



Canyon Fuel Company
SUFCO Mine
397 South 800 West
Salina, UT 84654
(435) 286-4880 Fax (435) 286-4499

March 17, 2004

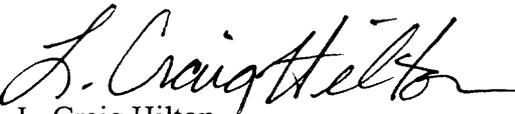
Ms. Kelly Coleman
Department of Environmental Quality
Division of Water Quality
288 North 1460 West
P. O. Box 144870
Salt Lake City, UT 84114-4870

Jacobs
2/04/0002

Dear Ms. Coleman:

Enclosed are the February 2004, Discharge Monitoring Reports (DMR's) for the SUFCO Mine facility, permit number UT-0022918. Discharge point 001A had no outflow during the month. The outflow from points 002A and 003A had no exceedances for the month.

Sincerely,
CANYON FUEL COMPANY, LLC
SUFCO Mine


L. Craig Hilton
Technical Services Manager

LCH:kb

Encl.: February 2004 DMR's

cc: Mary Ann Wright, DOGM
Alice Carlton, USFS Fishlake
Chris Hansen, Skyline
Compliance Officer, U.S. EPA, Denver
EPA Test Procedures & Water Monitoring File

RECEIVED
MAR 25 2004
DIV. OF OIL, GAS & MINING
msw
3/25/04

PERMITEE NAME/ADDRESS

(Include Facility Name/Location if different)

NAME Canyon Fuel Co., LLC
 ADDRESS SUFCO Mine
 397 South 800 West
 Salina, UT 84654
 FACILITY SUFCO Mine
 LOCATION SALINA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UT0022918
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MAJOR

F - FINAL

Minesite

8" PIPE DISCHARGING MINE WATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 2	0 1	0 4	0 2	2 9

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: KENNETH E. MAY, MINE MANAGER

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUALITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS 0	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS				
FLOW RATE	SAMPLE MEASUREMENT			(03)	*****	*****	*****					
00056 1 0 0	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		TWICE/MONTH	MEASRD	
EFFLUENT GROSS VALUE												
PH	SAMPLE MEASUREMENT	*****	*****					(12)				
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.5	*****	9.0	SU		TWICE/MONTH	GRAB	
EFFLUENT GROSS VALUE					DAILY M N		DAILY MX					
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)				
00530 P 0 0	PERMIT REQUIREMENT	*****	*****	****	25	*****	35	*****	70		TWICE/MONTH	GRAB
SEE COMMENTS BELOW					30 DA AVE		MX 7D AVE	DAILY MX	MG/L			
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****					(25)				
00545 P 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.5	DAILY MX	MG/L		TWICE/MONTH	GRAB
SEE COMMENTS BELOW												
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)				
FREON EXTR-GRAV MET												
00556 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	10	DAILY MX	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE												
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)				
01045 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0	DAILY MX	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE												
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL	SAMPLE MEASUREMENT	*****		(94)	*****	*****	*****					
45613 1 0 0	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	*****	*****		TWICE/MONTH	VISUAL
EFFLUENT GROSS VALUE												

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER
 KENNETH E. MAY
 MINE MANAGER
 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. Craig Helton
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
435	286-4880	04	3	17
AREA CODE	NUMBER	YR	MO	DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS. REPORT N/A IN THE APPROPRIATE BLANK.
 No Discharge during month of February 2004

PERMITEE NAME/ADDRESS

(Include Facility Name/Location if different)

NAME Canyon Fuel Co., LLC
 ADDRESS SUFCO Mine
 397 South 800 West
 Salina, UT 84654
 FACILITY SUFCO Mine
 LOCATION SALINA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)
 UT0022918 001 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

Form Approved
 OMB No. 2040-0004

F - FINAL

Minesite

8" PIPE DISCHARGING MINE WATER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 2	0 1	0 4	0 2	2 9
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: KENNETH E. MAY, MINE MANAGER

