



July 22, 2014

Mr. Scott Fowler
Illinois Department of Natural Resources
Office of Mines and Minerals
Land Reclamation Division
One Natural Resources Way
Springfield, IL 62702-1271

RECEIVED
DEPT. OF NATURAL RESOURCES
SPRINGFIELD
JUL 30 2014

RE: Bulldog Mine
Permit No. 429
UCM-1 Permit Application

**OFFICE OF MINES & MINERALS
LAND RECLAMATION DIVISION**

Dear Mr. Fowler:

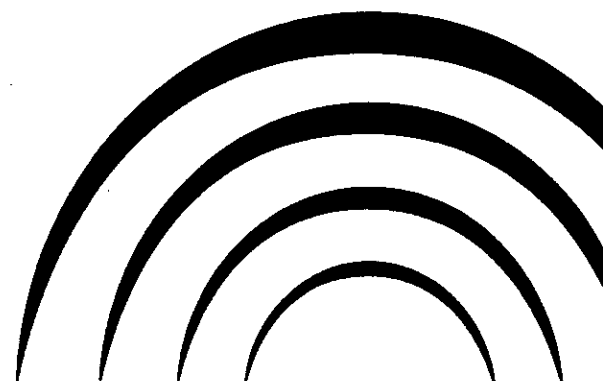
Enclosed, as directed by the Department's letter dated July 17, 2014, please find a completed form SCML-1a and seven (7) copies (one bearing original signatures) of a completed UCM-1 Permit Application for Bulldog Mine, Permit No. 429. Two (2) additional copies of the application have been forwarded to Mr. Larry Crislip, IEPA Marion office.

Should you have any questions, please feel free to contact me at this office, or personnel at Midwest Reclamation Resources, Inc., (618) 687-5590.

Sincerely,

Brent Bilslund
President
Sunrise Coal, LLC

xc: Sunrise Coal, LLC
Midwest Reclamation Resources, Inc.





BULLDOG MINE

PERMIT No. 429

UCM-1 PERMIT APPLICATION

July 2014

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State of Illinois
Department of Natural Resources
Office of Mines and Minerals
Land Reclamation Division
One Natural Resources Way
Springfield, IL 62702-1271

RECEIVED
DEPT. OF NATURAL RESOURCES
SPRINGFIELD
JUL 8 0 2014

OFFICE OF MINES & MINERALS
LAND RECLAMATION DIVISION

APPLICATION FOR SURFACE COAL MINING AND RECLAMATION OPERATIONS
PERMIT - UNDERGROUND OPERATIONS
UCM-1

PART I

(Application to be submitted 120 days (180 days for NPDES) prior to the desired effective date of the permit)

DATE: July 22, 2014

NOTICE

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Ill. Rev. Stat. 1989, ch. 96 1/2, par. 7901 et seq. Disclosure of this information is voluntary, however failure to comply may result in this form not being processed. This form has been approved by the Forms Management Center.

1) A) General Information

(I)(We)(The) Sunrise Coal, LLC
(Name of Company, Corporation, Partnership or Individual)
1183 Canvasback Dr.
Terre Haute, IN 47802 812-299-2800
(Address) (Telephone Number)

hereby submit application # _____ for a permit to mine during a permit term of Five (5) years.

Type of Application:

- Underground Mining
- Revision No. _____ to Permit No. _____
- Shadow Area Addition
- Renewal No. _____ to Permit No. _____
- Transfer of Permit No. _____
- Acres to be added under renewal

Applicant's Social Security No. _____ (Voluntary) and/or Federal Employer Identification No. 37-1449270

Name of Mine Bulldog Mine

MSHA ID No. 11-03249

List the Mine Safety and Health Administration (MSHA) number(s) for all mine associated structures that require MSHA approval.

MSHA numbers for mine associated structures requiring MSHA approval have not been assigned.

I, Brent K. Bilsland  President
Name Signature Title

under penalties of perjury declare that I have examined this application, including accompanying statements and documents and to the best of my knowledge it is true, and correct. (Signee must be at least a vice president or duly authorized representative for NPDES 35 Ill. Adm. Code 309.103(e))

This application is also to be used to apply for a:

IEPA Subtitle D (State) Permit Yes _____ No X NPDES Yes X No _____

New X

Renewal No. _____ Date: _____

Renewal No. _____ Date: _____

Modification No. _____ Date: _____

Modification No. _____ Date: _____

If this is an application for a NPDES permit, Sinthe Consolidated Permits Program - Application Form 2C (renewal), Form 2D (new), or Form 2E (sanitary) must be completed.

