

Musick - DNR, Jason <jason.musick@state.co.us>

2nd Quarter DMRs

1 message

Blomquist, Miranda <MBlomquist@peabodyenergy.com> To: "Musick - DNR, Jason" <jason.musick@state.co.us> Mon, Aug 7, 2017 at 1:16 PM

Jason,

Attached are the 2nd quarter DMR's for the Seneca properties. Let me know if you have any questions!

Thanks

Miranda Kawcak (Blomquist)

Engineering Technician - Environmental

Twentymile Coal, LLC

29515 Routt County Rd #27 Oak Creek, Colorado 80467

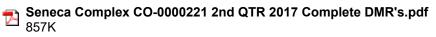
Office: (970) 870-2718 Cell: (970) 439-8273



E-mail Disclaimer:

The information contained in this e-mail, and in any accompanying documents, may constitute confidential and/or legally privileged information. The information is intended only for use by the designated recipient. If you are not the intended recipient (or responsible for the delivery of the message to the intended recipient), you are hereby notified that any dissemination, distribution, copying, or other use of, or taking of any action in reliance on this e-mail is strictly prohibited. If you have received this email communication in error, please notify the sender immediately and delete the message from your system.

2 attachments







Peabody Colorado Operations, LLC

Hayden Gulch Terminal, LLC. Peabody Energy PO Box 670 Hayden, CO 81639 970-870-2750

July 25, 2017

Colorado Department of Public Health and Environment Water Quality Control Division Permits and Enforcement Section 4300 Cherry Creek Drive South Denver, CO 80246-1530

Re: Second Quarter 2017 DMRs for CPDS Permit No. COG-850008, Hayden Gulch

Dear Sir or Madam:

Pursuant to the requirements contained in Colorado Discharge Permit COG-850008 for the Hayden Gulch Loadout facility, enclosed please find the above referenced Discharge Monitoring Reports (DMRs) for Outfalls: 001 and 002.

No excursions of effluent limits occurred this monitoring period. Please contact me with any comments and/or questions.

Sincerely,

Miranda Blomquist

TNS/tns Enclosure: COG-850008 DMRs

Mr. Jason Musick cc: Colorado Division of Reclamation, Mining and Safety 1313 Sherman Street, Room 215 Denver, CO 80203-2273

