0009

Certificate of Insurance

Copy to #4
Original to fireproof file
Copy to Permit Binders
S20 : PFO

TO: State of Utah
Address: Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
P.O. Box 145801
Salt Lake City, UT 84114-5801

Date: October 30, 1996
Re: Permit No. ACT/007/038
Willow Creek Mine
Fax to:
Ben Grimes
801-637-2247

This is to certify that the policies designated below are in force on the date borne by this Certificate.

NAME OF INSURED: Cyprus Amax Minerals Company et al including Cyprus Plateau Mining Corp.
Address: 9100 East Mineral Circle
Englewood, CO 80112

TYPE OF INSURANCE	POLICY #	POLICY PERIOD	POLICY LIMITS / VALUES
A) Commercial General Liability -Claims Made Retro Date 4/1/94	RMGL1437605	07/01/96 - 07/01/97	$ 6,000,000 General Aggregate $ 6,000,000 Products/Completed Operations Aggregate $ 1,000,000 Personal and Advertising Injury $ 1,000,000 Each Occurrence $ 1,000,000 Fire Damage (Any One Fire) $ 10,000 Medical Expense (Any One Person)
B) Auto Liability	RMCA1438600	07/01/96 - 07/01/97	$ 2,000,000 CSL Each Occurrence
C) Workers' Compensation Employers' Liability Other States	OC-01611904	09/01/96 - 09/01/97	WC: Statutory EL: $1,000,000 Each Accident $1,000,000 Disease - Policy Limit $1,000,000 Disease - Each Employee
D) Workers' Compensation Employers' Liability Alaska	OC-01690603	09/01/96 - 09/01/97	WC: Statutory EL: $1,000,000 Each Accident $1,000,000 Disease - Policy Limit $1,000,000 Disease - Each Employee
E) Excess Workers' Compensation	EX351	09/01/96 - 09/01/97	Statutory Excess of a Self Insured Retention: $1,000,000 any one occurrence

Commercial General Liability includes X, C, U Coverage.

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DIV. OF OIL, GAS & MINING

This certificate of insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by those policy(ies) numbered above and issued by companies listed below.

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company XXXXXXXXXX to mail 45 days written notice to the above named certificate holder, XXXXXXXXX

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SEVERAL LIABILITY NOTICE (LSW 1001)

The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations.

INSURANCE COMPANY(IES) ISSUING COVERAGE:

A)B) National Union Fire Insurance Company of Pittsburgh, PA
C)D)E) Old Republic Insurance Co.

AON

Aon Risk Services
Natural Resources Group

Aon Risk Services of Texas, Inc.
2000 Bering Drive, Suite 900 • Houston, Texas 77057-3790
tel: (713) 430-6000 • (800) 231-3252 • fax: (713) 430-6590

By Stephen D McKenna

ANR-023L (Rev. 7/95)
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