1) B) I Brent K. Bilsland
(vice president or his duly authorized representative)

hereby waive my right of the 90-day permit issuance deadline as required by the Illinois Environmental Protection Act, Section 39(a)(4) and the Illinois Pollution Control Board Rules and Regulations, 35 Ill. Adm. Code 309.225(c).

1) C) Who will be the operator of the permit site?
Name Sunrise Coal, LLC

Pursuant to 62 Ill. Adm. Code 1701.5 an operator is any person engaged in coal mining who removes or intends to remove more than 250 tons of coal.

If the operator is different from the applicant, provide the following information.

1) Operator's address _____

2) Operator's telephone No. _____

3) Operator's Social Security No. _____ (voluntary) and/or Federal Employer Identification No. _____

1) D) Who will extract coal under this permit?

Name Sunrise Coal, LLC

If different from applicant or operator provide the following:

1) Address _____

2) Telephone No. _____

3) Social Security No. _____ (Voluntary) and/or Federal Employer Identification No. _____

1) E) Who will pay abandoned mine land reclamation fees?

Name Sunrise Coal, LLC

If the person paying the abandoned mine land reclamation fee is different from the applicant, provide the following information.

1) Address _____

2) Telephone No. _____

3) Payee's Social Security No. _____ (voluntary) and/or Federal Employer Identification No. _____

1) F) The permittee requests a permit on the following area as shown on the permit map.

Mine Address	Pit No. or Name	Acres to be Permitted	Sec.	Twp.	Range	County
Same as Corporate Address	Bulldog Mine	237.2	26	18N	14W	Vermilion
		153.1	35			

Total Acres 390.3

1) G) Indicate the type of disturbance and associated acreage.

<u>Type of Disturbance</u>	<u>Acres</u>
Deep Mine Entries, Ventilation, Air Shafts	0.5
Mine Waste Areas	84.4
Processing Areas & Support Facilities	43.3
Access, Haul Roads, & Transport Facilities	7.1
Soil Storage Areas	47.5
Diversions-Ditches and Ponds	36.0
Other-Undeveloped Support Areas.....	103.2
Not to be Disturbed.....	68.3
Total Permit Acreage	390.3

1) H) For each phase (permit) of the proposed surface coal mining and reclamation operation over the life of the mine provide the anticipated or actual starting and termination date and the anticipated number of acres to be affected. Designate the boundaries of each phase on the pre-mining land use map or other designated map.

Phases (Permits)	Starting Date	Termination Date	Acres to be Affected
Phase 1	January 2013	2038	390.3

2) A) Provide name and address of every legal or equitable owner of record of the permit area, and the mineral property to be mined.

Please refer to Attachment I-2A.

2) B) Provide name and address of the owner of record for all surface and subsurface areas contiguous to any part of the proposed permit area.

Please refer to Attachment I-2B.

2) C) Show location of owners of record of those lands, both surface and subsurface, included in or contiguous to the permit area on premining land use map or another map, if necessary.

Please refer to the Hydrology Map, Map A for both surface and subsurface owners in and contiguous to the permit and shadow areas.

3) A) Provide name and address of any holder of record of leasehold interest for the permit area, and the mineral property to be mined.

3) B) Provide a statement of all lands, interest in lands, options or pending bids on interest held or made by the applicant for lands which are contiguous to the permit area.

None

4) Provide name and address of any purchaser of record under a real estate contract of the property for the permit area.

5) A) The applicant is: _____ corporation, _____ partnership, _____ single proprietorship, Limited Liability Company association or other business entity.

Attachment I-5 contains a copy of Sunrise Coal's business registration with the Illinois Secretary of State.

5) B) For the resident agent who will accept service of process for the applicant provide the following information.

1) Name of resident agent Davis & Delanois Law Office

2) Address 800 Oak Street
P.O. Box 344
Danville, IL 61834

3) Telephone No. (217) 446-5255

4) Social Security No. _____ (voluntary) and/or Federal Employer Identification No. 37-1354260

6) OWNERSHIP AND CONTROL INFORMATION

Ownership and control is evidenced by being the permittee of a surface coal mining operation, or by being the owner of record of 50 percent or more of an entity controlling a surface coal mining operation or by having any relationship which gives direct or indirect authority over an entity controlling a surface coal mining operation.

