PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84159-0257
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: 016 A

MINOR
F - FINAL
SED POND DISCH / ICHANDER CRK
EFFLUENT
*** NO DISCHARGE *** X

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
95	11	01	TO	95	11	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FROM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (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	(07)	*******	*******	*******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX	GPD	*******	*******	*******	********		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*******	*******				*******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	********	3.0 DLYAVMIN	5.0 30DA AVG	*******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	*******	*******			*******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	********	6.5 MINIMUM	*******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*******	*******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	********	25 30 DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*******	*******		*******	*******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	********	*******	*******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV MET	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*******	*******	********	*******	*******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*******	*******		*******	*******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*******	*******	********	*******	*******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

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 801	NUMBER 888-4476	YEAR	MO	DAY

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0007
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) C16 A DISCHARGE NUMBER

MINOR
P - FINAL
RED POND DISCH / BOILANDER CR
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	10	01	TO	95	10	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) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (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	(7)	*****	*****	*****				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	*****	*****	*****	*****		TWICE/MEASRD MONTH	
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****				*****	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	3. DLYAVMIN	5. 30DA AVG	*****	MG/L		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****			*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****		*****	*****		(25)			
00545 2 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.5 DAILY MX	ML/L		TWICE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)			
01045 2 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Danny Mattingly General Manager	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	888-4476 NUMBER	95 YEAR	11 MO	18 DAY
TYPED OR PRINTED							

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PUMP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
SED POND DISCH / ICELANDER CRK
EFFLUENT
*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD					
FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	06	01	95	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	QUANTITY OR LOADING MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	QUALITY OR CONCENTRATION AVERAGE (46-53)	QUALITY OR CONCENTRATION MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW RATE	SAMPLE MEASUREMENT		No Flow	(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	****** ****	****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ****	****	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ****	****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

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 888-9976

DATE: YEAR 95, MO 7, DAY 19

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) 016 A DISCHARGE NUMBER

MINOR
P - FINAL
SED POND DISCH / ICELANDER CRK EFFLUENT
*** NO DISCHARGE ☒ ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
95	05	01	95	05	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 FLOW		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/MEASRD MONTH	
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/ GRAB MONTH	
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ GRAB MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/GRAB MONTH	
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/GRAB MONTH	
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ GRAB MONTH	
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Danny Mattingly General Manager	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.)	Danny Mattingly SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801 (AREA CODE)	888-4476 (NUMBER)	95 (YEAR)	6 (MO)	14 (DAY)
TYPED OR PRINTED						

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) 016 A DISCHARGE NUMBER

MINOR
F - FINAL
SED POND DISCH / ICELANDER CRK
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
95	04	01	TO	95	04	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

FROM

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	Flow	(07)	******	******	******				
00056 1 0 0	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/MEASRD MONTH	
EFFLUENT GROSS VALUE											
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/ GRAB MONTH	
EFFLUENT GROSS VALUE											
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ GRAB MONTH	
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX7D AV	70 DAILY MX	MG/L		TWICE/GRAB MONTH	
EFFLUENT GROSS VALUE											
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 0 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/GRAB MONTH	
SEE COMMENTS BELOW											
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ GRAB MONTH	
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	
SEE COMMENTS BELOW											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Thomas Eckstein
Acting Plant Mgr
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	881-4476	95	5	15
AREA CODE	NUMBER	YEAR	MO	DAY

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIPITATION RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0027
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR
F - FINAL
SED POND DITCH / TIELANDER CRK.
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	03	01	TO	95	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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 50056 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	No Flow		(07)	******	******	******				
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	*****		TWICE/MEASRD MONTH	
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******				******	(19)			
	PERMIT REQUIREMENT	******	******	*****	3.0 DLYAVMTN	5.0 30DA AVG	******	MG/L		ONCE/ MONTH	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******			******		(12)			
	PERMIT REQUIREMENT	******	******	*****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******					(19)			
	PERMIT REQUIREMENT	******	******	*****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/GRAB MONTH	
SOLIDS, SETTLEABLE 00545 Q 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******		(25)			
	PERMIT REQUIREMENT	******	******	*****	******	******	0.5 DAILY MX	ML/L		TWICE/GRAB MONTH	
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE) 01045 P 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	******	******		******	******		(19)			
	PERMIT REQUIREMENT	******	******	*****	******	******	1.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Thomas G Eckstein, Acting Plant Manager (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: Thomas G Eckstein

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 95, MO 4, DAY 21

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

TOTAL SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS. DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

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

NAME [illegible]

ADDRESS [illegible]

FACILITY [illegible]

LOCATION [illegible]

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

CM 4-7

(2-16)	(17-19)
[illegible]	016
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	02	01	TO	95	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)
[illegible]	SAMPLE MEASUREMENT	No Flow		(7)	******	******	******				
[illegible]	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	[illegible]	******	******	******	****		TWICE/MEASRD MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******				******	(19)			
[illegible]	PERMIT REQUIREMENT	******	******	****	[illegible] DIYAVMIN	5.[illegible] 30DA AVG	******	MG/L		ONCE/ GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******			******		(12)			
[illegible]	PERMIT REQUIREMENT	******	******	****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******					(19)			
[illegible]	PERMIT REQUIREMENT	******	******	****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******		******	******		(25)			
[illegible]	PERMIT REQUIREMENT	******	******	****	******	******	0.5 DAILY MX	ML/L		TWICE/GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******		******	******		(19)			
[illegible]	PERMIT REQUIREMENT	******	******	****	******	******	10 DAILY MX	MG/L		ONCE/ GRAB MONTH	
[illegible]	SAMPLE MEASUREMENT	******	******		******	******		(19)			
[illegible]	PERMIT REQUIREMENT	******	******	****	******	******	1.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Jim O'Donnell

