0018

One Utah Center, Suite 2000
Salt Lake City, Utah 84140-0020
(801) 220-4616 • FAX (801) 220-4725

INTERWEST
MINING COMPANY

A Subsidiary of PacifiCorp

February 24, 1995

RECEIVED
FEB 24 1995
DIV OF OIL, GAS & MINING

HAND DELIVERED

Ms. Pamela Grubaugh-Littig
Permit Supervisor
Division of Oil, Gas & Mining
Utah Department of Natural Resources
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203

Originals to fireproff of each Certificate to appropriate mine file
Copies to #4 mine file
PAM

RE: Certificates of Liability Insurance (ACORD Form), Policy No. XO296A1A95, Policy Period from 2-24-95 to 2-24-96; Des-Bee-Dove Mine ACT/015/017, Deer Creek Mine ACT/015/018, Cottonwood Mine ACT/015/019 and the Trail Mountain Mine ACT/015/009, Folder #2, Emery County, Utah

Dear Pam:

Enclosed are the original certificates of liability insurance for the referenced coal mine operations for the policy period 2-24-95 to 2-24-96. Copies of these same certificates are on file for each mine site located at our Huntington field office.

The enclosed certificates (on the DOGM form Exhibit "C", the ACORD and AEGIS forms) for each mine are replacement pages for Exhibit "C" in the Reclamation Agreements of each mine.

Should you have any questions, please feel free to contact me at 801-220-4612.

Sincerely,

Scott M. Child
Property Management Administrator

Enclosures

SMC11/UDOGM95.001

cc: D.W. Jense - OUC 2000 w/o copy encl.
Blake Webster - OUC 2000 w/copy encl.
Val Payne - Huntington Field Office w/copy encl.

Form B (Additional Insured)

Certificate Number: 30718

ASSOCIATED ELECTRIC & GAS INSURANCE SERVICES LIMITED
Hamilton, Bermuda

CERTIFICATE OF INSURANCE

(Excess Liability)

This Certificate is furnished to the Certificate Holder named below as a matter of information only. Neither this Certificate nor the issuance hereof modifies the policy of insurance identified below (the "Policy") or modifies the Policy in any manner. The Policy terms are solely as stated in the Policy or in any endorsement thereto. Any amendment, change or extension of the Policy can only be effected by a specific endorsement issued by the Company and attached to the Policy.

The undersigned hereby certifies that the Policy has been issued by Associated Electric & Gas Insurance Services Limited (the "Company") to the Named Insured identified below for the coverage described and for the policy period specified.

Notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this Certificate may be issued or to which it may pertain, the insurance afforded by the Policy is subject to all of the terms of the Policy.

NAME OF INSURED: PacifiCorp dba Pacific Power & Light and dba Utah Power & Light

PRINCIPAL ADDRESS: 920 S.W. 6th, Portland, OR 97204

POLICY NUMBER: XO296A1A95	POLICY PERIOD:	From:	2-24-95
		To:	2-24-96

RETROACTIVE DATE: December 24, 1986

DESCRIPTION OF COVERAGE: Claims-First-Made Excess Liability Policy covering claims for Bodily Injury, Property Damage and Personal Injury arising from the operations described below.

LIMIT OF LIABILITY: $35,000,000 per occurrence and in the aggregate, where applicable.

ADDITIONAL INSURED: The Certificate Holder is an additional Insured under the Policy but only (i) to such extent and for such Limits of Liability (subject always to the terms and Limits of Liability of the Policy) as the Named Insured has agreed to provide insurance for the Certificate Holder under the following contract:

Cottonwood/Wilberg ACT/015/019

and (ii) with respect to the following operations:

Damage to explosions is covered. Insurance Company will notify State of Utah of any changes or cancellation.

Should the Policy be cancelled, assigned or changed in a manner that is materially adverse to the Insured(s) under the Policy, the undersigned will ~~endeavor to~~ give 45 days advance written notice thereof to the Certificate Holder, ~~but failure to give such notice will impose no obligation or liability of any kind upon the Company, the undersigned or any agent or representative of either~~.

DATE: 2-24-95

ISSUED TO: The State of Utah, Dept. of Natural Resources, Division of Oil and Gas ("Certificate Holder")

ADDRESS: 356 West North Temple
Salt Lake City, UT 84180-1203

AEGIS INSURANCE SERVICES, INC.