Ownership and control is presumed if an entity is an officer or director; is an operator of a surface coal mining operation; has the authority to commit the financial or real property assets or working resources of an entity; is the owner of record of ten (10) through fifty (50) percent of an entity; is a general partner of a partnership; owns or controls coal to be mined by another entity and has the right to receive that coal after mining; or has the authority to determine how the surface coal mining operations will be conducted.

For an entity to refute a presumed ownership and control relationship, the entity must demonstrate to the satisfaction of the Department that the entity subject to the presumption does not have the authority directly or indirectly to determine the manner in which the relevant surface coal mining operation is conducted.

6) A) For each entity who owns or controls the applicant provide the following information.

Please refer to Attachment I-6.

1) Name of entity _____

2) Address _____

3) Social Security No. _____ (voluntary) and/or Federal
Employer Identification No. _____

4) The entity's specific ownership and control relationship with the
applicant _____

If more than one ownership and control relationship exists, list each relationship separately
under this part providing all information requested.

a) Percentage of ownership if any _____

b) Location in organizational structure _____

c) Position title _____

i) Date position was assumed _____

ii) Date of departure from position _____

6) B) For each surface coal mining and reclamation operation in the United States either presently owned
or controlled or owned or controlled within the five (5) years preceding the date of the application
by the entity listed in (A) above provide the following information.

Please refer to Attachment I-6.

1) Name _____

2) Address _____

3) Name of regulatory authority _____

4) Identification number _____

a) Social security No. _____ (voluntary) and/or Federal
Employer Identification No. _____

b) Federal permit No. _____

c) State permit No. _____

d) MSHA No. _____ and date of issuance _____

7) For each surface coal mining operation in the United States owned or controlled by the applicant
provide the following information.

Please refer to *Attachment I-6*.

a) Name of Operation _____

b) Address of Operation _____

c) Name of regulatory authority _____

d) Identification number: _____

i) Social Security No. _____ (voluntary) and/or Federal
Employer Identification No. _____

ii) Federal permit No. _____

iii) State permit No. _____

iv) MSHA No. _____ and date of issuance _____

8) A) Has the applicant, any subsidiary, affiliate or entity controlled by or under common control with the applicant had:

1) A State or Federal coal mining permit suspended or revoked in the five (5) years prior to the date of submission of the application?

Yes _____ No X

2) A forfeiture of a performance bond under a coal mining permit?

Yes _____ No X

8) B) If the response to A) 1) or 2) was yes, provide the following information:

1) Provide the identification number of the permit.

2) Provide the date of permit issuance.

3) Provide the date of permit suspension or revocation and/or the date of bond forfeiture.

4) Provide the name of regulatory authority who suspended or revoked the permit and/or forfeited the bond.

5) Provide a statement of the reason for the suspension, revocation and/or forfeiture action.

6) Provide the current status of the permit and/or bond.

7) For any administrative or judicial proceedings initiated concerning the suspension, revocation, and/or forfeiture provide the following:

a) Date of proceeding,

b) Location of proceeding, and

c) Current status of proceedings.

C) If the response to A)2) was yes, provide information on the applicant's present financial condition to provide assurances satisfactory to the Department that forfeiture will not again be necessary.

9) Violation history

Please refer to *Attachment I-9*.

9) A) For the three (3) year period preceding the date of submission of the application, provide a listing of Notices of Violation received for any provision of the Federal Act or any Federal State law, rule, or regulation pertaining to air or water environmental protection incurred in connection with any surface coal mining operations. The listing shall include the following:

1) Notice of violation number or other identifier.

2) Date of NOV issuance.

3) Permit identification number.

4) MSHA number.

5) Name of entity to whom NOV was written.

6) Name of regulatory authority or agency which issued the NOV.

7) A brief description of the alleged violation.

8) For any administrative or judicial proceedings initiated concerning the violation, provide the following:

a) Type of proceedings.

b) Date of proceedings

c) Location of proceedings.

d) Current status of proceedings.

9) Actions, if any, to abate the alleged violation.

9) B) For any unabated cessation orders or unabated air and water quality violation notices received prior to the date of submission of the application for any surface coal mining and reclamation operation owned or controlled by the applicant or by any entity which owns or controls the applicant, provide a listing of the unabated cessation orders or violation notices which include the following:

1) Cessation order or notice of violation number or other identifier.

