0027

Document Information Form

Mine Number: C/015/018

File Name: Incoming

To: DOGM

From:

Person N/A

Company N/A

Date Sent: N/A

Explanation:

Discharge Monitoring Report

cc:

File in:
C/ 015 , 018 , Incoming
Refer to:
- ☐ **Confidential**
- ☐ **Shelf**
- ☐ **Expandable**

Date _____ For additional information

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME UTAH POWER AND LIGHT CO (WILBE

ADDRESS P O BOX 899 M&E ANNEX I

ORANGEVILLE UT 84573

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2000-0015

(2-16) UT0022896 — PERMIT NUMBER

(17-19) 004 A — DISCHARGE NUMBER

F = FINAL LIMITS

WILBERG MINE DISCH POINT 004

Miller cy MCT/013/018 Breakout

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
				83	09	30

NO DISCHARGE As per Phone Conversation w/ C. Shingleton 1-18-84

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME Utah Power & Light Co. (Deer Creek)

ADDRESS P.O. Box 899

Salt Lake City

UT 84110

FACILITY DEER CREEK MINE

LOCATION SEDIMENT POND

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 158 - R0073

(2-16) UT0023604 — PERMIT NUMBER

(17-19) 001 — DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	83	7	1	TO	83	9	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT			NO DISCHARGE							
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										

File in:
- ☐ Confidential
- ☐ Shelf
- ☐ Expandable

Refer to Record No 0027 Date

In C/ 015, 018, Incoming

For additional information

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

ean L. Bryner/Vice President

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

E. Shingleton

TELEPHONE

DATE

Facility Name/Location if different)

NAME Utah Power & Light Co. (Deer Creek)
ADDRESS P.O. Box 899
Salt Lake City
UT 84110
FACILITY DEER CREEK MINE
LOCATION SEDIMENT POND

DISCHARGE MONITORING REPORT (DMR)

OMB No. 158 - R0075

ACT/015/018(a)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
UT0023604	001

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	83	7	1	TO	83	9	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT			NO DISCHARGE							
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Dean L. Bryner/Vice President

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*

L. E. Slingleton

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
801	535-4225	83	10	19
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*