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUALITY OR CONCENTRATION			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS 0	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0	SAMPLE MEASUREMENT	*****		(94)	*****	*****	*****			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		0	YES=1 NO=0	*****	*****	*****	****	TWICE/MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1200	MGL	TWICE/MONTH	GRAB
OIL AND GREASE VISUAL 84066 1 0 0	SAMPLE MEASUREMENT	*****	*****	(94)	*****	*****	*****			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****	TWICE/MONTH	VISUAL
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER KENNETH E. MAY MINE MANAGER 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.	TELEPHONE		DATE		
		435	286-4880	04	3	17
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Craig Hillen</i>		AREA CODE	NUMBER	YR MO DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
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 No Discharge during month of February 2004

PERMITEE NAME/ADDRESS

(Include Facility Name/Location if different)

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 FACILITY SUFCO Mine
 LOCATION SALINA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UT0022918
 PERMIT NUMBER

002 A
 DISCHARGE NUMBER

MAJOR

Form Approved
 OMB No. 2040-0004

F - FINAL
 SEDIMENTATION POND
 12" PIPE DISCHARGE FROM SEDIMENT POND

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0	4	0	2	0	1
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: KENNETH E. MAY, MINE MANAGER

PARAMETER (32-37)	X	(3 Card Only) (46-53)			(4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
FLOW RATE 00056 1 0 0		0.056	0.072	(03)	*****	*****	*****		0	2 /30	Measrd		
EFFLUENT GROSS VALUE		PERMIT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		TWICE/ MONTH	MEASRD		
PH 00400 1 0 0		*****	*****		8.16		8.18	(12)	0	2 /30	GRAB		
EFFLUENT GROSS VALUE		*****	*****	****	6.5	*****	9.0	SU		TWICE/ MONTH	GRAB		
SOLIDS, TOTAL SUSPENDED 00530 P 0 0		*****	*****	****	N/A	N/A	N/A	(19)	0	2 /30	GRAB		
SEE COMMENTS BELOW		*****	*****	****	25	35	70			TWICE/ MONTH	GRAB		
SOLIDS, SETTLEABLE 00545 P 0 0		*****	*****	****	*****	*****	<0.1	(25)	0	2 /30	GRAB		
SEE COMMENTS BELOW		*****	*****	****	*****	*****	0.5			TWICE/ MONTH	GRAB		
OIL AND GREASE FREON EXTR-GRAY METH 00556 1 0 0		*****	*****	****	*****	*****	<2	(19)	0	2 /30	GRAB		
EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	10			TWICE/ MONTH	GRAB		
IRON, TOTAL (AS FE) 01045 1 0 0		*****	*****	****	*****	*****	0.32	(19)	0	2 /30	GRAB		
EFFLUENT GROSS VALUE		*****	*****	****	*****	*****	1.0			TWICE/ MONTH	GRAB		
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0		*****	0	(94)	*****	*****			0	2 /30	VISUAL		
EFFLUENT GROSS VALUE		*****	0	YES=1 NO=0	*****	*****	*****	****		TWICE/ MONTH	VISUAL		
NAME/TITLE	PRINCIPLE EXECUTIVE OFFICER	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.							TELEPHONE		DATE		
KENNETH E. MAY MINE MANAGER									435	286-4880	04	3	17
TYPED OR PRINTED									AREA CODE	NUMBER	YR	MO	DA

L. Craig H. [Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

COMMENT AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS. REPORT N/A IN THE APPROPRIATE BLANK.
 SNOW MELT RUNOFF EVENTS ON BOTH SAMPLE DATES 02/04/04 & 02/18/04; HENCE, SETTLEABLE SOLIDS & PH ARE THE ONLY EFFLUENT LIMITATIONS.