2) Date of CO or NOV issuance.

- 3) Permit identification number.
 - 4) MSHA number
 - 5) Name of entity to whom CO or NOV was written
 - 6) Name of regulatory authority or agency which issued the CO or NOV.
 - 7) A brief description of the alleged cessation order or violation.
 - 8) For any administrative or judicial proceedings initiated concerning the cessation order or violation, provide the following:
 - a) Type of proceedings.
 - b) Date of proceedings
 - c) Location of proceedings
 - d) Current status of proceedings.
 - 9) Actions, if any, to abate the alleged cessation order or violation.
- 10) Affidavits, Certifications, Insurance Certificate
- 10) A) Complete affidavit regarding applicant's legal right to enter and begin surface coal mining and reclamation operations in the permit area and whether that right is the subject of pending litigation. Identify the documents upon which affidavit is based by type and date of execution and identify specific lands to which each document pertains and explain the legal rights claimed by the applicant (Section 1778.15(a)). If the private mineral estate to be mined has been severed from the private surface estate, provide copies of the documents required under Section 1778.15(B)(1)-(3). On the permit map or other designated map show the boundaries of land within the permit area upon which the applicant has the legal right to enter and begin mining activities.

Please refer to the attached affidavit.

- 10) B) Complete certification for engineering aspects of the application. In addition to the general certification, three specific certifications are included which are applicable only if the box in front of each is marked. The first two cover special permit requirements and should be marked only when they occur for the proposed permit. The third certification covers the Illinois Environmental Protection Agency permit requirements. In most cases, an Illinois registered engineer will be required to certify I.E.P.A. permit requirements. Except as otherwise provided all maps, plans and cross-sections included in the permit application shall be prepared by, or under the direction of, and sealed by a qualified registered professional engineer licensed under the Illinois Professional Engineering Act, a qualified registered structural engineer licensed under the Illinois Structural Engineering Act or if authorized by state law, a qualified registered professional land surveyor licensed under the Illinois Land Surveyors Act with assistance from experts in related fields.

Please refer to the attached Engineering Certification.

- 10) C) A certificate of liability insurance or evidence that the applicant is self-insured is required prior to permit issuance. The certificate may be submitted with the application or when fee and bond are submitted. Minimum insurance coverage required is for bodily injury \$300,000 for each occurrence, and \$500,000 aggregate and for property damage \$300,000 each occurrence, and \$500,000 aggregate.

Please refer to the attached Certificate of Liability Insurance.

- 11) Provide a draft copy of proposed newspaper notice, and the name of local newspaper of general circulation in which advertisement of the application will be published. Certificate of publication is to be submitted not later than four weeks after the last date of publication.

Please refer to the attached draft copy of the newspaper notice. The Public Notice will be published in *The Sidell Reporter*, a newspaper of general circulation located in Sidell, Illinois.

- 12) Areas Designated Unsuitable for Mining

- 12) A) Does proposed permit area include and/or shadow area include --

Areas designated unsuitable for surface coal mining and reclamation operations, or under study for designation in an administrative proceeding as unsuitable for surface coal mining and reclamation operations? (Sections 1762 and 1764)

Yes _____ No X

- 12) B) Does proposed permit area include and/or shadow area include --

- 12) B) 1) Lands within boundaries of the National Park System, National Wildlife Refuge System, the National System of Trails, the National Wilderness Preservation System, the Wild and Scenic Rivers System, and National Recreation Areas, etc. (Section 1761.11(a))?

Yes _____ No X

- 12) B) 2) National Forest land?

Yes _____ No X

- 12) B) 3) Any land which will adversely affect any publicly-owned park or places included in the National Register of Historic Places, etc. (per Sections 1761.11(c))?

Yes _____ No X

If yes, complete Part II, Section 10, B) and C).

- 12) B) 4) Any public roads which are to be removed, relocated or temporarily closed?

Yes _____ No X

Indicate on the pre-mining land use map or other designated map the location of the public

roads and attach a copy of the written agreement from the appropriate authority authorizing the relocation, removal or temporary closure. Describe the measures to be used to insure that the interest of the public and land owners affected will be protected.

12) C) Within the proposed permit area and/or shadow area (for planned subsidence) will Surface Coal Mining and Reclamation operations be located --

12) C) 1) Within 100 feet of the right-of-way line of any public road?
Yes X No

If yes, explain proposed procedures for complying with regulation Section 1761.12(c), including request for variance, if relevant. Provide location of public roads on pre-mining land use map or other designated map. Describe the measures to be used to insure that the interest of the public and land owners affected will be protected.

