

NO. C ACT/007/035-96A-1

Cessation order

To the following Permittee or Operator:

Name SUNNYSIDE COGENERATION ASSOCIATES

Mine SUNNYSIDE REFUSE /SLURRY Surface Underground Other

County CARBON State UTAH Telephone _____

Mailing Address 1 POWER PLANT RD, SUNNYSIDE UT 84539 (PO BOX 10 EAST CARBON UT 84520)

State Permit No. ACT/007/035

Ownership Category State Federal Fee Mixed

Date of inspection OCTOBER 24, 19 96

Time of inspection N/A a.m. p.m. to _____ a.m. p.m.

Operator Name (other than Permittee) _____

Mailing Address _____

Under authority of the Utah Coal Mining & Reclamation Act, Section 40-10-1 et seq., *Utah Code Annotated*, 1953, the undersigned authorized representative of the Division of Oil, Gas & Mining has conducted an inspection of above mine on above date and has found that a Cessation Order must be issued with respect to each of the conditions, practices or violations listed in the attachment(s). This order constitutes a separate Cessation Order for each condition, practice or violation listed.

In accordance with Section 40-10-22, *Utah Code Annotated*, you are ordered to **cease immediately** the operations described in the attachment(s) and to perform the affirmative obligations described in the attachment(s) within the designated time for abatement. Reclamation operations not directly the subject of this order shall continue while this order is in effect. You are responsible for doing all work in a safe and workmanlike manner.

The undersigned representative finds that **this order does** **does not** **require cessation of mining** expressly or in practical effect. For this purpose, "mining" means extracting coal from the earth or a waste pile, and transporting it within or from the mine site.

This order shall remain in effect until it expires as provided on reverse side of this form, or is modified, terminated or vacated by written notice of an authorized representative of the Division of Oil, Gas & Mining.

CERTIFIED RETURN P 074 977 691

Date of service/ mailing October 29, 1996 Time of service/ mailing 9:00 a.m. p.m.

CRAIG WENTZ
 Permittee/Operator representative

RESIDENT AGENT
 Title

Signature _____

Signature _____

[Signature]
 Division of Oil, Gas & Mining representative

Director
 Title

Signature _____

Identification Number _____

SEE REVERSE SIDE

WHITE-DOG M YELLOW-OPERATOR PINK-OSM GOLDENROD-NOV FILE

CC: **BRIAN BURNETT, PLANT MANAGER**
BILL MALENCIK, (SCA)



CESSATION ORDER NO. C ACT/007/035-96A-1

Violation No. 1 of 1

Nature of condition, practice or violation

**FAILURE TO PROVIDE BOND IN THE AMOUNT OF \$2,094,000.00 AS REQUIRED UNDER
DIVISION ORDER 96A.**

Provisions of act, regulations or permit violated

R645-301-830.400

R645-301-812.700

R645-301-840.520

Check appropriate box

- Condition, practice or violation is creating an imminent danger to health or safety of the public.
- Permittee/Operator is/has been conducting mining activities without a permit.
- Condition, practice or violation is causing or can reasonably be expected to cause significant, imminent environmental harm to land, air or water resources.
- Permittee or Operator has failed to abate Violation(s) No. _____ included in Notice of Violation No. N_____ within time for abatement originally fixed or subsequently extended.

*** ADMINISTRATIVE CESSATION ORDER**

Operation(s) to be ceased immediately

**CEASE COAL EXTRACTION AND COMPLY WITH THE PROVISIONS OF R645-301-541.100 THROUGH
R645-301-541.460 AS APPLICABLE AND IMMEDIATLY BEGIN TO CONDUCT RECLAMATION
OPERATIONS IN ACCORDANCE WITH THE RECLAMTION PLAN MINING OPERATIONS WILL NOT
RESUME UNTIL THE DIVISION HAS DETERMINED THAT AN ACCEPTABLE BOND HAS BEEN POSTED.**

Affirmative obligation(s) and abatement time (if applicable)

Postmark of origin

TOTAL Postage and Postage Due

Date, and Address of Delivery

Return Receipt showing to whom and Date Delivered

Return Receipt showing Restricted Delivery Fee

Special Delivery Fee

Certified Fee

Postage

S

CRAIG WENTZ RESIDENT AGENT
175 S WEST TEMPLE STE 510
SALT LAKE CITY UT 84101



PS Form 3811, Mar. 1988 U.S.G.P.O. 1988-212-885

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
CRAIG WENTZ RESIDENT AGENT
175 S WEST TEMPLE STE 510
SALT LAKE CITY UT 84101

4. Article Number
P 074 977 691

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee
X

6. Signature - Agent
X *[Signature]*

7. Date of Delivery
10-30-96

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 U.S.G.P.O. 1988-212-885 DOMESTIC RETURN RECEIPT

RECEIPT FOR CERTIFIED MAIL
P 074 977 691
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE USE, \$300

RETURN TO

Print Sender's name, address and ZIP Code in the space below.

DIVISION OF OIL GAS & MINING
1594 W NORTH TEMPLE STE 1210
BOX 145801
SALT LAKE CITY UT 84114-5801



1. If you want this receipt postmarked, stick the approved stamp to the right of the return address on the receipt attached and present the return as part of the service window or hand it to your local carrier (no extra charge).
 2. If you do not want this receipt postmarked, stick the approved stamp to the right of the return address on the article, detach and return the receipt, and mail the article.
 3. If you want a return receipt with the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends of service pre-adhesive or stick it to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.
 4. If you want certified registered to the addressee, or to an authorized agent of the addressee, and press RETURN RECEIPT DELIVERED on the front of the article.
 5. Extra fees for the services mentioned in the foregoing sections on the front of the receipt. If return receipt is requested, check the applicable boxes in Item 1 of Form 3811.
 6. Save this receipt and present it if you make inquiry.
- U.S.G.P.O. 1988-212-135