

# CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

PRODUCER **0003**  
**Marsh & McLennan, Incorporated**  
 P.O. Box 75055  
 Los Angeles CA 90075

10/23/90  
 File # 71015/1027  
 #4

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.

OCT 26 1990

## COMPANIES AFFORDING COVERAGE

DIVISION OF OIL, GAS & MINING **A**

Transportation Insurance Company

INSURED  
**CalMat Co.**  
 Hidden Valley Coal Company  
 P. O. Box 2950  
 Terminal Annex  
 Los Angeles CA 90051

- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

### COVERAGES

THIS IS TO CERTIFY THAT 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. THE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID LOSSES.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
<b>A</b>	<b>GENERAL LIABILITY</b>	GL 00 741 3310	7/1/90	7/1/91	GENERAL AGGREGATE *	\$ 2,000.
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OPS AGGREGATE	\$ 1,000.
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE				PERSONAL & ADVERTISING INJURY	\$ 1,000.
	<input checked="" type="checkbox"/> OWNER'S & CONTRACTORS PROTECTIVE				EACH OCCURRENCE	\$ 1,000.
					FIRE DAMAGE (ANY ONE FIRE)	\$ 1,000.
					MEDICAL EXPENSE (ANY ONE PERSON)	\$ 10.
<b>A</b>	<b>AUTOMOBILE LIABILITY</b>	BUA 80 741 3308	7/1/90	7/1/91	CSL	\$ 1,000.
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (PER PERSON)	\$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (PER ACCIDENT)	\$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input checked="" type="checkbox"/> HIRED AUTOS					
	<input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY					
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE	\$
	<b>WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY</b>	See Attached			STATUTORY	
					\$ (EACH ACCIDENT)	
					\$ (DISEASE-POLICY LIMIT)	
					\$ (DISEASE-EACH EMPLOYEE)	
	<b>OTHER</b>				*Per Location/Project	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS  
 REFERENCE: ACRE CONSISTING OF AN INACTIVE COAL MINE - SECTION 18 and THE W SECTION 17, T235, B6E, S.L. B & M.

### CERTIFICATE HOLDER

State of Utah  
 Department of Natural Resources  
 Division of Oil, Gas and Mining  
 355 W. North Temple  
 3 Triad Center, Suite 350  
 Salt Lake City UT 84180-1203

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE **Marsh & McLennan, Incorporated**  
*Susan D. Hedges*