C/007/033 Incoming
K

America West Resources
Wildcat Load Out
3266 South 125 West, Price, Utah 84501
Phone: (435) 636-0820 – Fax: (435) 636-0817

RECEIVED
MAY 14 2012
DIV. OF OIL, GAS & MINING

May 9, 2012

Mr. Daron Haddock
Utah Coal Program
Utah Division of Oil, Gas and Mining
1594 West North Temple – Suite 1210
Box 145801
Salt Lake City, UT 84114-5801

Dear Daron:

America West Resources respectfully submits the April 2012 – Discharge Monitoring Reports (DMRs) associated with the Wildcat Load Out UPDES Permit UTG040007.

If you have any questions, please feel free to call me at 435-636-0820.

Sincerely,

Kit Pappas
Engineering/Environmental

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	001
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OF CONCENTRATION MINIMUM	QUALITY OF CONCENTRATION AVERAGE	QUALITY OF CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
Flow Rate	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
00056 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 30DAAVG	REPORT DAILY MX	GPD				*****		1/30	MEASRD
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****		(12)			
00400 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****				SU		1/30	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****					(19)			
00530 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT						DAILY MAX	MG/L		1/30	GRAB
Oil & Grease	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)			
03582 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT						10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe)	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)			
01045 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
70295 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT		2000 DAILY MAX	LBS/DY				*****		1/30	GRAB
	SAMPLE MEASUREMENT			*****				*****			
	PERMIT REQUIREMENT			*****				*****			

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	435	636-0820	12	05	09
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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.)

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

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	002
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow Rate	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
00056 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD						1/30	MEASRD
pH	SAMPLE MEASUREMENT	*****	*****	*****							
00400 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****						1/30	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****						(19)			
00530 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT						70 DAILY MAX	MG/L		1/30	GRAB
Oil & Grease	SAMPLE MEASUREMENT				*****	*****		(19)			
03582 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe)	SAMPLE MEASUREMENT		*****		*****	*****		(19)			
01045 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
70295 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT		2000 DAILY MAX	LBS/DY				*****		1/30	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			*****				*****			

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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	435	636-0820	12	05	09
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	003
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

NO DISCHARGE

PARAMETER		QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow Rate 00056 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD						1/30	MEASRD
pH 00400 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****		*****		12			
	PERMIT REQUIREMENT				6.5 DAILY MIN		9.0 DAILY MAX	SU		1/30	GRAB
Solids, Total Suspended 00530 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****			(19)			
	PERMIT REQUIREMENT			*****		35 30DA AVG	70 DAILY MAX	MG/L		1/30	GRAB
Oil & Grease 03582 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe) 01045 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
	PERMIT REQUIREMENT			*****			7.0 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved 70295 1 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
	PERMIT REQUIREMENT		2000 DAILY MAX	LBS/DY				*****		1/30	GRAB
	SAMPLE MEASUREMENT			*****				*****			
	PERMIT REQUIREMENT			*****				*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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	435	636-0820	12	05	09
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	004
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow Rate	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
00056 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 30DAVG	REPORT DAILY MX	GPD						1/30	MEASRD
pH	SAMPLE MEASUREMENT	*****	*****	*****							
00400 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT							SU		1/30	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****			*****			(19)			
00530 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT					30 DA AVG	70 DAILY MAX	MG/L		1/30	GRAB
Oil & Grease	SAMPLE MEASUREMENT			*****	*****	*****		(19)			
03582 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
01045 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			1.0 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
70295 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT		2000 DAILY MAX	LBS/DY				*****		1/30	GRAB
	SAMPLE MEASUREMENT			*****				*****			
	PERMIT REQUIREMENT			*****				*****			

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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	435 AREA CODE	636-0820 NUMBER	12 YEAR	05 MO	09 DAY
TYPED OR PRINTED							

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

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	005
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

NO DISCHARGE

PARAMETER		QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow Rate	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
00056 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD				*****		1/30	MEASRD
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****		(1			
00400 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****	6.0 DAILY MIN		9.0 DAILY MAX	S		1/30	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****		*****			(1			
00530 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			DAILY MAX	MG/L		1/30	GRAB
Oil & Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
03582 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
01045 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
70295 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT		2000 DAILY MAX	LBS/DY				*****		1/30	GRAB
	SAMPLE MEASUREMENT			*****				*****			
	PERMIT REQUIREMENT			*****				*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		435	636-0820	12	05	09

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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.)

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

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

NAME IPA AWR

ADDRESS 3266 S. 125 WEST
PRICE, UTAH 84501

FACILITY LOCATION Wildcat Loadout

NATIONAL POLLUTANT DISCHARGE ELIMINATATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form approved.
OMB No. 2040=00004

UTG040007	006
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	12	04	01	TO	12	04	30

[X] Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow Rate	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****			
00056 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 30DAYAVG	REPORT DAILY MX	GPD				*****		1/30	MEASRD
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****		(12)			
00400 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****	6.5 DAILY MIN		8.5 DAILY MAX	SU		1/30	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****			(19)			
00530 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****		30 DAYAV	45 DAILY MAX	MG/L		1/30	GRAB
Oil & Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
03582 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Iron, Total (as Fe)	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			
01045 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT			*****			10 DAILY MAX	MG/L		1/30	GRAB
Solids, Total Dissolved	SAMPLE MEASUREMENT	*****		(26)	*****	*****	*****	*****			
70295 1 0 0 Effluent Gross Value	PERMIT REQUIREMENT	*****	2000 DAILY MAX	LBS/DY			*****	*****		1/30	GRAB
	SAMPLE MEASUREMENT			*****				*****			
	PERMIT REQUIREMENT			*****				*****			

NO DISCHARGE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
KIT PAPPAS/ENV.MGR.	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. 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	435	636-0820	12	05	09
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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