[illegible] TYPED [illegible] 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 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

[signature]

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	888-4476	95	3	28
AREA CODE	NUMBER	YEAR	MO	DAY

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

[illegible] SOLIDS IS LIMITED RATHER THAN TSS [illegible] "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-93

F - FINAL
SED POND DISCHARGE TO SALT CRK
EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	09	01	TO	94	09	30
	(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 Flow		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/ MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/ MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David R. Pearce
Environmental Power U.P.
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.*)

Brian Burnett
Brian Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
801	530-7360	1994	10	15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)
ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

DISCHARGE MONITORING REPORT (DMR)

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR CM 4-7

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-95

F - FINAL
SED POND DISCH/LEACHATE UNDER CRK
EFFLUENT

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	08	01	94	08	31

*** NO DATA [X] ***

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 Flow		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David R. Pearce
Environmental Power V.P.
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.)*

Brian W Burnett
Brian Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 530-7300

DATE: YEAR 94 MO 9 DAY 15

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) 016 A DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

F - FINAL
SED POND DISCHARGE UNDER CRK
EFFLUENT

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
94	07	01	TO	94	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DATA |X| ***

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 Flow		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	********		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ********		3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ********		6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ********		25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ********		******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ********		******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ********		******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David R. Pearce
Environmental Power V.P.
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.)*

Brian Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 530-7300

DATE: YEAR 94, MO 07, DAY 15

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-98

F - FINAL
SED POND DISCHARGE CRK
EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD					
YEAR	MO	DAY		YEAR	MO	DAY
94	06	01	TO	94	06	30
(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 Flow		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	*****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*****	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
David R. Pearce Environmental Power V.P.	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.)*	Brian Burnett Brian Burnett	801	5307300	94	07	18
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-98

F - FINAL
SED POND DISCHARGE CRK
EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
94	05	01	TO	94	05	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) AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	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	Flow	(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	*** ****		WICE/MONTH	EASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	3.0 DLY AVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		WICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*** ****	******	******	0.5 DAILY MX	ML/L		WICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*** ****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	*** ****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David R. Pearce
Environmental Power V.P.
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.)*

Brian Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 530-7300

DATE: YEAR 94 MO 06 DAY 16

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-96

F - FINAL
SED POND DISCHARGE LANDER CRK EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	04	01	94	04	30
(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	Flow	(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	****** ****	****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ****	****	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** ****	****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** ****	****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: David P. Pearce, Environmental Power V.P.

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.)

Brian Burnett
Brian W. Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 530-7301
DATE: YEAR 94, MO 06, DAY 02

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) 016 A DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 06/30/95

F - FINAL
SED POND DISCHARGE TO GANDER CRK
EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD

YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
94	03	01	TO	94	03	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)
FLOW RATE	SAMPLE MEASUREMENT	NO	FLOW	(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/MEASRD MONTH	
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/ GRAB MONTH	
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ GRAB MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/GRAB MONTH	
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/GRAB MONTH	
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ GRAB MONTH	
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/ GRAB MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID R. PEARCE
ENVIRONMENTAL POWER V.P.
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.)*

BRIAN BURNETT
Brian W Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	530-7300	94	04	12
AREA CODE	NUMBER	YEAR	MO	DAY

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) 016 A DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

F - FINAL
SED POND DISCHARGE TO SELAN DER CRK
EFFLUENT
*** NO DATA [X] ***

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

MONITORING PERIOD

FROM YEAR (20-21)	MO. (22-23)	DAY (24-25)	TO YEAR (26-27)	MO. (28-29)	DAY (30-31)
94	02	01	94	02	28

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	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 FLOW		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	********		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	********	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	********	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID R. PEARCE
ENVIRONMENTAL POWER VP
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.)

BRIAN BURNETT
Brian W Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	530-7300	94	03	10

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNY SIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNY SIDE UT 84539
FACILITY SUNNY SIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR
F - FINAL
SED POND DISCHARGE TO MEADOW CRK
EFFLUENT

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	01	01	94	01	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DATA [X] ***

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 FLOW		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	**** ****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID PEARCE
ENVIRONMENTAL POWER VP
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.)*

BRIAN BURNETT
Brian W Burnett
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	530-7300	94	02	28

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) 016 A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10/31/96

F - FINAL
SED POND DISCHARGE TO LITTLE COAL CRK.
EFFLUENT
*** NO DATA ***

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
93	10	01	TO	93	10	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)
FLOW RATE	SAMPLE MEASUREMENT	NO FLOW		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	*** ****		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** **** ****		3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** **** ****		6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** **** ****		25 30DA AVG	35 MX 7D AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** **** ****		******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** **** ****		******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	****** **** ****		******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David R. Pearce
Environmental Power V.P.
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
801	530 7428	93	11	29

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
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ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) UT0024759 PERMIT NUMBER

(17-19) 016 A DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 12-31-95

F - FINAL
SED POND DISCHARGE ALONG CRK
EFFLUENT

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	06	01	93	06	30

*** NO DATA |__| ***

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 Flow		(07)	******	******	******				
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	GPD	******	******	******	********		TWICE/MONTH	MEASRD
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******				******	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	3.0 DLYAVMIN	5.0 30DA AVG	******	MG/L		ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	6.5 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******					(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	25 30DA AVG	35 MX 70 AV	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******		(25)			
00545 Q 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	********	******	******	0.5 DAILY MX	ML/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	******	******		******	******		(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	********	******	******	10 DAILY MX	MG/L		ONCE/MONTH	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******		(19)			
01045 P 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	********	******	******	1.0 DAILY MX	MG/L		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID R. PEARCE
ENVIRONMENTAL POWER
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.)*

BRIAN BURNETT
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 530-7300

DATE: YEAR 93, MO 07, DAY 22

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

ACID SOLUBLE METHOD OF ANALYSIS SHALL BE USED FOR IRON. SETTLEABLE SOLIDS IS LIMITED RATHER THAN TSS DURING PRECIP RUNOFF EVENTS. ON RUNOFF EVENTS, REPORT "DOES NOT APPLY" WHERE APPLICABLE.