Coal mining and reclamation operations will be conducted within 100 feet of the outside right-of-way lines of 100 East Road, 200 East Road, and 800 North Road. Effective February 26, 2003, the procedures for conducting Surface Coal Mining and Reclamation operations within 100 feet of the right-of-way line of a public road are located in Section 1761.11(d) and Section 1761.14. The applicant will comply with all requirements of Section 1761.11(d) and Section 1761.14.

Mining activities proposed within 100 feet of the outside right-of-way lines of 100 East Road, 200 East Road, and 800 North Road may include access roads, drainage ditches and sediment control structures, erosion control structures, soil stockpiles, spoil deposition, refuse impoundments, air shafts, conveyors, power distribution, and associated reclamation activities. The *Operations/Surface Drainage Control Map, Map D* illustrates the road locations and the proposed mining activities located within 100 feet of the outside right-of-way lines of the roads.

100 East Road and 200 East Road are north-south roads. 100 East Road is adjacent to the west Bulldog permit boundary and 200 East Road is adjacent to the east Bulldog permit boundary. 800 North Road is an east-west road that intersects both 100 East Road and 200 East Road. The Bulldog permit is located on both the north and south sides of 800 North Road.

100 East Road, 200 East Road, and 800 North Road are narrow, aggregate surfaced, public roads primarily by local residents who are familiar with the roads and the surrounding area, by local thru traffic, and by agricultural equipment for farm field access. Nearby alternate routes are available for thru traffic.

To protect the public, all entrances to the mine site will be clearly marked with appropriate signage. In order to limit mine traffic crossing 800 North Road, conveyors will be used to transport coarse refuse from the north side of 800 North Road to refuse bins located on the south side of 800 North Road.

A Public Notice published in a newspaper of general circulation will provide a comment period for the local road authority with jurisdiction over the public roads. Any person with an interest that is or may be adversely affected by the proposed mining operation within 100 feet of the right-of-way line of the public roads will also have an opportunity to comment as a result of the Public Notice. The public notice contains a map of the

proposed permit and shadow area. The map also shows the location of where operations will be within 100 feet of the outside right-of-way of public roads.

- 12) C) 2) Within 300 feet measured horizontally form any occupied dwelling?
Yes _____ No X

One (1) occupied dwelling is located within 300 feet of the permit boundary. All mining operations will observe a 300 foot setback from the dwelling as shown on the Operations/Surface Drainage Control Map, Map D.

If so, is waiver provided meeting requirements of Section 1761.12(d)?

- 12) C) 3) Within 300 feet measured horizontally of any public building, school, church, community or institutional building or public park?
Yes _____ No X

- 12) C) 4) Within 100 feet measured horizontally of a cemetery?
Yes _____ No X

- 12) D) Are valid existing rights claimed for any part of the permit area?
Yes _____ No X

If yes, provide documentation to substantiate claim.

(I) (We) Brent K. Bilsland
(Individual or Individuals)

under penalties of perjury declare on behalf of the applicant, Sunrise Coal, LLC, that said applicant has valid documents which bestow upon the applicant a legal right to enter and commence surface coal mining and reclamation operations upon lands contained in the proposed permit area, and the shadow area, and such legal right is not in any way the subject of pending court litigation.

Dated this 22 day of July, 2014.

B. K. Bilsland
Signature

President
Title

ENGINEERING CERTIFICATION

I hereby certify the engineering design used in preparation of this application, attachments, and supplements for all items except Coal Refuse Impoundment No. 1 designed by Patriot Engineering and Environmental, Inc. and the mine stability analysis performed by Marino Engineering Associates, Inc. were done by me or under my direct supervision.

I further certify to the best of my knowledge all such design done by me or under my direct supervision is in accordance with all applicable local, state and federal laws, rules and regulations. I have placed an "X" in the box below if that item is relevant.