PERMITTEE NAME/ADDRESS

(Include Facility Name/Location if different)

NAME Canyon Fuel Co., LLC
 ADDRESS SUFCO Mine
 397 South 800 West
 Salina, UT 84654
 FACILITY SUFCO Mine
 LOCATION SALINA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UT0022918
 PERMIT NUMBER

002 A
 DISCHARGE NUMBER

MAJOR

Form Approved
 OMB No. 2040-0004

F - FINAL

SEDIMENT POND

12" PIPE DISCHARGING FROM SEDIMENT POND

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 2	0 1	0 4	0 2	2 9
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: KENNETH E. MAY, MINE MANAGER

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only)			QUALITY OR CONCENTRATION (4 Card Only)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (94)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****	0	2 /30	VISUAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****	TWICE/MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	700	0	2 /30	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	2000 LBS/DAY	****	TWICE/MONTH	GRAB
OIL AND GREASE VISUAL 84066 1 0 0	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****	0	2 /30	VISUAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****	TWICE/MONTH	VISUAL
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER
 KENNETH E. MAY
 MINE MANAGER
 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. (Reference all attachments here)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

 TELEPHONE 435 286-4880
 DATE 04 3 17
 AREA CODE NUMBER YR MO DA

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 DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS. REPORT N/A IN THE APPROPRIATE BLANK.
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DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MAJOR

Form Approved
OMB No. 2040-0004

(Include Facility Name/Location if different)

NAME Canyon Fuel Co., LLC
ADDRESS SUFCO Mine
397 South 800 West
Salina, UT 84654
FACILITY SUFCO Mine
LOCATION SALINA

UT0022918
PERMIT NUMBER

003 A
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 2	0 1	0 4	0 2	2 9
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

F - FINAL
MINESITE
24" PIPE DISCHARGING MINE WATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

ATTN: KENNETH E. MAY, MINE MANAGER

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
FLOW RATE 00056 1 0 0	PERMIT REQUIREMENT	4.01	4.20	(03)	*****	*****	*****	0	2 /30	MEASRD	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	****	TWICE / MONTH	MEASRD	
PH 00400 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	6.98	7.05	(12)	0	2 /30	GRAB	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.5	9.0	SU	0	TWICE / MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED 00530 P 0 0	SAMPLE MEASUREMENT	*****	*****	****	<5	<5	<5	(19)	0	2 /30	GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	25	35	70	0	TWICE / MONTH	GRAB	
SOLIDS, SETTLEABLE 00545 P 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	NA	(25)	0	TWICE / MONTH	GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.5	0	TWICE / MONTH	GRAB	
OIL AND GREASE PERFON EXTR-GRAV METH 00556 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	NA	(19)	0	TWICE / MONTH	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	10	0	TWICE / MONTH	GRAB	
IRON, TOTAL (AS FE) 01045 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	0.19	(19)	0	2 /30	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.0	0	TWICE / MONTH	GRAB	
FLOATING SOLIDS OR VISIBLE FOAM-VISUAL 45613 1 0 0	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****	0	2 /30	VISUAL	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****	TWICE / MONTH	VISUAL	

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER
KENNETH E. MAY
MINE MANAGER
TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
A. Craig Helth

TELEPHONE
435 286-4880
DATE
04 3 17
AREA CODE NUMBER YR MO DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
DURING PRECIPITATION EVENTS, SETTLEABLE SOLIDS SHALL BE LIMITED INSTEAD OF TSS. REPORT N/A IN THE APPROPRIATE BLANK.
Discharge during month of February 2004

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DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)
 UT0022918 003 A
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR

Form Approved
 OMB No. 2040-0004

F - FINAL
 MINESITE
 24" PIPE DISCHARGING MINE WATER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 2	0 1	0 4	0 2	2 9
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