No Discharge

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Sunnyside Cogeneration Associates
ADDRESS PO Box 174
Sunnyside, UT 84539

FACILITY Sunnyside Cogeneration Facility
LOCATION # 1 Power Plant Rd, Sunnyside UT

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

Form Approved
OMB No. 2040-0004
Approval expires 6-30-88

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0024759	016 Borrow Area Pond

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	05	01	TO	93	05	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)
Flow Rate	SAMPLE MEASUREMENT	NO FLOW		gpd	—	—	—	—	0	2/30	Meas
	PERMIT REQUIREMENT	Report 30 Day Avg	Report Daily Max		—	—	—		0	2/30	Meas
Iron	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	1.0 Daily Max		0	1/30	Grab
Oil & Grease	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	10 Daily Max		0	1/30	Grab
Solids, Total Suspended	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		25 30 Day Avg	35 7 Day Avg	70 Daily Max		0	2/30	Grab
Solids, Total Dissolved	SAMPLE MEASUREMENT	—	—	lbs/day	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	Report 30 Day Avg	Report Daily Max		—	—	1650 Daily Max		0	1/30	Grab
pH	SAMPLE MEASUREMENT	—	—	—	—	—	—	SU	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		6.5 Daily Min	—	9.0 Daily Max		0	2/30	Grab
Dissolved Oxygen	SAMPLE MEASUREMENT	—	—	—	—	—	—	ml/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		5.0 30 Day Avg	—	3.0 1 Day Avg		0	1/30	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
David Pearce Environmental Power VP	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.)*	Brian W Burns	801	9724787	93	06	29
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

No Discharge From 016 During Monitoring Period

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Sunnyside Cogeneration Associates
ADDRESS PO Box 174
Sunnyside UT 84539
FACILITY Sunnyside Cogeneration Facility
LOCATION #1 Power Plant Rd.

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0024759	016

Borrow Area Pond.

Form Approved
OMB No. 2040-0004
Approval expires 6-30-88

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	04	01	TO	93	04	30
	(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) (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 Flow		gpd	—	—	—	—	0	2/30	Meas
	PERMIT REQUIREMENT	Report 30 Day Avg	Report Daily Max		—	—	—		0	2/30	Meas
Iron	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	1.0 Daily Max		0	1/30	Grab
Oil & Grease	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	10 Daily Max		0	1/30	Grab
Solids, Total Suspended	SAMPLE MEASUREMENT	—	—	—	—	—	—	mg/L	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		25 30 Day Avg	35 Daily Avg	70 Daily Max		0	2/30	Grab
Solids, Total Dissolved	SAMPLE MEASUREMENT	—	—	lbs/day	—	—	—	mg/L	0	1/30	Grab
	PERMIT REQUIREMENT	Report 30 Day Avg	Report Daily Max		—	—	1650 Daily Max		0	1/30	Grab
pH	SAMPLE MEASUREMENT	—	—	—	—	—	—	SU	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		6.0 Daily Min	—	9.0 Daily Max		0	2/30	Grab
Dissolved Oxygen	SAMPLE MEASUREMENT	—	—	—	—	—	—	ml/L	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		≥5.0 30 Day Avg	—	≥3.0 7 Day Avg		0	1/30	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
David Pearce Environmental Power VP	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)	9724787 (NUMBER)	93 (YEAR)	05 (MO)	18 (DAY)
TYPED OR PRINTED						

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

No Discharge From 016

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Sunnyside Cogeneration Associates
ADDRESS P.O. Box 174
Sunnyside, UT 84539

FACILITY Sunnyside Cogeneration Facility
LOCATION #1 Power Plant Road, Sunnyside UT

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0024759	016

Borrow Area Pond

Form Approved
OMB No. 2040-0004
Approval expires 6-30-88

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	02	01	TO	92	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) (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 Flow			—	—	—		0	2/30	Meas.
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	gpd	—	—	—	—	0	2/30	Meas.
Iron	SAMPLE MEASUREMENT	—	—		—	—	/		0	1/30	Grab
	PERMIT REQUIREMENT	—	—	—	—	—	1.0 DAILY MAX	mg/l	0	1/30	Grab
Oil & Grease	SAMPLE MEASUREMENT	—	—		—	—	/		0	1/30	Grab
	PERMIT REQUIREMENT	—	—	—	—	—	10 DAILY MAX	mg/l	0	1/30	Grab
Solids Total Suspended	SAMPLE MEASUREMENT	—	—		/	/	/		0	2/30	Grab
	PERMIT REQUIREMENT	—	—	—	25 30 DAY AVG	35 7 DAY AVG	70 DAILY MAX	mg/l	0	2/30	Grab
Solids, Total Dissolved	SAMPLE MEASUREMENT	—	—		—	—	/		0	1/30	Grab
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	LBS/DAY	—	—	1650 DAILY MAX	mg/l	0	1/30	Grab
pH	SAMPLE MEASUREMENT	—	—		/	—	/		0	2/30	Grab
	PERMIT REQUIREMENT	—	—	—	6.5 DAILY MIN	—	9.0 DAILY MAX	mg/l	0	2/30	Grab
Dissolved Oxygen	SAMPLE MEASUREMENT	—	—		/	—	/		0	1/30	Grab
	PERMIT REQUIREMENT	—	—	—	≥5.0 30 DAY AVG	—	≥3.0 1 DAY AVG	mg/l	0	1/30	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
DAVID R. PEARCE Environmental Power VP	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.)*	Chuck Wemple Chuck Wemple SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	801	924787	93	03	28
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

