Seneca Coal Company

January 22, 2018

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: Fourth Quarter 2017 DMRs for CPDS Permit No. CO-0000221, SMC

Dear Sir or Madam:

Pursuant to reporting requirements contained in Colorado Discharge Permit CO-0000221 for the Seneca Mine Complex (SMC), enclosed please find the above referenced Discharge Monitoring Reports (DMRs) for Outfalls: 005, 006, 008, 009, 010, 011, 012, 013, 014, 015, 016 and 017.

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

Miranda Kawcak

Miranda Kawcak

TNS/*tns*
Enclosure: CO-0000221 DMRs

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

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	005-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO TRIB/DRY CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******		******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******						
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	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	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******			******	******	******	******			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	006-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/DRY CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	8.03	******	8.17	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	<100.00	<100.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Manganese, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	<30.00	<30.00	UG/L	0	1/92	GRAB
01319 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	0.20	0.20	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	4.6 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.14	0.14	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS & FINAL TR IRON LIMITS WAIVED FOR >10YR,24HRPRECIP EVENT SUBJECT OF BURDEN OFPROOF IN I.A.3. OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	006-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/DRY CREEK
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	4040.00	4140.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kaweak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kaweak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS & FINAL TR IRON LIMITS WAIVED FOR >10YR,24HRPRECIP EVENT SUBJECT OF BURDEN OFPROOF IN I.A.3. OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	008-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/FISH CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	8.21	******	8.43	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	350.00	350.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Manganese, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	280.00	280.00	UG/L	0	1/92	GRAB
01319 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	1.20	1.20	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.05	0.05	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

PERMIT NUMBER	DISCHARGE NUMBER
CO0000221	008-A

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/FISH CREEK
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	3553.33	3570.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708102718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	009-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/SAGE CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******		******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	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	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******			******	******	******	******			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	010-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/GRASSY CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	7.79	******	8.41	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	210.00	210.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Copper, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******	<1.00	<1.00	UG/L	0	3/92	GRAB
01306 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	0.50	0.50	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.10	0.10	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		04/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	010-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/GRASSY CREEK
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	2576.67	2620.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kaweak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kaweak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	011-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO GRASSY CREEK
External Outfall

No Discharge X

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******		******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******						
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	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	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******			******	******	******	******			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702748		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.2. OIL &GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	012-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	7.87	******	8.01	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	480.00	480.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Manganese, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	170.00	170.00	UG/L	0	1/92	GRAB
01319 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	1.20	1.20	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.08	0.10	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	012-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	3346.67	3560.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	013-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******		******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total [as Fe]	SAMPLE MEASUREMENT	******	******	******	******						
01045 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	3000 30DA AVG	6000 DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	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	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******			******	******	******	******			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDE OF PROOF IN I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	014-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/SAGE CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******		******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******						
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	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	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******			******	******	******	******			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702788		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF - I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	015-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	8.32	******	8.44	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.01	0.01	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	471.33	512.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kaweak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kaweak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	016-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/HUBBERSON GULCH
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	8.27	******	8.31	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	<40.00	<40.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	1.70	1.70	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.04	0.04	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	2260.00	2270.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & TOTAL IRON LIMITS WILL BE WAIVED & SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT;TSS, TOTAL IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR, 24HR PRECIP EVENT SUBJECT TO PROOF OF BURDENIN I.A.3. OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	016-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/HUBBERSON GULCH
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & TOTAL IRON LIMITS WILL BE WAIVED & SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT;TSS, TOTAL IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR, 24HR PRECIP EVENT SUBJECT TO PROOF OF BURDENIN I.A.3. OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	017-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO HUBBERSON GULCH
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	8.32	******	8.63	SU	0	3/92	INSITU
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	INSITU
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	<0.40	<0.40	ML/L	0	3/92	GRAB
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	.5 DAILY MX	mL/L		Monthly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	240.00	240.00	UG/L	0	3/92	GRAB
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	1000 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******	3.50	3.50	UG/L	0	3/92	GRAB
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	NA	NA	0	NA	NA
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.02	0.02	MGD	******	******	******	******	0	3/92	INSTAN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	MGD	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	1973.33	2290.00	MG/L	0	3/92	GRAB
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. QRTR AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	017-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO HUBBERSON GULCH
External Outfall
No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oil and grease visual	SAMPLE MEASUREMENT	******	0	0	******	******	******	******	0	3/92	VISUAL
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		04/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

TSS & IRON LIMITS WILL BE WAIVED &SETTLEABLE SOLIDS LIMIT APPLIED FOR <=10YR,24HR PRECIP EVENT; TSS,IRON & SETTLEABLE SOLIDS LIMITS WAIVED FOR >10YR,24HR PRECIP EVENT SUBJECT TO BURDEN OF PROOF IN I.A.3.OIL & GREASE - SEE I.B.1.X. TDS MONITORING - I.B.2.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN0-5
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/DRY CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01303 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Silver, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01304 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Copper, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01306 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Cadmium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01313 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Chromium, trivalent, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01314 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Lead, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01318 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Nickel, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01322 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIERD TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN0-5
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DSCHG TO TRIB/DRY CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Mercury, total [as Hg]	SAMPLE MEASUREMENT	******	******	******	******						
71900 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIERD TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN1-1
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO GRASSY CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01303 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Silver, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01304 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Copper, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01306 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Cadmium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01313 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Chromium, trivalent, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01314 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Lead, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01318 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Nickel, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01322 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708202718		04/21/15
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIRED TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN1-1
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	
MM/DD/YYYY	**MM/DD/YYYY**
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO GRASSY CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Mercury, total [as Hg]	SAMPLE MEASUREMENT	******	******	******	******						
71900 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702718		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIRED TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved
OMB No. 2040-0004

DISCHARGE MONITORING REPORT (DMR)

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

NAME: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN1-3
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Arsenic, total recoverable	SAMPLE MEASUREMENT	******	******	******	******						
00978 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Iron, total recoverable	SAMPLE MEASUREMENT	******	******	******	******						
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Zinc, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01303 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Silver, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01304 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Copper, potentially dissolved	SAMPLE MEASUREMENT	******	******	******	******						
01306 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Cadmium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01313 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Chromium, trivalent, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01314 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702748		01/21/15
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIRED TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.

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: Seneca Coal Co LLC
ADDRESS: PO Box 670
Hayden, CO 81639-0670
FACILITY: SENECA MINE COMPLEX
LOCATION: 37766 RCR 53
HAYDEN, CO 81639

ATTN: Scott Cowman/Sr Env Specialist

CO0000221	MN1-3
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2017	12/31/2017

DMR Mailing ZIP CODE: 81639
MAJOR
ROUTT
DISCHARGE TO SAGE CREEK
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01318 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Manganese, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01319 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Nickel, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01322 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Selenium, potentially dissolvd	SAMPLE MEASUREMENT	******	******	******	******						
01323 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Mercury, total [as Hg]	SAMPLE MEASUREMENT	******	******	******	******						
71900 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
Miranda Kawcak	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 submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Miranda Kawcak	9708702748		01/21/18
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

AFTER COLLECTION OF 12 SAMPLES, PERMITTEE IS REQUIRED TO REQUEST A REASONABLE POTENTIAL ANALYSIS BEPERFORMED.