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PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only)			QUALITY OR CONCENTRATION (4 Card Only)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS 0	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
SANITARY WASTE DISCHARGED-ASSESSMENT 45614 1 0 0	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****		0	2 /30	VISUAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****		TWICE/ MONTH	VISUAL
SOLIDS, TOTAL DISSOLVED 70295 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	719	(19)	0	2 /30	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1200 DAILY MX	MG/L		TWICE/ MONTH	GRAB
OIL AND GREASE VISUAL 84066 1 0 0	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****		0	2 /30	VISUAL
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	0	YES=1 NO=0	*****	*****	*****	****		TWICE/ MONTH	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER KENNETH E. MAY MINE MANAGER 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.	TELEPHONE		DATE		
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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YR MO DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
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 Discharge during month of February 2004

PERMITTEE NAME/ADDRESS

(Include Facility Name/Location if different)

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 FACILITY SUFCO Mine
 LOCATION SALINA

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DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

UT0022918
 PERMIT NUMBER

003 W
 DISCHARGE NUMBER

MAJOR

F - FINAL

BIOMONITORING

Form Approved
 OMB No. 2040-0004

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
0 4	0 1	0 1	0 4	0 3	3 1
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

ATTN: KENNETH E. MAY, MINE MANAGER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS 0	MINIMUM (54-61)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS				
*P / F STATRE 48HR ACU CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****		*****	*****				0	1/90	COMPOS
TGM3B 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0	PASS = 0 FAIL = 1			QUARTERLY	COMPOS
EFFLUENT GROSS VALUE												
*P / F STATRE 96HR ACU PIMEPHALES PROMELAS	SAMPLE MEASUREMENT	*****	*****		*****	*****						
TGN6C 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0	PASS = 0 FAIL = 1			QUARTERLY	COMPOS
EFFLUENT GROSS VALUE												
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPLE EXECUTIVE OFFICER
 KENNETH E. MAY
 MINE MANAGER
 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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

 TELEPHONE: 435 286-4880
 DATE: 04 3 17
 AREA CODE: 435 NUMBER: 286-4880 YR: 04 MO: 3 DA: 17

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

* For acute WET testing alternate species quarterly. Report N/A (not applicable) for the appropriate species.
 Attach all lab sheets/bench sheets for acute and chronic WET testing.

W.E.T. Inc.

Water & Environmental Testing Inc. 235 West 400 South, American Fork, Utah 84003 (801)763-0660 Fax(801)763-0440

Acute Test Report Cover Letter

February 18, 2004

Southern Utah Fuel Co.
Attn: Ruth Wayman
397 South 800 West
Salina, Utah 84654

Dear Ruth,

Enclosed is the report for the sample dated 02/16/2004. The laboratory number assigned to this sample(s) is #5804. The sample was tested for acute toxicity using *Ceriodaphnia dubia* following the procedures listed in EPA Section 9. This report is comprised of 6 pages which include;

Cover Letter,
Acute Whole Effluent Toxicity Report *Ceriodaphnia dubia*,
Region VIII guidance for Acute Whole Effluent Reporting *Ceriodaphnia dubia*,
Acute Whole Effluent Toxicity Chemical Report,
Data Reduction, (None Required)
Reference Toxicant Chart *Ceriodaphnia dubia*,
and a copy of the completed Chain of Custody.

The work represented here along with our reports have been designed to meet requirements of National Environmental Accreditation Program, (NELAP), section 5.13. All these pages *together* constitute the final report, individual pages should not be removed. If copied, the report must be reconstructed in full. If you have not received any of these pages, or if you have any questions please give us a call at 801-763-0660. We look forward to doing business with you in the future.

Sincerely,



Lee Rawlings
Lab Director

QA/QC Flags: None

Comments:

W.E.T. Inc.

Water & Environmental Testing Inc. 235 West 400 South, American Fork, Utah 84003 (801)763-0660 Fax(801)763-0440

Acute Whole Effluent Toxicity Report *Ceriodaphnia*

DATE: February 18, 2004

PERMITTEE NAME: Southern Utah Fuel Co.

TEST (Animal/Age): Ceriodaphnia <24 hours.