No Discharge From 016 During Monitoring Period

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Sunnyside Cogeneration Associates
ADDRESS P.O. Box 174
Sunnyside, UT 84539

FACILITY Sunnyside Cogeneration Facility
LOCATION Powerplant Rd, Sunnyside UT 84539

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

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0024159	016

Borrow Area Pond
CM 4-7

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	01	01	TO	93	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		Q (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	Q (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-65)	FREQUENCY OF ANALYSIS (66-68)	SAMPLE TYPE (69-70)
Flow Rate	SAMPLE MEASUREMENT	No Flow		gpd	—	—	—	—	0	2/30	MEAS
	PERMIT REQUIREMENT	15000 30 DAY AVG	REPORT DAILY MAX		—	—	—		0	2/30	MEAS
IRON	SAMPLE MEASUREMENT	—	—	—	—	—	/	mg/l	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	1.0 DAILY MAX		0	1/30	Grab
OIL & GREASE	SAMPLE MEASUREMENT	—	—	—	—	—	/	mg/l	0	1/30	Grab
	PERMIT REQUIREMENT	—	—		—	—	10 DAILY MAX		0	1/30	Grab
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	—	/	/	/	mg/l	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		25 30 DAY AVG	25 30 DAY AVG	50 DAILY MAX		0	2/30	Grab
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	/	/	lbs/day	—	—		mg/l	0	1/30	Grab
	PERMIT REQUIREMENT	REPORT 30 DAY AVG			—	—	1000 DAILY MAX		0	1/30	Grab
pH	SAMPLE MEASUREMENT	—	—	—	/	—	/	SU	0	2/30	Grab
	PERMIT REQUIREMENT	—	—		6.5 30 DAY AVG	—	9.0 DAILY MAX		0	2/30	Grab
DISSOLVED Oxygen	SAMPLE MEASUREMENT	—	—	—	/	—	/	mg/l	0	1/30	Grab
	PERMIT REQUIREMENT	—			3.0 30 DAY AVG		3.0 DAILY MIN		0	1/30	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
David R. Pearce, Environmental Engr V	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS REPORT, 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 state statutes may include fines up to $10,000 and/or imprisonment of between 6 months and 5 years.)	Chuck Wemple	801	970-478	93	02	26
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

No Discharge From 016 During Monitoring Period

SUNNYSIDE COGENERATION ASSOCIATES FACILITY

Carbon County, Utah
Groundwater Discharge Permit Number UGW070002
Surface Water and Discharge Basin Compliance Sampling

HUNTINGDON Chen – Northern

MONITORING LOCATION NUMBER: 016 Borrow Area Pond. UPDES

(Runoff Basin) / Spring / Other:

Sampling Parameters:

Date	Time	Personnel	Weather	Discharge Present (yes/no)	Observations (color, sheen, odor, etc.)	Flow (cfs)	Flow Meas. Method	Basin Water Level (feet)	Field Parameters: Temp (~~F~~C)	pH	SC (umhos)	DO ~~Meter~~ No.	Collection Point	Sample Taken (yes/no)
2/25	[illegible]	GW	PC Cool	NO	Basin is Dry.									
3/06/94	1136	GM	PC WARM	NO	BASIN IS DRY									NO
3/31/94	1100	CW/GMM	WARM, SUNNY	NO	NO WATER IN POND									NO
4/19/94	1556	CW/GM	" "	NO	Dry Basin									NO
4/29/94	1240	CW	rain + hail	No	Minor water puddles in basin									No
5/17/94	1208	CW	cool/cool	No	Basin is Dry									No
5/31/94	1357	RG	rain	No	Basin is Dry									No

* Basin water level measurements are taken from permanent reference point at basin location.
Flow measurement methods: W = Weir, VE = Visual Estimate, CC = Calibrated Container, DF = Debris Flow Rate Estimate

Sunnyside Cogeneration Associates
DOGM UPDES Monitoring Sites
Field Data Sheets

LOCATIONS: BORROW AREA BASIN

OUTFALL NUMBER: O16

Date	Time	Personnel	Weather	Discharge Present	Flow (gpm)	Water Level (feet)	Temp (F)	pH	SC (umhos)	DO mg/l	Sample Taken	Observations
1/13/97	0902	R. NETZ	cold/sunny	NO							NO	DRY BASIN
1/29/97	1406	R. NETZ	Ptly. cloudy	NO							NO	4" SNOW
2/13/97	1125	R. NETZ	cold/sunny	NO							NO	DAMP
2/26/97	920	R. NETZ	Ptly. cloudy	NO							NO	1/2" WATER
3/13/97	1415	R. NETZ	cool/clear	NO							NO	DRY BASIN
3/26/97	1010	R. NETZ	sunny	NO							NO	DRY BASIN
4/15/97	1100	R. NETZ	sunny	NO							NO	DRY BASIN
4/25/97	1350	R. NETZ	sunny	NO							NO	DRY BASIN
5/6/97	930	R. NETZ	sunny	NO							NO	DRY BASIN
5/19/97	1445	R. NETZ	sunny	NO							NO	DRY BASIN
6/10/97	1358	R. NETZ	sunny	NO							NO	DAMP
6/26/97	1334	R. NETZ	sunny	NO							NO	DRY BASIN
7/9/97	1425	R. NETZ	cloudy	NO							NO	DAMP
7/22/97	955	R. NETZ	rainy	NO							NO	DAMP
8/6/97	1100	R. NETZ	rainy	NO							NO	DAMP
8/27/97	1350	R. NETZ	rainy	NO							NO	DAMP
9/10/97	1100	R. NETZ	rainy	NO							NO	DAMP
9/24/97	1350	R. NETZ	rainy	NO							NO	DAMP
10/8/97	930	R. NETZ	sunny	NO							NO	DRY BASIN
10/27/97	1445	R. NETZ	sunny	NO							NO	DRY BASIN
11/5/97	1358	R. NETZ	sunny	NO							NO	DRY BASIN
11/19/97	1334	R. NETZ	sunny	NO							NO	DRY BASIN
12/10/97	0902	R. NETZ	cold/sunny	NO							NO	DRY BASIN
12/22/97	1406	R. NETZ	Ptly. cloudy	NO							NO	DRY BASIN