Telefilities T	(Q	DISCHARGE MONITORING REPORT (DMR)	NITORING REP	עיזיטיע טיט געון ערט, REPORT (DMR)	روب ۱			счин лиричеи OMB No. 2040-1	curri Approveu OMB No. 2040-0004
The Harbor Control Control Incorrection Incorrection FOND (SWM) TO DRY TO NOTIFIC RECTOR THAN END (LOL IL LOADOUT) AND Control FROM Control FROM Control FROM Control THAN END (LOL IL LOADOUT) AND Control FROM Control FROM Control FROM Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control FROM Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Control ALS SOF TOWN OF FROM SOF AND Control AND Control AND Control AND Contro ALS SOF TOWN OF AND Control </td <td>TTEE N; : Hayo ESS: PO E</td> <td>lude Facility Name/Lo. ninal Inc</td> <td>cation if Different)</td> <td>PER</td> <td>COCR50008 MIT NUMBER</td> <td></td> <td>001-A \RGE NUMBER</td> <td></td> <td>AR Mailing 2 NOR</td> <td>ZIP CODE</td> <td>) </td> <td>39</td>	TTEE N; : Hayo ESS: PO E	lude Facility Name/Lo. ninal Inc	cation if Different)	PER	COCR50008 MIT NUMBER		001-A \RGE NUMBER		AR M ailing 2 NOR	ZIP CODE) 	39
INT. HAVIDEN, CO BIGGO IMMODATIVE ALIANDEN, CO BIGGO IMMODATIVE ALIANDEN		-0670		ļ	NOW	ITORING PERIC			(SW/4)	דס DRY (JET JEK/YAMPA	
HATCHER, CO BREAL Definition Definition <thdefinition< th=""> Definition D</thdefinition<>		OADOUT DEF RCR 53			WM/DD/YYYY		ΙΜ/DD/YYYY		ternal Outfal			
v. Scott Comman, Sr. Ehr Spec MAAMETER FAAMENER MALLE OUTS VALUE		39 39			04/01/2017		06/30/2017				No Disch	arge X
FARAMETER OLIVITIO OR LONDING OLIVITIO OR CONCENTRATION NALLIE VALUE VALUE<	ATTN: Scott Cowman, Sr Env S	pec								=		
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$			QUAN	VTITY OR LOADIN	16	J	NOTITY OR CONC	CENTRATION			REQUENCY	SAMPLE
10 BAMPE ************************************	PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS		F ANALYSIS	TYPE
10:00: REBNIT ************************************	μH	SAMPLE	***	****	****		***					
India Subschuled ERRMT ************************************	00400 1 0 Effluent Gross	PERMIT REQUIREMENT	**	****	****	6.5 MINIMUM	****	9 MAXIMUM	SU		Twice per Month	GRAB
10.0 FDENIL ************************************	Solids, total suspended	SAMPLE MEASUREMENT	****	***	***	***						
S. settleable Maxwitzer Manuality	00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	****	*****	35 30DA AVG	70 DAILY MX	mg/L		Twice per Month	GRAB
10 FERUIT ****** ************************************	Solids, settleable	SAMPLE MEASUREMENT	****	***	****	****						
District recoverable SAMPLE	00545 1 0 Effluent Gross	PERMIT REQUIREMENT	***	****	***	****	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Twice per Month	GRAB
1.0 FERMIT ************************************	Iron, total recoverable	SAMPLE	****	***	***	****		*****				
d grease BAMPLE ************************************	00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*	*****	***	*****	1000 30DA AVG	*****	ng/L		Twice per Month	GRAB
210 PERMIT ****** ************************************	Oil and grease	SAMPLE MEASUREMENT	***	****	***	******	***					
In conduit or thru treatment SAMPLE ************************************	03582 1 0 Effuent Gross	PERMIT REQUIREMENT	****	*****	****	****	****	10 DAILY MX	mg/L		Contingent	GRAB
PERMIT Req. Mon. Req. Mon. Req. Mon. MGD Mon. Req. Mon. Req. Mon.	Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT				***	****	*****	****			
SAMPLE ****** ****** ****** ****** ****** ****** ****** ****** ****** ****** ****** Mon. Req. Mon. Req. Mon. mg/L Quarterly PERMIT ****** ****** ****** ****** ****** Req. Mon. Req. Mon. mg/L Quarterly AL EXECUTIVE OFFICER teotify under penalty of tav that this document and all attachments were prepared under my direction of any acceleration and attachments were prepared under my direction of any acceleration a	50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Reg. Mon. DAILY MX	MGD	****	****	****	*****		continuous	Recorder (auto)
PERMIT ***** ***** Req. Mon. Req. Mon. mg/L Quarterly REQUIREMENT ***** ***** ***** Req. Mon. Req. Mon. mg/L Quarterly PRINCIPAL EXECUTIVE OFFICER from intermediation and intermediation with a space of mark of the presental period of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication submitted is a presentation of the presentation and indication and implementation	Solids, total dissolved	SAMPLE MEASUREMENT	****	****	****	******						
TELEPHONE Techmonts were prepared under my direction or the second prepared under my direction or manage at the person of preparent and manage at the person of preparent second prepared at the person of preparent second personal prepared at the person of preparent second personal p	70295 1 0 Effluent Gross	PERMIT REQUIREMENT	****	***	****	*	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
gr be information. The information submitted is U.S. K.M.W.L. ad complete. I am aware that there are significant SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR 97637.2719 assistive of the and imprisonment for knowing SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR 97637.2719 AUTHORIZED AGENT AREA Code NUMBER	NAME/TITLE PRINCIPAL EXECUTIVE		or penality of taw that this docur In accordance with a system de information submitted. Based o	ment and all attachments wen ssigned to assure lhat qualifie on my inquiry of the person or	 prepared under my direct of personnel properly gathe T persons who manage the 	tion or er and	Ru 1	1 11.		TELEPH	IONE	DATE
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	Trick Sollars		hose persons directly responsit if my knowledge and bellef, tru submitting false information, ir	ble for gathering the informatk e, accurate, and complete. I a ncluding the possibility of fine	on, the information submitt. Im aware that there are sig and imprisonment for know		JRE OF PRINCIPAL I AUTHORIZEI	EXECUTIVE OFFICE		70 8 70 1 REA Code		7/25/17
	COMMENTS AND EXPLANATION OF A	NY VIOLATIONS (Re	ference all attachme	nts here)								

DIVISION WITHIN 48 HOURS.

EPA Form 3320-1 (Rev.01/06) Previous editions may be used.

