
J. E. STOVER & ASSOCIATES, INC.

2352 NORTH 7TH STREET, UNIT B
GRAND JUNCTION, COLORADO 81501
PHONE: (970) 245-4101, FAX 242-7908

MINE ENGINEERING
MINE RECLAMATION

CIVIL ENGINEERING
CONST. MANAGEMENT

December 12, 2016

Colorado Department of Public Health & Environment
Water Quality Control Division
WQCD-P-B2
4300 Cherry Creek Drive South
Denver, CO 80246-1530

Attention: Permits and Enforcement

Re: Snowcap Coal Company, Inc.
CDPS Permit No. CO-0027146

Dear People:

On behalf of Snowcap Coal Company, Inc., we have enclosed the discharge monitoring reports for CDPS Permit No. CO0027146, Outfalls 002A and 016A. The reports are for the month of November 2016.

If you have any questions, please call me at (970) 241-8118.

Sincerely,



Tonya K. Hammond
Owner's Representative

Enclosures

cc: DRMS (e-mail)
SCC File

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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

NAME: Snowcap Coal Company Inc
ADDRESS: PO Box 1430
Palisade, CO 81526

FACILITY: ROADSIDE NORTH & SOUTH MINES
LOCATION: I-70, EXIT 46 (CAMEO EXIT)
PALISADE, CO 81526

ATTN: Henry James, VP

CO0027146
PERMIT NUMBER

002-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 81526
MINOR

MONITORING PERIOD
FROM MM/DD/YYYY TO MM/DD/YYYY
11/01/2016 TO 11/30/2016

Mine Drainage Discharge to Colorado River
External Outfall

No Discharge ☒

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH		*****	*****	*****	*****	*****	*****				
00400 1 0 Effluent Gross		*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU			
Solids, total suspended		*****	*****	*****	*****	*****	*****			Monthly	INSITU
00530 1 0 Effluent Gross		*****	*****	*****	*****	35 30DA AVG	70 DAILY MX	mg/L		Monthly	GRAB
Cyanide, weak acid, dissociable		*****	*****	*****	*****	*****	*****				
00718 1 0 Effluent Gross		*****	*****	*****	*****	*****	Req. Mon. DAILY MX	ug/L		Twice Per Month	GRAB
Arsenic, total recoverable		*****	*****	*****	*****	*****	*****				
00978 1 0 Effluent Gross		*****	*****	*****	*****	18 30DA AVG	*****	ug/L		Twice Per Month	GRAB
Silver, potentially dissolved		*****	*****	*****	*****	*****	*****				
01304 1 0 Effluent Gross		*****	*****	*****	*****	Req. Mon. 30DA AVG	*****	ug/L		Twice Per Month	GRAB
Copper, potentially dissolved		*****	*****	*****	*****	*****	*****				
01306 1 0 Effluent Gross		*****	*****	*****	*****	22 30DA AVG	35 DAILY MX	ug/L		Twice Per Month	GRAB
Cadmium, potentially dissolved		*****	*****	*****	*****	*****	*****				
01313 1 0 Effluent Gross		*****	*****	*****	*****	92 30DA AVG	*****	ug/L		Twice Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Tonya Hammond, Agent</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Tonya Hammond</i>		TELEPHONE 9702418118	DATE 12/12/2016
	TYPED OR PRINTED		AREA CODE	NUMBER

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

Oil and grease - see LA.1, pg 3. Temperature - see C.5 and 11.

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, potentially dissolved 01318 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
Selenium, potentially dissolved 01323 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		Twice Per Month	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		Twice Per Month	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
Sulfide-hydrogen sulfide (undissociated) 51202 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		Continuous	RCORDR
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Twice Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Tony Hammond, Agent</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Tony Hammond</i>	TELEPHONE 970 241 8118	DATE 12/12/2016
TYPED OR PRINTED		AREA Code NUMBER	MM/DD/YYYY MM/DD/YYYY

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CO0027146
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016-A
DISCHARGE NUMBER

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MINOR

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MM/DD/YYYY TO
11/01/2016 11/30/2016

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External Outfall

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PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	UNITS	VALUE	VALUE	UNITS			
pH	*****	*****	*****	7.1	*****	SW	0	2/30	IN
00400 1 0 Effluent Gross	*****	*****	*****	6.5 MINIMUM	*****	SU	0	Monthly	INSITU
Solids, total suspended	*****	*****	*****	*****	*****	mg/L	0	1/30	GR
00530 1 0 Effluent Gross	*****	*****	*****	*****	35 30DA AVG	ug/L	0	Monthly	GRAB
Cyanide, weak acid, dissociable	*****	*****	*****	*****	*****	ug/L	0	2/30	GR
00718 1 0 Effluent Gross	*****	*****	*****	*****	*****	ug/L	0	Twice Per Month	GRAB
Arsenic, total recoverable	*****	*****	*****	*****	*****	ug/L	0	2/30	GR
00978 1 0 Effluent Gross	*****	*****	*****	*****	*****	ug/L	0	Twice Per Month	GRAB
Silver, potentially dissolved	*****	*****	*****	*****	*****	ug/L	0	2/30	GR
01304 1 0 Effluent Gross	*****	*****	*****	*****	*****	ug/L	0	Twice Per Month	GRAB
Copper, potentially dissolved	*****	*****	*****	*****	*****	ug/L	0	2/30	GR
01306 1 0 Effluent Gross	*****	*****	*****	*****	*****	ug/L	0	Twice Per Month	GRAB
Cadmium, potentially dissolved	*****	*****	*****	*****	*****	ug/L	0	2/30	GR
01313 1 0 Effluent Gross	*****	*****	*****	*****	*****	ug/L	0	Twice Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Tonya Hammond, Agent</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
			970 2418118	12/12/2016
TYPED OR PRINTED	AREA CODE	NUMBER	MM/DD/YYYY	
			MM/DD/YYYY	

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, potentially dissolved 01318 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.5	*****	ug/L	0	2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	7.6 30DA AVG	*****	ug/L		Twice Per Month	GRAB
Selenium, potentially dissolved 01323 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.65	*****	ug/L	0	2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	4.6 30DA AVG	*****	ug/L		Twice Per Month	GRAB
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	0.395	0.397	MGD	*****	*****	*****	*****	0	Cont	RCORR
	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY MX	*****	*****		Continuous	RCORR
Sulfide-hydrogen sulfide (undissociated) 51202 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.5	*****	mg/L	0	2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	*****	mg/L		Twice Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Tanya Hammond, Agent</i>	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information on which this document is based. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE 970 241 8118	DATE 12/12/2016
TYPED OR PRINTED		AREA Code NUMBER	MM/DD/YYYY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Tanya Hammond</i>			

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