Sunnyside Cogeneration Associates
DOGM UPDES Monitoring Sites
Field Data Sheets

Done

LOCATIONS: BORROW AREA BASIN
OUTFALL NUMBER: O16

Date	Time	Personnel	Weather	Discharge Present	Flow (gpm)	Water Level (feet)	Temp (F)	pH	SC (umhos)	DO mg/l	Sample Taken	Observations
1/12/96	0902	R. NETZ	cold/sunny	NO							NO	DRY BASIN
1/29/96	1406	R. NETZ	Ptly. cloudy	NO							NO	4" SNOW
2/15/96	0949	R. NETZ	sunny	NO							NO	Muddy basin
2/28/96	1428	R. NETZ	sunny	NO							NO	DRY BASIN
3/15/96	1425	R. NETZ	cold/cloudy	NO							NO	DRY BASIN
3/26/96	1055	R. NETZ	cold/cloudy	NO							NO	DRY BASIN
4/12/96	1445	R. NETZ	cloudy	NO							NO	DRY BASIN
4/23/96	1215	R. NETZ	clear/sunny	NO							NO	DRY BASIN
5/10/96	0940	R. NETZ	clear/sunny	NO							NO	DRY BASIN
5/27/96	1334	R. NETZ	clear/sunny	NO							NO	DRY BASIN
6/11/96	1345	R. NETZ	clear/sunny	NO							NO	DRY BASIN
6/27/96	1010	R. NETZ	clear/sunny	NO							NO	DRY BASIN
7/16/96	1120	R. NETZ	clear/sunny	NO							NO	DRY BASIN
7/29/96	1336	R. NETZ	clear/sunny	NO							NO	DRY BASIN
8/12/96	1015	R. NETZ	clear/sunny	NO							NO	DRY BASIN
8/28/96	1210	R. NETZ	clear/sunny	NO							NO	DRY BASIN
9/13/96	1340	R. NETZ	clear/sunny	NO							NO	DRY BASIN
9/20/96	955	R. NETZ	RAINING	NO							NO	DAMP BASIN
10/16/96	1445	R. NETZ	cloudy	NO							NO	DRY BASIN
10/29/96	1440	R. NETZ	clear/sunny	NO							NO	DAMP BASIN
11/14/96	930	R. NETZ	cloudy-cool	NO							NO	DRY BASIN
11/25/96	1345	R. NETZ	sunny-cold	NO							NO	DAMP BASIN
12/12/96	930	R. NETZ	sunny-cold	NO							NO	DAMP BASIN
12/25/96	935	R. NETZ	cloudy-cool	NO							NO	DAMP BASIN

Carbon County, Utah
UPDES Permit Number UT0024759

OUTFALL NUMBER: 016 BORROW AREA

Date	Time	Personnel	Weather	Discharge Present	Flow (gpm)	Field Parameters: Water Level (feet)	Temp (F)	pH	SC (umhos)	DO mg/L	Sample Taken	Observations (color,sheen,ordor,etc.)
4-17-95	1100	R. MILLER	LT SNOW	NO							NO	MUDDY BOTTOM
4-26-95	1127	R. MILLER	CLOUDY	NO							NO	DRY
5-3-95	0911	R. MILLER	SUNNY	NO							NO	MUDDY BOTTOM
5-15-95	0947	R. MILLER	SUNNY	NO							NO	DRY
6-6-95	0931	R. MILLER	SUNNY	NO							NO	DRY
6-20-95	0927	R. MILLER	SUNNY	NO							NO	DRY
7-7-95	1018	R. MILLER	SUNNY	NO							NO	DRY
7-18-95	0910	R. MILLER	SUNNY	NO							NO	DAMP BOTTOM
8-3-95	0851	R. MILLER	SUNNY	NO							NO	DRY
8-22-95	0826	R. MILLER	PTY CLOUDY	NO							NO	DAMP BOTTOM
9-7-95	1132	R. MILLER	SUNNY	NO							NO	DRY
9-20-95	1547	R. MILLER	SUNNY	NO							NO	DRY
10-6-95	0947	R. MILLER	SUNNY	NO							NO	DRY
10-23-95	1303	R. MILLER	PTY CLOUDY	NO							NO	DRY
11-8-95	0940	R. MILLER	COOL/SUNNY	NO							NO	DRY
11-22-95	1115	R. MILLER	PTY/CLOUDY	NO							NO	DRY
12-7-95	1002	R. MILLER	LT SNOW	NO							NO	DRY
12-18-95	0927	R. MILLER	CLEAR/COLD	NO							NO	DRY