- Whereas the Reclamation Plan calls for an alternative land use, I also certify the plans to conform to applicable accepted standards for adequate land stability, drainage, vegetative cover, and aesthetic design appropriate for the post-mining use of the site.
- Whereas the operation proposes disposal of spoil or waste materials in areas other than mining workings or excavations, I also certify such fills are designed in accordance with recognized professional standards and all applicable laws.
- Certification of the Illinois Environmental Protection Agency-35 Ill. Adm. Code 405-104(a) Permit. In my professional judgment, the plans and specifications submitted as part of this application describe an operation which will meet all applicable effluent and water quality standards. I certify that I am familiar with all of the plans, specifications, reports, and maps submitted as part of this application and that said plans, etc. are accurate insofar as they represent existing conditions.

INDIVIDUAL P.E. CERTIFICATION	
Stephen J. Glodo <hr/> Name	062.033420 <hr/> Illinois Registration Number
Midwest Reclamation Resources, Inc. <hr/> Firm	(618) 687-5590 <hr/> Telephone Number
1023 N. 14th Street <hr/> Address	Murphysboro, IL 62966 <hr/> Address
 <hr/> Signature	JULY 22, 2014 <hr/> Date

STEPHEN J. GLODO
 33420
 REGISTERED
 PROFESSIONAL
 ENGINEER
 OF
 ILLINOIS

PROFESSIONAL DESIGN FIRM CERTIFICATION	
Complete if applicable. If not, respond <u>NA</u> .	
<input checked="" type="checkbox"/> As an employee of a "professional design firm" as defined by the Illinois Department of Financial and Professional Regulation, I certify that the professional design firm is registered and in good standing with the Illinois Department of Financial and Professional Regulation.	
Midwest Reclamation Resources, Inc. <hr/> Professional Design Firm Name	184.002832 <hr/> Professional Design Firm Number

Sunrise Coal, LLC
Bulldog Mine
Application for Permit No. 429

Public Notice

Public Notice of Filing of Application for Permit to Conduct Surface Coal Mining and Reclamation Operations

Sunrise Coal, LLC, 1183 Canvasback Dr., Terre Haute, IN 47802 has filed with the County Clerk's office in Vermilion County, Illinois a copy of the application for Permit No. 429, Bulldog Mine. The 390.3 acre permit area is located in Section(s) 26 and 35, Township 18 North, Range 14 West, Vermilion County, Illinois. The shadow area is located in Section(s) 18, Township 17 North, Range 13 West, Section(s) 1, 2, 3, 10, 11, 12, 13, 14, 15, 23, 24, 25 and 26, Township 17 North, Range 14 W, and Section(s) 10, 13, 15, 22, 23, 24, 25, 26, 27, 34, 35 and 36, Township 18 North, Range 14 West, Vermilion County, Illinois. The permit and shadow areas are contained on the Homer, Allerton and Sidell, Illinois U.S. Geological Survey 7.5 minute quadrangle maps.

Mining activities, which may include access roads, drainage ditches and sediment control structures, erosion control structures, soil stockpiles, spoil deposition, coal stockpiles, refuse impoundments, air shafts, conveyors, power distribution, and associated reclamation activities will be conducted within 100 feet of the outside right-of-way lines of 100 East Road, 200 East Road, and 800 North Road.

Copies of the application for the permit are available for inspection at:

