

RECEIVED
MAR 15 1995
 DIV OF OIL, GAS & MINING

UNITED STATES DEPARTMENT OF THE INTERIOR
 Office of Surface Mining
 Reclamation and Enforcement
TEN-DAY NOTICE

Originating Office: Office of Surface Mining
505 Marquette Suite 1200
Albuquerque NM 87109
 Telephone Number: 505 966 1486

3-15-95
 JWC
 JLB
 LPB
 VB
 PGL
 atg: File

Number: X-75-020-190-01 TV 1

Ten-Day Notice to the State of Utah

You are notified that, as a result of Federal Inspection (RSI) (e.g. a federal inspection, citizen information, etc.) the Secretary has reason to believe that the person described below is in violation of the Act or a permit condition required by the Act. If the State Regulatory Authority fails within ten days after receipt of this notice to take appropriate action to cause the violation(s) described herein to be corrected, or to show cause for such failure and transmit notice of your action to the Secretary through the originating office designated above, then a Federal inspection of the surface coal mining operation at which the alleged violation(s) is occurring will be conducted and appropriate enforcement action as required by Section 521(a)(1) of the Act will be taken.

Permittee: <u>Genwal Coal Company</u> <small>(Or Operator if No Permit)</small>	County: <u>Emery</u>	<input type="checkbox"/> Surface
Mailing Address: <u>PO Box 1201 Emery, Utah</u>		<input checked="" type="checkbox"/> Underground
Permit Number: <u>Act 1015/032</u>	Mine Name: <u>Crandall Camp</u>	<input type="checkbox"/> Other

NATURE OF VIOLATION AND LOCATION: Failure to design sediment control to meet effluent limitations
Structure referred to in permit package as SAE#2

Section of State Law, Regulation or Permit RC43-301
 Condition believed to have been violated: 742.110

NATURE OF VIOLATION AND LOCATION: _____

Section of State Law, Regulation or Permit
 Condition believed to have been violated:

NATURE OF VIOLATION AND LOCATION: _____

Section of State Law, Regulation or Permit
 Condition believed to have been violated:

Remarks or Recommendations: _____

Certified Return Receipt P 079 749 441

Date of Notice: _____	Signature of Authorized Rep.: <u>Thomas W Wright</u>
	Print Name and ID: <u>Thomas W Wright 190</u>