SUNNYSIDE COGENERATION ASSOCIATES FACILITY

UPDES Permit Number UT0024759

Huntingdon Engineering & Environmental

OUTFALL NUMBER: 016 Borrow Area Pond

Date	Time	Personnel	Weather	Discharge Present (yes/no)	Field Parameters: Flow (gpm)	Water Level (feet)	Temp (C)	pH (su)	SC (um)	DO (mg/L)	Sample Taken (yes/no)	Remarks (color, sheen, odor, etc.)
12-19-94	1050	RB6/REG	clear	NO	–	–	–	–	–	–	NO	basin - 3" of snow
1-11-95	1107	RG	cloudy	NO	–	–	–	–	–	–	NO	6" snow in basin
1-24-95	1523	RB6/GM	slight snow	NO	–	–	–	–	–	–	NO	Basin - dry with snow on floor
2-6-95	1433	RB6	sunny, clear	NO	–	–	–	–	–	–	NO	Basin - frozen puddle @ SE corner
2-23-95	1442	RB6/GM	sunny	NO	–	–	–	–	–	–	NO	Basin - muddy floor
3-9-95	1415	GM/RB6	Sunny	NO	–	–	–	–	–	–	NO	basin is dry
3-28-95	0954	GM/RB6	Sunny	NO	–	–	–	–	–	–	NO	basin is dry
4-17-95	1100	RM	Lt. Snow	No	–	–	–	–	–	–	No	mud in basin
4-26-95	1127	RM	P.t. cldy	No	–	–	–	–	–	–	No	dry basin

SUNNYSIDE COGENERATION ASSOCIATES FACILITY

Carbon County, Utah
Groundwater Discharge Permit Number UGW070002
Surface Water and Discharge Basin Compliance Sampling

HUNTINGDON Chen – Northern

MONITORING LOCATION NUMBER: 016 Borrow Area Pond. UPDES

(Runoff Basin) Spring / Other: Sampling Parameters:

Date	Time	Personnel	Weather	Discharge Present (yes/no)	Observations (color, sheen, odor, etc.)	Flow (cfs)	Flow Meas. Method	Basin Water Level (feet)	Field Parameters: Temp (°C)	pH	SC (umhos)	DO Meter No.	Collection Point	Sample Taken (yes/no)
2/25	1443	GM	PC, Cold	NO	Basin is Dry.									NO
3/16/94	1136	GM	PC, warm	NO	Basin is Dry									No.
3/31/94	1100	CW/GMM	Warm, Sunny	NO	No Water in Pond									No
4/19/94	1556	CW/GM	" "	NO	Dry Basin									No
4/29/94	1240	CW	rain & hail	No	Minor water puddles in basin									No
5/17/94	1208	CW	overcast/cool	No	Basin is Dry									No
5/31/94	1357	RG	rain	No	Basin is Dry									No
6/8/94	1442	RG	Warm Clear	NO	Basin is Dry									No
6/23/94	1259	GM	Sunny Hot	NO	Basin is Dry									NO
7/11/94	1538	RG	Clear Hot	NO	Dry									No
7/20/94	1617	GM	Sunny Hot	No	Dry									No
8/9/94	1445	RG	Warm PC	NO	3" of water									NO
8/23	1241	GM	Sunny Hot.	NO	Dry									NO
9/29/94	0930	RBG	Cloudy cool	NO	Basin is dry									NO

* Basin water level measurements are taken from permanent reference point at basin location.
Flow measurement methods: W = Weir, VE = Visual Estimate, CC = Calibrated Container, DF = Debris Flow Rate Estimate

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

NAME SUNNYSIDE COGENERATION ASSOC.

ADDRESS P.O. BOX 10
EAST CARBON UT 84520

FACILITY

LOCATION

ATTN: PLANT MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0028756	001 A

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	05	01	TO	98	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

THE SUM OF ALL OUTFALLS
12345

F - FINAL
MINOR
EFFLUE
*** NO DISCHARGE [X] ***

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) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
HAROLD C. SALLAS GENERAL MANAGER	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.)*	Harold C. Sallas	435-448-7[illegible]	98	6	15
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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 SUNNYSIDE COGENERATION ASSOC.

ADDRESS P.O. BOX 10
EAST CARBON UT 84520

FACILITY

LOCATION

ATTN: PLANT MANAGER

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0028759	SUB A

THE SUM OF ALL OUTFALLS
12345

F - FINAL
MINOR
EFFLUE
*** NO DISCHARGE [X] ***

7-17-98

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	04	01	TO	98	04	30
	(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) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
HAROLD C. SALLAS GENERAL MANAGER	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.)*	Harold C. Sallas	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

NAME SUNNYSIDE COGENERATION ASSOC.

ADDRESS P.O. BOX 10
EAST CARBON UT 84520

FACILITY
LOCATION

ATTN: PLANT MANAGER

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
UT0020759	SUN A

THE SUM OF ALL OUTFALLS
12345

F - FINAL
MINOR
EFFLUE
*** NO DISCHARGE |X| ***

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	03	01	TO	98	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) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) MINIMUM	(54-61) AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
HAROLD C. SALLAS GENERAL MANAGER	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	435	448-4472	98	4	16
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

Form Approved.
OMB No. 2040-0004
Approval expires 11-94

PERMIT NUMBER: UT0024779

DISCHARGE NUMBER: 001 A

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
98	02	01	98	02	28

PARAMETER (12-17)		(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
SOLIDS, TOTAL DISSOLVED 1 0 0	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY		******	******	***		INCS/MONTH	HAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