SAMPLE (Date/Type): 02/16/2004 Grab.

DATE/TIME TEST BEGAN: 02/16/2004 12:10 pm

DATE/TIME TEST COMPLETED: 02/18/2004 12:50 pm

TEST CONDITIONS

Ceriodaphnia dubia neonates were exposed to diluted Effluent as specified by the permit. At the end of the test period Survival was measured to determine if Acute Toxicity was present in the sample.

Animal Age at Test Start	<24 hours.
Number of Organisms/Dilution Volume/Replicates	5 organisms/15 mL/4 replicates.
Food	Fed YTC and Algae before starting test.
Aeration	None required.
Dissolved Oxygen	Measured daily old/new.
Water Replacement	Renewed daily.
Temperature	20 ± 1 degrees C.
Photo Period	16 hours light 8 hours dark.
pH	Measured initially and at 24 hours.
Dilution Water	Reconstituted lab water approx. 200 mg/L hardness.
Receiving Water	None was supplied.
Sample Concentrations	Control, 6.25, 12.5, 25, 50, 100%.

SUMMARY

Results: X Pass Fail

There was NO significant effect on survival.

Enclosed are data sheets and statistical reports.

Sincerely,



Lee Rawlings
Water & Environmental Testing, Inc.

Enclosure

Region VIII Guidance for Acute Whole Effluent Reporting

PERMITTEE NAME: Southern Utah Fuel Co.

50% MORTALITY TEST: Pass Fail LC50: >100%

TEST (Animal/Age): Ceriodaphnia <24 hours.

SAMPLE (Date/Type): 02/16/2004 Grab.

DATE/TIME TEST BEGAN: 02/16/2004 12:10 pm

DATE/TIME TEST COMPLETED: 02/18/2004 12:50 pm

Survival Totals

	Recon Water	Receiving Water	Dilutions (% Effluent)				
			6.25%	12.5%	25%	50%	100%
Initial	20	na	20	20	20	20	20
24 hours	20	na	20	20	20	20	20
48 hours	20	na	20	20	20	20	17

Chemistries

	Dissolved Oxygen (mg/L)						
Initial New/Old	7.2	na	7.2	7.1	6.9	6.6	6.0
24 hours	6.7/6.8	na	6.8/6.9	7.1/7.0	7.3/7.0	7.6/7.0	7.9/7.1
48 hours	6.8	na	7.0	7.2	7.4	7.3	7.4

	Temperature (°C)						
Initial New/Old	20.0	na	20.0	20.0	20.0	20.0	20.0
24 hours	20.0/19.8	na	20.0/19.8	20.0/19.8	20.0/19.8	20.0/19.8	20.0/19.8
48 hours	19.8	na	19.8	19.8	19.8	19.8	19.8

	pH (SU)						
Initial New/Old	8.25	na	8.13	8.09	7.78	7.55	7.37
24 hours	8.32/8.28	na	8.21/8.34	8.17/8.37	7.82/8.8.42	7.60/8.49	7.41/8.32
48 hours	8.30	na	8.36	8.38	8.46	8.53	8.42

Analyst: Lee Rawlings

Laboratory: Water & Environmental Testing, Inc.

Signature: 

Date: 2/20/04

Comments: _____

W.E.T. Inc.

Water & Environmental Testing Inc. 235 West 400 South, American Fork, Utah 84003 (801)763-0660 Fax(801)763-0440

Acute Whole Effluent Toxicity Chemical Result Report

February 18, 2004

CUSTOMER NAME:

