL H. GLASSON

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

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
[illegible] POND DISCHARGE TO WILCAT WASH

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	06	01	TO	91	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	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 DAY AVG	REPORT DAILY MX	MGD	******	******	******	****		ONCE/ MONTH	ESTIMAT
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 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******						
	PERMIT REQUIREMENT	******	******	****	******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	******	******	****	******	******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	******	******	****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******					
	PERMIT REQUIREMENT	******	******	****	******	******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 00013 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	9 DAILY MX	25=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.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED						

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

TSS 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.

[illegible]

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

NAME [illegible]

ADDRESS [illegible]

FACILITY

LOCATION

[illegible] MICHAEL W. GLASSON

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

(2-16)	(17-19)
[illegible]	004 A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

FINAL
SED POND DSCHRG TO WILCAT WASH

MINOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	06	01	TO	91	06	30
	(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	(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)
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 J 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	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		DATE		
TYPED OR PRINTED			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 ADELPHIA RESOURCES--FINAL
ADDRESS P.O. BOX 2
CHG OH 44501
FACILITY
LOCATION
CITY: MICHAEL R. GLASSON

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

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

(2-16) PERMIT NUMBER: OH0000007
(17-19) DISCHARGE NUMBER: 004 A

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	05	01	TO	91	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) (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									
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD						ONCE/ MONTH	GRAB
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 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT						2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 00013 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		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)

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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	009 A
PERMIT NUMBER	DISCHARGE NUMBER

QC SH 6/6

F - FINAL
SED POND DSCHRG TO WILCAT WASH

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	05	01	TO	91	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)		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)
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.)*	[signature]					
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 HOW.

EPA Form 3320 [illegible] 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.) OF

[illegible]

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

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

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

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	04	01	TO	91	04	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 [illegible]	REPORT DAILY [illegible]	CPD	******	******	******	*****		ONCE/ MONTH	[illegible]
PH	SAMPLE MEASUREMENT	******	******			******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	[illegible] DAILY [illegible]	******	9.0 DAILY [illegible]	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******						
00530 2 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*****	******	25 [illegible]	70 DAILY [illegible]	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******					
00545 [illegible] SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*****	******	******	0.5 DAILY [illegible]	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 [illegible]	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******					
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	2.0 DAILY [illegible]	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL	SAMPLE MEASUREMENT	******			******	******	******				
45613 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	[illegible] DAILY [illegible]	YES=1 NO=0	******	******	******	*****		ONCE/ MONTH	VISUAL

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		DATE		
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 [illegible]Y" IN THE APPROPRIATE ROW.

EPA Form 3320-[illegible] 9-88) *Previous editions may be used.* (REPLACES EPA FORM T[illegible]ICH MAY NOT BE USED.)

00247/000521-1731

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

NAME ANDALEX RESOURCES--WILCAT

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	004 A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

QC SH 6/6

FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	04	01	TO	91	04	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) (54-61) MINIMUM	AVERAGE	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	******	DAILY MX	ES=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	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.

EPA Form 3320-[illegible] 9-88) *Previous editions may be used.* (REPLACES EPA FORM T[illegible]CH MAY NOT BE USED.) OF

[illegible]

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ANDALEX RESOURCES-WILDCAT
ADDRESS P.O. BOX 838
DELTA UT 84531
FACILITY
LOCATION
ATTN: MICHAEL A. GIBSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) *(17-19)*

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

UT0020017 — PERMIT NUMBER
001 — DISCHARGE NUMBER
F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	03	01	TO	92	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	*(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 MONTHLY AVG	REPORT DAILY MXMM	MGD	*******	*******	*******	*****		ONCE/MONTH	CALCD
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 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	*******	*******	*****	*******	25 30 DAY AV	70 DAILY MX	MG/L		ONCE/MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	0.5 DAILY MX	ML/L		ONCE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*****	*******	*******	2.0 DAILY MX	MG/L		ONCE/MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	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 BOX.

DE245/90052-1-1711

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 M. GLASSON

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

(2-16)	(17-19)
UTG040007	004 A
PERMIT NUMBER	DISCHARGE NUMBER

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MINOR

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
91	03	01	91	03	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	(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)
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	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
			801	4375385	91	04	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 ROW.

EPA Form 3320 [illegible] 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.) [illegible] OF

00246/900321-1701

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ADDALEX RESOURCES-WILDCAT
ADDRESS P.O. BOX 002
ZAIG UT 84501
FACILITY
LOCATION
ATTN: RICHARD A. GLASSEN

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

QC SH 6/6

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0000007	004 A

F - FINAL
SED POND DSCHRG TO WILCAT WASH

CM 4-24

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
91	02	01	91	02	28

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 00056 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DAILY MX	GPD	*******	*******	*******	*******		ONCE/ MONTH	ESTMD
PH 00400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*******	*******			*******					
	PERMIT REQUIREMENT	*******	*******	*******	6. DAILY MN	*******	9.0 DAILY MX	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	*******	*******	*******	*******	25 30 DA AV	70 DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	0.5 DAILY MX	ML/L		ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	2.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45013 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*******	*******		*******	*******	*******				
	PERMIT REQUIREMENT	*******	*******	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)*

TSS 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)
UT0000007	004 A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	02	01	TO	91	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

F - FINAL
SED POND DSCHRG TO WILCAT WASH

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)
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	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		DATE		
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY
			801	6375355	91	04	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 ROW.

EPA Form 3320 [illegible], 9-88) *Previous editions may be used.* (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED.) OF

00244/00[illegible]1-1701

QC SH 6/6

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME ARGALLY RESOURCES--WILCAT
ADDRESS P.O. BOX 42
PRICE UT 84501
FACILITY
LOCATION
ARTHUR MICHAEL M. GLASSON

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

PERMIT NUMBER	DISCHARGE NUMBER
UT0024007	001 A

F - FINAL
SED POND DSCHRG TO WILCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	01	01	TO	91	01	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) (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)
FLOW RATE	SAMPLE MEASUREMENT	NO DISCHARGE			*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	GPD	*******	*******	*******	*******		NCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	*******	*******			*******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	*******	6.5 DAILY MN	*******	9.0 DAILY MX	SU		NCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******						
	PERMIT REQUIREMENT	*******	*******	*******	*******	25 30 DAY AV	70 DAILY MX	MG/L		NCE/ MONTH	GRAB
SOLIDS, SETTLEABLE 00545 R 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	.5 DAILY MX	ML/L		NCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	10 DAILY MX	MG/L		NCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******					
	PERMIT REQUIREMENT	*******	*******	*******	*******	*******	2.0 DAILY MX	MG/L		NCE/ MONTH	GRAB
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 00013 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******			*******	*******	*******				
	PERMIT REQUIREMENT	*******		YES=1 NO=0	*******	*******	*******	*******		NCE/ MONTH	ESTIM

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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.)*

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

TSS 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.

00241/000371-1731

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*
NAME ANGLE RESOURCES-PIGCAT
ADDRESS P.O. BOX 302
PRICE UT 84501

FACILITY
LOCATION
ATTN: MICHAEL H. GLASSON

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0024067	001 A

F - FINAL
SED POND DSCHG TO PIGCAT WASH

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	91	01	01	TO	91	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-91

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)
SANITARY WASTE DISCHARGED-ASSESSMNT 45614 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******			******	******	******				
	PERMIT REQUIREMENT	******	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		
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	801 (AREA CODE)	637-9385 (NUMBER)	91 (YEAR)	02 (MO)	28 (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.