HAROLD C SALLAS
GENERAL MANAGER

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 888-1176

DATE: YEAR 98, MO 09, DAY 17

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

SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

EPA Form 3320-[illegible] (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

PAGE

Facility Name/Location (if different)
NAME [illegible] CORPORATION ASSOC
ADDRESS [illegible] UT 84537
[illegible]
FACILITY JORDANSIDE CORPORATION ASSOC
LOCATION SALT LAKE CITY, UT 84158-0187
[illegible] ENVIRONMENTAL COORDINATOR

PERMIT NUMBER: UT0020744

DISCHARGE NUMBER: 001 A

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***
NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY	TO	YEAR	MO	DAY
FROM	98	01	01		98	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (12-37)		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)
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******		(26)	******	******	******	***			
00515 100 0	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY						ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
HAROLD C. SALLAS
GENERAL MANAGER
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 888-1176

DATE: YEAR 98, MO 01

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

SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

EPA Form 332[illegible] (Rev. 9-88) Previous editions may be used (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

00032/850124-1125

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-9) UT0024795 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

F - FINAL
THE SUM OF EFFLUENT

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
97	12	01	TO	97	12	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DATA [X] ***

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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)	******	******	******				
	PERMIT REQUIREMENT	REPORT	6000	LBS/DY				*** ****		MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
HAROLD C. SALLAS
GENERAL MANAGER
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 888-4476
DATE: YEAR 97, MO 12, DAY 22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

EPA Form 3320-1 (12-89) Previous editions may be used. (REPLACES EPA FORM [illegible] WHICH MAY NOT BE USED)

00179/930601-1249

PAGE 1 OF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(12-19)

MINOR

Form Approved
OMB No. 2040-0004
Approval Expires: 10-31-94

PERMIT NUMBER	DISCHARGE NUMBER
UT [illegible]	SUB A

F - FINAL
THE SUM OF
EFFLUENT
*** NO DATA [X] ***

NOTE: Read instructions before completing this form

NAME AND ADDRESS (Include City, State and Zip Code of facility if different)
[illegible] WASTE COAL FACILITY
[illegible] 10
SUNNYSIDE, UT 84539

COMPLIANCE WASTE COAL FACILITY
SALT LAKE CITY, UT 84[illegible]

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	11	01	97	11	30

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

ENVIRONMENTAL COORDINATOR

PARAMETER		QUANTITY OR LOADING (4 Card Only) (38-45) AVERAGE	(38-45) 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
[illegible] TOTAL [illegible] LEVED [illegible] 1 1 0	SAMPLE MEASUREMENT			(26)	******	******	******				
	PERMIT REQUIREMENT	REPORT	8000 DAILY MX	LBS/DY	******	******	******	*** ****		ONCE/ MONTH	GRA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME OF PRINCIPAL EXECUTIVE OFFICER

HAROLD C SALLAS
GENERAL MANAGER
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 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and imprisonment of between 6 months and 5 years)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO
801	884-4076	97	11

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

[illegible] TDS FROM ALL OUTFALLS SHALL NOT EXCEED 5 TONS/DAY.

FACILITY NAME ADDRESS (Include Name Location if different)
NAME: SUNNYSIDE WASTE COAL FACILITY
ADDRESS: P.O. BOX 10
SUNNYSIDE UT 84539
LOCATION: SUNNYSIDE WASTE COAL FACILITY
ALT LAKE CITY UT 84112-0837
TITLE: ENVIRONMENTAL COORDINATOR

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

PERMIT NUMBER: UT0022475
DISCHARGE NUMBER: SUM A

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF
EFFLUENT
*** NO DATA [X] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	10	01	97	10	31

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
CHLORINE TOTAL RESIDUAL 50295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(20)	******	******	******				
	PERMIT REQUIREMENT	REPORT	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME AND TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C SALLAS
GENERAL MANAGER
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 USC § 1001 AND 33 USC § 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: Harold C. Sallas

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 97, MO 10, DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SUM OF TOTS FROM ALL OUTFALLS SHALL NOT EXCEED 5 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024795 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR
F - FINAL
THE SUM OF EFFLUENT
*** NO DATA [X] ***

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
97	09	01	TO	97	09	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	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)
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT			(26)	******	******	******				
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	6000 DAILY MX	LBS/DY	******	******	******	*** ****		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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.)

Harold C. Sallas
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 97, MO 10, DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

F - FINAL
THE SUM OF
EFFLUENT
*** NO DATA [X] ***

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	08	01	97	08	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)	******	******	******				
	PERMIT REQUIREMENT	REPORT	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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 888-4476

DATE: YEAR 97, MO 9, DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: SUM A

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	07	01	97	07	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	5000 DAILY MX	LBS/DY	******	******	******	***** *****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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.)*

Harold C. Sallas
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 888-4476
DATE: YEAR 97, MO 8, DAY 18

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0287
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: SUM A

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
97	06	01	97	06	30

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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	*****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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 888-4476

DATE: YEAR 97, MO 7, DAY 21

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DATA [X] ***

QC NB 7-3-97
CM 6/24

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
97	05	01	97	05	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)	******	******	******				
	PERMIT REQUIREMENT	REPORT	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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	888-4476	97	6	18

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE WASTE COAL FACILITY
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE WASTE COAL FACILITY
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: SUM A

MINOR
F - FINAL
THE SUM OF ALL FINAL EFFLUENT

Form Approved. OMB No. 2040-0004 Approval Expires 10-31-94

QC CMM 5/30 OH 5/30

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	04	01	97	04	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DATA [X] ***

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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)	******	******	******				
	PERMIT REQUIREMENT	REPORT	6000 DAILY MX	LBS/DY	******	******	******	*** ****		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HAROLD C. SALLAS
GENERAL MANAGER
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	888-4476	97	5	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