Southern Utah Fuel Co.
Attn: Ruth Wayman
397 South 800 West
Salina, Utah 84654

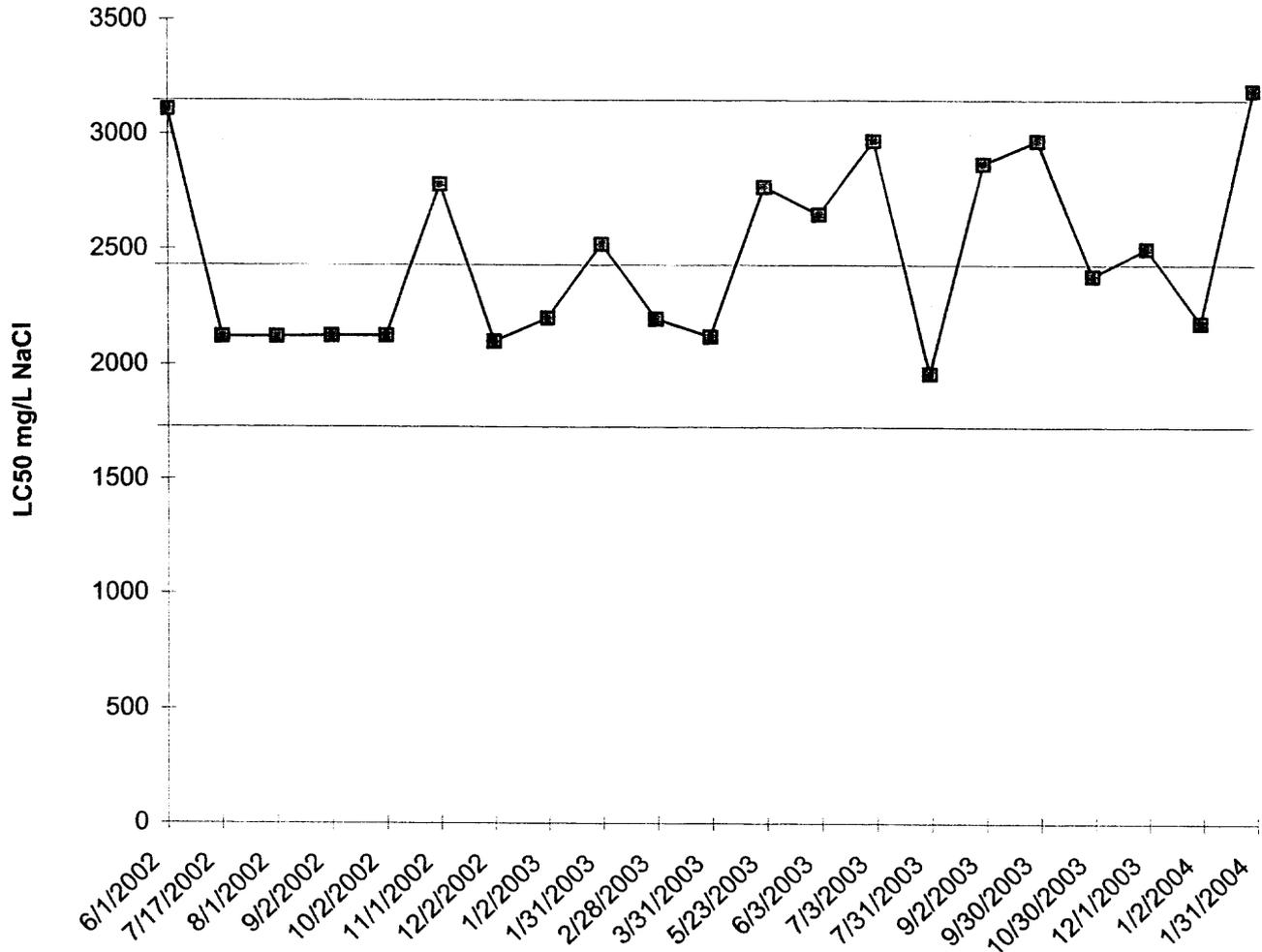
SAMPLE DESCRIPTION:

Chemistries to go with Acute Ceriodaphnia Toxicity Test Collected 02/16/2004.