04/20/2015 Page 1

٣
Pade
۵.
١C
201
102/
04/

SETTLEABLE SOLIDS LIMITS WAIVED FOR 10-YR, 24 HR PRECIP EVENT SUBJECTTO BURDEN OF PROOF REQUIREMENTS INPART I.B.6. ANY ADDITIONAL DATA SHALL BE SUPPLIED TO THE DIVISION WITHIN 48 HOURS.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I contity under penaly of law that this document and all attachments were prepared under my direction or supervision in accordance with a system teacher that qualified pease the qualified presente prepared under and evaluate in holiomation to accordance with a submitted. Based on my insuring of the person or persons who manage the	CL AM.	TELEPHONE	DATE
	system, or those persons directly responsible for gathering the information, the information submitted is, to the best of moviendene and helicit frue accurate and complete tam avera that there are dentificant.	Cat RUMANL	<	
Patrick Sollars, and	penalties for submitting false information, including the possibility of fine and imprisonment for knowing Violations	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR	FI 122/2 PIEZ 018 02 h	1/25/IT
TYPED OR PRINTED		AUTHORIZED AGENT	AREA Code NUMBER	YYYYDDIMM

DATE	, ,	-1 22 L	WMIDDIWW
TELEPHONE	V	-1/52/2 BIEZ OF 8 OF 1	AREA Code NUMBER MM/DD/YYY
CL Min	TIMMA VOD	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR	AU HORIZED AGEN I
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER [supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the holicination of accordance with a system designed to assure that qualified personnel property gather and evaluate the holicination accordance with a system designed to assure that qualified person or persons who manage the	Isystem, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief the accurate and complete 1 am aware that there are stanificant.	per any poor wing the monorage must were poor when any poor wing the possibility of fine and imprisonment for knowing Weislations	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		Patrick Sollars, and	TYPED OR PRINTED

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

81639

MINOR

DISCHARGE NUMBER

001-A

COG850008 PERMIT NUMBER

MONITORING PERIOD

YYYYOD/MM 04/01/2017

06/30/2017

POND (SW/4) TO DRY CRK/YAMPA ROUTT

No Discharge X

		QUAN	QUANTITY OR LOADING	5	a	QUALITY OR CONCENTRATION	CENTRATION		NO.	NO. FREQUENCY SAMPLE	SAMPLE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	ы Ш	DF ANALYSIS	ТҮРЕ
Oil and grease visual	SAMPLE MEASUREMENT	***			***	****	*****	****			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	****	Req. Mon. INST MAX	Y=1;N=0	*****	***	****	***		Twice per Month	VISUAL

OMB No. 2040-0004

rum Approved

להרה היא היאטו אייטר בהואוואחו וטוא טו טו בואו (וארובט)

ļ

_/ADDRESS (Include Facility Name/Location if Different)

PERMITTEE N.

DISCHARGE MONITORING REPORT (DMR)

DMR Mailing ZIP CODE:

External Outfall

LOCATION: 2 MI S OF TOWN, OFF RCR 53 HAYDEN, CO 81639 ATTN: Scott Cowman, Sr Env Spec

HAYDEN GULCH LOADOUT

FACILITY:

Hayden Gulch Terminal Inc PO Box 670 Hayden, CO 81639-0670

ADDRESS:

NAME:

	ישראבטרמוטון א באראבטרמוטע ו מטאנא אירטערטעטע א באואט טעל	רמווחו וו היוומומוול						DMR Mailing 7IP CODE-	IP CODF	81630	ő
NAME: Hayden Gulch Terminal Inc ADDRESS: PO Box 670	linal Inc		PER	COG850008 PERMIT NUMBER	DISCHA	002-A DISCHARGE NUMBER	W	MINOR		1	Ś
Hayden, CO 81639-0670	-0670										
FACILITY: HAYDEN GULCH LOADOUT	OADOUT							PUND (SE/4) TO URY CRK/YAMPA Evennel Outrall	ם האלים -	KKYAMPA	
LOCATION: 2 MI S OF TOWN, OFF RCR 53 HAYDFN: CO: 81639	DFF RCR 53 39			04/01/2017		06/30/2017	<u>ک</u>		_	No Discharge	rrge X
ATTN: Scott Cowman, Sr Env Spec	bec										
		QUAN	QUANTITY OR LOADING	0	0	QUALITY OR CONCENTRATION	ENTRATION			FREQUENCY	SAMPLE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	ō ∐	F ANALYSIS	түре
Hď	SAMPLE	*****	****	*****		***					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	****	6.5 MINIMUM	****	9 MAXIMUM	SU		Twice per Month	GRAB
Solids, total suspended	SAMPLE	*****	****	****	****						
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	*****	****	35 30DA AVG	70 DAILY MX	mg/L		Twice per Month	GRAB
Solids, settleable	SAMPLE MEASUREMENT	*****	****	****	*****						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	****	****	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Twice per Month	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	*	***	****	****		***				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	****	****	1000 30DA AVG	****	ng/L		Twice per Month	GRAB
Oil and grease	SAMPLE MEASUREMENT	***	****	****	****	***					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	***	***	*****	****	10 DAILY MX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT				***	****	****	****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	***	*****	***	*****		Continuous	Recorder (auto)
Solids, total dissolved	SAMPLE Measurement	***	****	****	*****						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	*	***	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		or penalty of law that this docum in accordance with a system de information submitted. Based o	tent and all attachments were signed to assure that gualified on my inquiry of the person or	prepared under my direct a personnet property gathe persons who manede the	ión or Ir and	\mathcal{D}_{L}	1 10.		TELEPHONE	ONE	DATE
Patrick Sollars,	Gr M penakties for the best of penakties for wollations.	system, not those porsons directly responsible for gallbaing the information, the information submitted is, to the best of my knowledge and belief, thus, accurate, and complete, fam aware that there are significant penalities to submitting takes information, including the possibility of the and imprisonment for knowing postedions.	le for galhering the informatio , accurate, and complete. f ar cluding the possibility of fine a	n, the information submitte rarvare that there are sign and imprisonment for know		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	A A A A A A A A A A A A A A A A A A A		9708762719 Area code NUMBER	┟╼╼╾┣┈	7/25/17

