0043

INCOMING
C0070006
cc: C0070004
C0070038 ✓

Aon Risk Services

1000 Milwaukee Ave. Glenview, Illinois 60025

FAX TRANSMISSION		
TO: Risk Manager	FROM: Aon Client Services	
RE: RAG	PHONE: 866-283-7122	
FAX NO.: 801-359-3940	FAX NO.: 847-953-5390	
SUBJECT: Certificate(s) of Insurance	DATE: 12/31/03	No. of Pages: 4 (including this page)

Attached, please find the Certificate(s) of Insurance you have requested. Should you have any questions, please feel free to contact the ACS Department at 866-283-7122. Thank you.

Aon Client Services
Aon Risk Services, Inc.

DEC 3 1 2003
DIV. OF OIL, GAS & MINING

Certificate of Insurance

Incoming
C/007/006

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

Re: Star Point #1 & #2 Mine
permit No. ACT/007/006

Assured: RAG American Coal Holding Inc. et al
999 Corporate Blvd.
Linthicum Heights, MD 21090

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

Type of Insurance	Policy No.	Policy Period	Limits/Values	
Commercial General Liability	ICH GL 137-04	01/01/04 – 01/01/05	$ 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)
Insurance Company(ies)	Insurance Corporation of Hannover			
Automobile Liability	AS2-641-004364-114	01/01/04 – 01/01/05	$ 1,000,000	CSL Each Occurrence
Insurance Company(ies)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 – 06/30/04	WC Statutory EL:	
			$1,000,000	Each Accident
			$1,000,000	Disease – Policy Limit
			$1,000,000	Disease – Each Limit
Insurance Company(ies)	Old Republic Insurance Company			
Excess Liability	ICH CU 231-04	01/01/04 – 01/01/05	$1,000,000	Each Loss and in the aggregate as per Form, excess scheduled underlying.
Insurance Company(ies)	Insurance Corporation of Hannover			

General Liability and Automobile Liability include a blanket additional insured where required by written contract, but subject to the policy terms and conditions.

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 cosubscribing insurer who for any reason does not satisfy all or part of its obligations.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy(ies) shown herein. Should any of the above described policies be cancelled before the expiration date thereof, this agency, on behalf of the issuing company(ies), will endeavor to mail mail 45 days written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company(ies) or this agency.

Aon Risk Services of Illinois, Inc.

Date: December 31, 2003 **By:** [signature]

RECEIVED

DEC 3 1 2003

Certificate of Insurance

Incoming
C/007/038

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

Re: Willowcreek Mine
permit no. ACT/007/038

Assured: RAG American Coal Holding, Inc. et al
999 Corporate Blvd.
Linthicum Heights, MD 21090

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

Type of Insurance	Policy No.	Policy Period	Policy Limits/Values	
Commercial General Liability	ICH GL 137-04	01/01/04 – 01/01/05	$ 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)
Insurance Company(ies)	Insurance Corporation of Hannover			
Automobile Liability	AS2-641-004364-114	01/01/04 – 01/01/05	$ 1,000,000	CSL Each Occurrence
Insurance Company(ies)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 – 06/30/04	WC Statutory EL:	
			$1,000,000	Each Accident
			$1,000,000	Disease – Policy Limit
			$1,000,000	Disease – Each Limit
Insurance Company(ies)	Old Republic Insurance Company			
Excess Liability	ICH CU 231-04	01/01/04 – 01/01/05	$1,000,000 Each Loss and in the aggregate as per Form, excess scheduled underlying.	
Insurance Company(ies)	Insurance Corporation of Hannover			

General Liability and Automobile Liability include a blanket additional insured where required by written contract, but subject to the policy terms and conditions.

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 insureds are not responsible for the subscription of any cosubscribing insurer who for any reason does not satisfy all or part of its obligations.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy(ies) shown herein. Should any of the above described policies be cancelled before the expiration date thereof, this agency, on behalf of the issuing company(ies), will endeavor to mail thirty 45 days written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company(ies) or this agency.

Aon Risk Services of Illinois, Inc.

Date: December 31, 2003 **By:** [signature]

DEC 3 1 2003

DIV. OF OIL, GAS & MINING

Certificate of Insurance

Incoming
C/007/004

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

Re: Castle Gate Mines
Permit No. ACT/007/004, Folder No. 4
Carbon county, Utah

Assured: RAG American Coal Holding, Inc. et al
including Castlegate Holding Company
999 Corporate Blvd.
Linthicum Heights, MD 21090

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

Type of Insurance	Policy No.	Policy Period	Policy Limits/Values	
Commercial General Liability	ICH GL 137-04	01/01/04 – 01/01/05	$ 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)
Insurance Company(ies)	Insurance Corporation of Hannover			
Automobile Liability	AS2-641-004364-114	01/01/04 – 01/01/05	$ 1,000,000	CSL Each Occurrence
Insurance Company(ies)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 – 06/30/04	WC Statutory EL:	
			$1,000,000	Each Accident
			$1,000,000	Disease – Policy Limit
			$1,000,000	Disease – Each Limit
Insurance Company(ies)	Old Republic Insurance Company			
Excess Liability	ICH CU 231-04	01/01/04 – 01/01/05	$1,000,000 Each Loss and in the aggregate as per Form, excess scheduled underlying.	
Insurance Company(ies)	Insurance Corporation of Hannover			

Commercial General Liability includes X,C,U Coverage

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.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy(ies) shown hereon. Should any of the above described policies be cancelled before the expiration date thereof, this agency, on behalf of the issuing company(ies), will endeavor to mail half 45 days written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company(ies) or this agency.

Aon Risk Services of Illinois, Inc.

Date: December 31, 2003 By: [signature]

DEC 31 2003
TOTAL P.04