Sample Source	Test Performed	Log Number	Test Results
Effluent	Total Hardness, Recon (EPA 130.2)		204 mg/L
	Total Hardness, Effluent (EPA 130.2)	5804	139 mg/L
	Total Hardness, Receiving Water (EPA 130.2)	Na	na mg/L
	Ammonia, Effluent (EPA 350.2/350.3)	5804	<0.05 mg/L
	Ammonia, Receiving Water (EPA 350.2/350.3)	Na	na mg/L
	Initial Chlorine Residual (EPA 330.5)	5804	<0.05 mg/L
	Final Chlorine Residual (EPA 330.5)	5804	na mg/L
	Conductivity, Effluent (EPA 120.1)	5804	1,054 umhos/cm
	Alkalinity, Effluent (EPA 310.1)	5804	314 mg/L CaCO ₃
	Conductivity, Receiving Water (EPA 120.1)	Na	na umhos/cm
	Alkalinity, Receiving Water (EPA 310.1)	Na	na mg/L CaCO ₃
	Recon Initial pH (EPA 150.1)		8.25
	After 24 hours pH (EPA 150.1)		8.28
	100% Initial pH (EPA 150.1)	5804	7.37
	100% After 24 hours pH (EPA 150.1)	5804	8.32
	Receiving Water Initial pH (EPA 150.1)	Na	na
	Receiving Water After 24 hours pH (EPA 150.1)	Na	na


Reviewed: Lee Rawlings, Lab Director
Water & Environmental Testing, Inc.

Acute Reference Toxicant Ceriodaphnia February 2004



X = 2438 2s = 727 UCL 3165 LCL 1711

W.E.T. Inc.

Water & Environmental Testing Inc. 223 West 400 South, American Fork, Utah 84003 (801)763-0660 Fax (801)763-0440

Chain of Custody Record

Customer: <u>SUFCO</u>	Sampler: <u>A QUAY MECHAN</u>
Sample Date: <u>02 16 04</u>	Project: <u>SUFCO PTO03</u>

Sample Information

Sample #	Date	Time	Composite/Grab	Location	Analysis Requested
<u>1</u>	<u>021604</u>	<u>0700</u>	<u>GRAB</u>	<u>PT003 QUITCHUMPAH DISCHARGE</u>	<u>CERIODAPANIA</u>

Sample Custody Record

Relinquished by: <u>A Quay Mechan</u>	Received by: <u>Mike Davis</u>	Date/Time <u>2-16-04 07:58</u>
Relinquished by: <u>Mike Davis</u>	Received by: <u>Chris</u>	Date/Time <u>2-16-04 1116</u>
Relinquished by: <u>Chris</u>	Received by: <u>Jill Rawlings</u>	Date/Time <u>2-16-04 1900</u>
Sample Received in Lab by <u>Chris</u>	Date/Time <u>2-16-04 11:15 am</u>	

Comments: NO LAKE WATER USED BECAUSE OF THE FROZE

Temperature Received in the Lab: _____ Effluent: 54
Receiving Water: _____

W.E.T. Inc. Use Only

Cooler: Wet Ice _____ Blue Ice <input checked="" type="checkbox"/> None _____	Hand Delivery <input checked="" type="checkbox"/> W.E.T. Inc. Courier _____ Shipped _____	Arrived in Shipping Container: <u>O/N</u> Sealed: <u>Y/N/NA</u>	Samples- Custody Seals Used <u>Y</u> <input checked="" type="checkbox"/> Intact <u>Y/N</u>	COC and Labels Match? Yes <input checked="" type="checkbox"/> No _____
Broken, Damaged or Leaking? Yes _____ No <input checked="" type="checkbox"/>	Correct Containers Used? Yes _____ No _____	Sufficient Quantity Sample? Yes <input checked="" type="checkbox"/> No _____	Sufficient Quantity of Receiving Water? Yes _____ No _____	Adequate Info provided? Yes <input checked="" type="checkbox"/> No _____
				Sample Acceptance Accepted <input checked="" type="checkbox"/> Rejected _____