SETTLEABLE SOLIDS LIMITS WAIVED FOR 10-YR, 24 HR PRECIP EVENT SUBJECTTO BURDEN OF PROOF REQUIREMENTS IN PART I.B.G. ANY ADDITIONAL DATA SHALL BE SUPPLIED TO THE DIVISION WITHIN 48 HOURS.

ייטיייסיאטרי סררמישאו מיסטישטמב ברוואוואיונסא פנסובוא (אשתבס)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE N. __/ADDRESS (Include Facility Name/Location if Different)

A-200 COG850008

OMB No. 2040-0004 гагт Арргоvеа 81639 DMR Mailing ZIP CODE:

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

۳	
310010	
5	

EPA Form 3320-1 (Rev.01/06) Previous editions may be used.

SETTLEABLE SOLIDS LIMITS WAIVED FOR 10-YR, 24 HR PRECIP EVENT SUBJECTTO BURDEN OF PROOF REQUIREMENTS IN PART I.B.6. ANY ADDITIONAL DATA SHALL BE SUPPLIED TO THE DIVISION WITHIN 48 HOURS.

Patrick Sollars GrM	Particle Sollars of the person in accordance with a system designed to assume their quilties person or porcens who manage the system, or hose persons directly responsible for gathering the information submitted is the person or porcens who manage the system, or hose persons directly responsible for gathering the information. The manage the persons who manage the persons who manage the persons of the person of the person of porcens who manage the persons of the person of the person of persons who manage the persons of the person of the person of porcens who manage the persons of the person of the person of the person of persons who manage the persons of the person of	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	970870 2719 7/25/17	7/25/17
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)	NS (Reference all attachments here)			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I cacity under penalty of law that this document and all attachm supervision in accordance with a system designed to assure the	I certify under penalty of taw that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnet property gather and	C, All	TELEPHONE	DATE
l c	eventuate the information supminister. Datased on my includy on the person of performation imangia the extension or those persons directly responsible for gathering the information, the information submitted is, A for the best of mix threwhedene and belief, true accurate, any commister I are avain this there are struction-	Cot KURA	, e	-
MAN SOLLARS (JAM)	penaltios for submitting false information, including the possibility of fine and imprisonment for knowing Walations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR	F1/22/2 P1 27 27 81/21	7/25/17
TYPED OR PRINTED		AUTHORIZED AGENT	AREA Code NI IMRER	

	-	QUAN	JUANTITY OR LOADING	9	a	QUALITY OR CONCENTRATION	CENTRATION		o v	FREQUENCY
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	Ш	EX 0F ANALYSIS
Oil and grease visual	SAMPLE MEASUREMENT	****			***	****	****	*****		
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. INST MAX	Y=1;N=0	****	*****	****	***		Twice per Month

DISCHARGE MONITORING REPORT (DMR)

1

-/ADDRESS (Include Facility Name/Location if Different)

PERMITTEE N.

Hayden Gulch Terminal Inc

ADDRESS:

NAME:

DISCHARGE NUMBER 002-A MONITORING PERIOD **PERMIT NUMBER** COG850008

OMB No. 2040-0004 בחוננו שממנסגבם 81639 DMR Mailing ZIP CODE:

MINOR

POND (SE/4) TO DRY CRK/YAMPA ROUTT External Outfall

WM/DD/YYYY

YYYY/DD/MM

04/01/2017

06/30/2017

No Discharge X

SAMPLE TYPE

≻≌

VISUAL

HAYDEN GULCH LOADOUT PO Box 670 Hayden, CO 81639-0670

LOCATION: 2 MI S OF TOWN, OFF RCR 53 HAYDEN, CO 81639 FACILITY:

ATTN: Scott Cowman, Sr Env Spec

VELENA RUC