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Norman H. Bangerter
Governor

Dee C. Hansen
Executive Director

Dianne R. Nielson, Ph.D.
Division Director

State of Utah

DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING

355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203
801-538-5340

April 6, 1993

Mr. E.M. Gerick
Vice President of Operations
Western States Minerals
Suite 130
250 South Rock Blvd.
Reno, Nevada 89502

Dear Mr. Gerick:

Re: Certificate of Insurance, Western States Minerals, J.B. King Mine,
ACT/015/002, Folder #2, Emery County, Utah

The Division received the updated Certificate of Insurance for the J.B. King Mine on April 5, 1993. There are two items on the Certificate that must be corrected: 1) The cancellation clause must be revised and 2) The description of operations must include the mine name and permit number. Attached please find a Certificate of Insurance with these corrections highlighted.

Thank you for your cooperation. Please submit the revised Certificate of Insurance by May 28, 1993. If you have any questions, please call me.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read 'Pamela Grubaugh-Littig'.

Pamela Grubaugh-Littig
Permit Supervisor

Enclosure

CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

04/02/93

King

PRODUCER
 INSURANCE AGENTS GROUP INC
 4940 VIKING DRIVE, #325
 EDINA, MINNESOTA
 55435-5307

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 POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

INSURED
 WESTERN STATES MINERALS
 BRUCE VERMILYEA
 4975 VAN GORDON STREET
 WHEAT RIDGE, CO 80033

- COMPANY LETTER **A** RELIANCE INSURANCE COMPANY
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

COVERAGES
 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.

CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. OWNER'S & CONTRACTOR'S PROT.	SJ1652592	04/01/93	04/01/94	GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS-COMP/OP AGGR. \$ 1,000,000
					PERSONAL & ADV. INJURY \$ 1,000,000
					EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED. EXPENSE (Any one person) \$ 5,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY	SH1650544	04/01/93	04/01/94	COMBINED SINGLE LIMIT \$ 1,000,000
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE \$
A	EXCESS LIABILITY <input checked="" type="checkbox"/> UMBRELLA FORM OTHER THAN UMBRELLA FORM	SX 1653692	04/01/93	04/01/94	EACH OCCURENCE \$ 4,000,000
					AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS
					EACH ACCIDENT \$
					DISEASE-POLICY LIMIT \$
					DISEASE-EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 ENTIRE ADDRESS FOR CERTIFICATE HOLDER: STATE OF UTAH, DEPARTMENT OF NATURAL RESOURCES, DIVISION OF OIL, GAS & MINING, 355 WEST NORTH TEMPLE, 3 TRIAD CENTER SUITE 350, SALT LAKE CITY, UT 84180-1203, ATTENTION: PAMELA GRUBAUGH-LITTIG.
This must indicate J.B King Mine ACT/015/004

CERTIFICATE HOLDER
Department of Natural Resources
Division of Oil, Gas & Mining
 STATE OF UTAH
 355 WEST NORTH TEMPLE
 3 TRIAD CENTER, SUITE 350
 SALT LAKE CITY, UT 84180-1203
 Attn: PAMELA GRUBAUGH-LITTIG

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~EXPIRE~~ *changed and/or* MAIL ~~30~~ ⁴⁵ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO GIVE SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
[Signature]