BY: Sandra L. [illegible]
Attorney-in-Fact, New Jersey

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db\CERT\CF-B1-PA (18)
9001 (8/87)

Copies: White-Certificate Holder; Canary-Aegis Insurance Services, Inc.; Pink-Insured; Goldenrod-Broker

CERTIFICATE OF LIABILITY INSURANCE
Issued to:
State of Utah
Department of Natural Resources
Division of Oil, Gas and Mining

THIS IS TO CERTIFY THAT:

Associated Electric & Gas Insurance Services Limited
(Name of Insurance Company)

ARGUS Insurance Building, 12 Wesley St. P.O. Box BM 1064, Hamilton, Bermuda
(Home Office Address of Insurance Company)

HAS ISSUED TO

PacifiCorp (Successor in interest to Utah Power & Light)
(Name of Permittee)

COTTONWOOD/WILBERG	ACT/015/019
(Mine Name)	(Permit Number)

CERTIFICATE OF INSURANCE:

X0296A1A95	2-24-95/2-24-96
(Policy Number)	(Effective Date)

UNDER THE FOLLOWING TERMS AND CONDITIONS:

Per R645-301-890 Terms and Conditions for Liability Insurance:

A. The DIVISION Shall require the PERMITTEE to submit as part of its permit application a certificate issued by an insurance company authorized to do business in the State of Utah certifying that the applicant has a public liability insurance policy in force for the surface coal mining and reclamation operations for which the permit is sought. Such policy shall provide for personal injury and property damage protection in an amount adequate to compensate any persons injury or property damage as a result of the surface coal mining and reclamation operations, including the use of explosives and who are entitled to compensation under the applicable provisions of state law. Minimum insurance coverage for bodily injury and property damage shall be $300,000 for each occurrence and $500,000 aggregate.

B. The policy shall be maintained in full force during the life of the permit or any renewal thereof, including the liability period necessary to complete all reclamation operations under this chapter.

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C. The policy shall include a rider requiring that the insurer notify the Division whenever substantive changes are made in the policy including any termination or failure to renew.

IN ACCORDANCE WITH THE ABOVE TERMS AND CONDITIONS, and the Utah Code Annotated 40-10-1 et seq., the Insurance Company hereby attests to the fact that coverage for said Permit Application is in accordance with the requirements of the State of Utah and agrees to notify the Division of Oil, Gas and Mining in writing of any substantive changes, including cancellation, failure to renew, or other material change. No change shall be effective until at least thirty (30) days after such notice is received by the Division. Any change unauthorized by the Division is considered breach of the RECLAMATION AGREEMENT and the Division may pursue remedies thereunder.

UNDERWRITING AGENT:

Sandra A. Johnson
(Agent's Name)

(201) 915-7216
(Phone)

AEGIS Insurance Services, Inc.
(Company Agent's Name)

Harborside Financial Center, 700 Plaza II
(Mailing Address)

Jersey City, New Jersey 07311-3994
(City, State, Zip Code)

The undersigned affirms that the above information is true and complete to the best of his/her knowledge and belief, and that he or she is an authorized representative of the above-named insurance company. (An Affidavit of Qualification must be completed and attached to this form for each authorized agent or officer.)

2/22/95 Sandra A. Johnson
(Date, Signature and Title of Authorized Agent of Insurance Company)

Signed and sworn before me by Sandra A. Johnson

this 22nd day of February, 1995

Lois Anne Dalley
(Signature)

LOIS ANNE DALLEY
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Apr. 27, 1999

My commission Expires: My Commission Expires Apr. 27, 1999
(Date)

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ACORD. # CERTIFICATE OF INSURANCE

8492 DDB

ISSUE DATE (MM/DD/YY) 2/21/95

PRODUCER

Marsh & McLennan, Incorporated
2700 U.S. Bank Tower
111 S.W. 5th Avenue
Portland, OR 97204
Darryl W. Hill

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

COMPANY LETTER	
A	AEGIS INSURANCE SERVICES INC.
B	
C	
D	
E	

INSURED

PacifiCorp dba Pacific Power
& Light and dba Utah Power
& Light
920 SW Sixth
Portland, OR 97204

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	XO296A1A95	2/24/95	2/24/96	GENERAL AGGREGATE	$ 1000000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG.	$
	X CLAIMS MADE ☐ OCCUR.				PERSONAL & ADV. INJURY	$
	☐ OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE	$ 1000000
					FIRE DAMAGE (Any one fire)	$
					MED. EXPENSE (Any one person)	$
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	$
	☐ ANY AUTO					
	☐ ALL OWNED AUTOS				BODILY INJURY (Per person)	$
	☐ SCHEDULED AUTOS					
	☐ HIRED AUTOS				BODILY INJURY (Per accident)	$
	☐ NON-OWNED AUTOS					
	☐ GARAGE LIABILITY				PROPERTY DAMAGE	$
A	EXCESS LIABILITY	XO296A1A95	2/24/95	2/24/96	EACH OCCURRENCE	$ 35000000
	☐ UMBRELLA FORM	Per AEGIS Certificate			AGGREGATE	$ 35000000
	X OTHER THAN UMBRELLA FORM	No. 30718 attached				
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS	
					EACH ACCIDENT	$
					DISEASE-POLICY LIMIT	$
					DISEASE-EACH EMPLOYEE	$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

(SEE REVERSE AND/OR ATTACHED)

CERTIFICATE HOLDER

State of Utah, Dept. of
Natural Resources, Division of
Oil & Gas
356 W North Temple
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 XXXXXXXX MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

AUTHORIZED REPRESENTATIVE

Sandra H. Johnson

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