QC SH 4-29-97

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER
(17-19) SUM A DISCHARGE NUMBER

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE |X| ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
97	03	01	97	03	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	****** **** ****			ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: HAROLD C. SALLAS (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: Harold C. Sallas

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 97, MO 4, DAY 14

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0187
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER
MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE |X| ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	02	01	97	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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: HAROLD SALLAS
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: Harold C. Sallas

TELEPHONE: AREA CODE 801 — NUMBER 882-4476

DATE: YEAR 97 — MO 3 — DAY 20

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: SUM A

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
97	01	01	97	01	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	***** *****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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: Harold Sellas (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 466-4436

DATE: YEAR 97 MO 2 DAY 27

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

THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
96	12	01	96	12	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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: Harold SALLAS (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: Harold C Sallas

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 97, MO 1, DAY 15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR NB 1-1-97
F - FINAL
THE SUM OF ALL OUTFALL EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
	96	11	01	TO	96	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
Kevin Crossman
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	888-4476	96	12	17
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0287
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE ☒ ***

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	10	01	95	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	(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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Glen KAAS
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	888-4476	96	11	22

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539
FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
[illegible]: ENVIRONMENTAL COORDINATOR

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

(2-16)	(17-19)
UT0024759	SUM A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	09	01	TO	96	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR
F - FINAL
THE SUM OF [illegible] OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

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)
[illegible], TOTAL [illegible]	SAMPLE MEASUREMENT	******		(25)	******	******	******				
[illegible]	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
[illegible] GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
Kevin Crossman
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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	888-4476	96	10	15
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
[illegible] FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0 87
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR

Cm 4-7

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	08	01	TO	96	08	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Kevin Crossman
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	888-4476	96	9	16
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
96	07	01	TO	96	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MINOR

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

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)
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******		(26)	******	******	******				
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Glen KAAS
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 888-4476

DATE: YEAR 96 — MO 8 — DAY 14

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) PERMIT NUMBER: UT0024759
(17-19) DISCHARGE NUMBER: SUM A

MINOR CM 3113

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	06	01	TO	96	06	30
	(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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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: Kevin Crossman (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: Ken Blum

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 96, MO 7, DAY 10

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
96	05	01	96	05	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)
SOLIDS, TOTAL DISSOLVED	SAMPLE MEASUREMENT	******		(26)	******	******	******				
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	***** *****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
DANNY MATTINGLY
GENERAL MANAGER
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.)*

Danny Mattingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801, NUMBER 888-4476

DATE: YEAR 96, MO 6, DAY 11

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0 87
ATTN: ENVIRONMENTAL COORDINATOR

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

cm 4-7

(2 [illegible]) UT0024 [illegible] — PERMIT NUMBER

(17-19) SUM A — DISCHARGE NUMBER

MINOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE ☒ ***

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
96	04	01	96	04	30

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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

DANNY MATTINGLY
GENERAL MANAGER
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.)*

Danny Mattingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	888-4476	96	5	9

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

THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUNNYSIDE COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-5) UT0024739 — PERMIT NUMBER
(17-19) SUM A — DISCHARGE NUMBER

MINOR
F - FINAL
THE SUM OF ALL EFFLUENT
*** NO DISCHARGE ☒ ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
96	03	01	96	03	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DANNY MATTINGLY
GENERAL MANAGER
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.)*

Danny Mattingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	888-4476	96	4	3

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUN[illegible] COGENERATION ASSOC.
ADDRESS P.O. BOX 1[illegible]
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT0024759 PERMIT NUMBER

(17-19) SUM 8 DISCHARGE NUMBER

MINOR Cm 4-7

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
96	02	01	96	02	29
(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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
Danny Mattingly
General Manager
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.)

Danny Mattingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 801 NUMBER 888-4426

DATE: YEAR 96 MO 3 DAY 5

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME SUN[illegible] COGENERATION ASSOC.
ADDRESS P.O. BOX 10
SUNNYSIDE UT 84539

FACILITY SUNNYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0087
ATTN: ENVIRONMENTAL COORDINATOR

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

(2-16) UT00247[illegible] PERMIT NUMBER
(17-19) SUM 1 DISCHARGE NUMBER

MINOR CM 4-7
F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE [X] ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
96	01	01	96	01	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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(26)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
Danny Mathingly
General Manager
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.)

Danny Mathingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
801	888-4476	96	02	21

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.

MITTEE NAME/ADDRESS (Include
lity Name/Location if different)
NAME SUL[illegible] COGENERATION ASSOC.
ADDRESS P.O. [illegible] 1
SULLYSIDE UT 84539

FACILITY SULLYSIDE COGENERATION ASSOC.
LOCATION SALT LAKE CITY, UT 84158-0097
[illegible]: ENVIRONMENTAL COORDINATOR

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

(2-[illegible]) UT 0024[illegible]
PERMIT NUMBER

(17-19) SU[illegible]
DISCHARGE NUMBER

MINOR CM 4-7

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

F - FINAL
THE SUM OF ALL OUTFALLS
EFFLUENT
*** NO DISCHARGE ☒ ***

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
95	12	01	TO	95	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	(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)
SOLIDS, TOTAL DISSOLVED 70295 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	****** NO	DISCHARGE	(25)	******	******	******				
	PERMIT REQUIREMENT	******	6000 DAILY MX	LBS/DY	******	******	******	**** ****		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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

Danny Mattingly
General Manager

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.)*

Danny Mattingly
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	888-4476	01	23	96
AREA CODE	NUMBER	YEAR	MO	DAY

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

THE SUM OF TDS FROM ALL OUTFALLS SHALL NOT EXCEED 3 TONS/DAY.