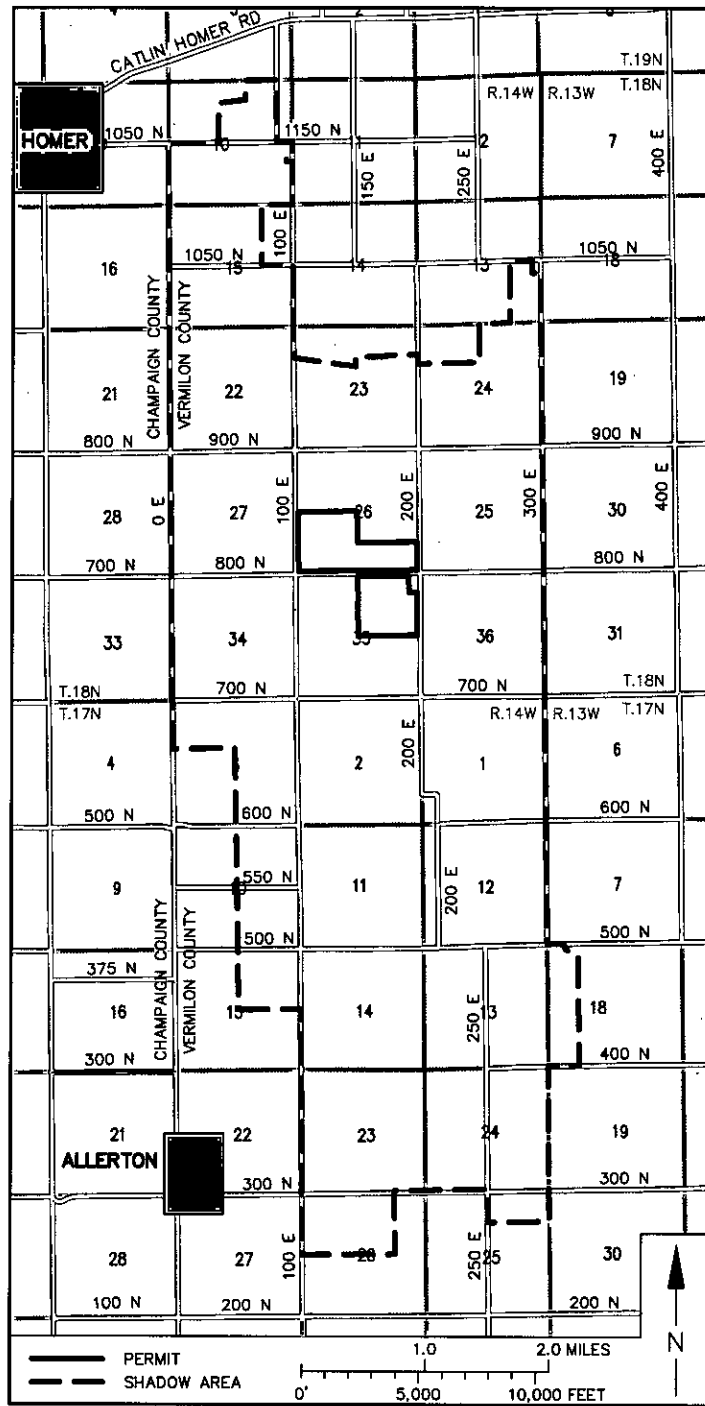
**Illinois Department of Natural Resources
Office of Mines and Minerals
Land Reclamation Division
503 East Main Street
Benton, IL 62812**

**Illinois Department of Natural Resources
Office of Mines and Minerals
Land Reclamation Division
One Natural Resources Way
Springfield, IL 62702-1271**

**Office of Vermilion County Clerk
6 North Vermilion Street
Courthouse Annex – 1st Floor
Danville, Illinois 61832**

Written comments, objections, or requests for informal conferences and public hearings on the application may be submitted to Illinois Department of Natural Resources, Office of Mines and Minerals, Land Reclamation Division, One Natural Resources Way, Springfield, IL 62702-1271.

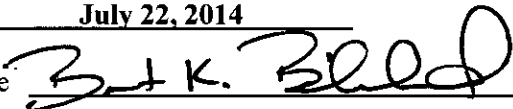
Public Notice (Continued)



UNDERGROUND MINING AFFIDAVIT
(Required by 62 Ill. Adm. Code 1778.15(f))


(I)(We), Brent K. Bilsland under penalties of perjury, declare on behalf of the applicant, Sunrise Coal, LLC, that said applicant has or will possess prior to mining, documents which bestow upon the applicant all necessary rights to conduct underground mining operations within the approved and proposed shadow area. Documents in support of granting the rights herein claimed by the applicant will be provided to the Department upon request.

Date July 22, 2014

Signature  Title President

Sworn and subscribed before me

this 22nd day of July


Notary Public

8-19-2018
My commission expires



✓ Brent M Wells

Sunrise Coal, LLC
Bulldog Mine
Permit No. 429

ATTACHMENT I-2A

PERMIT AND SHADOW AREA
SURFACE AND SUBSURFACE OWNERSHIP

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
1, 76	Cunningham Children's Home Foundation Attn: Brian Waibel 3002 W Windsor Rd Champaign, IL 61822	23,24, 26, 27	18 North	14 West	X	X	No Control	X	Lease
2, 116	O.T.C., Inc C/O Scott O'Neill 3449 Lincoln Trail Rd Fithian, IL 61844	23, 26	18 North	14 West	X	X	No Control	X	Lease
3	Jack P. Smith 7116 Claybrook Dallas, TX 75231	23, 26	18 North	14 West	X	X	No Control	No Control	N/A
4	Donald P. Allen 13638 N 200 E Rd Fairmount, IL 61841	26	18 North	14 West	X	X	No Control	No Control	N/A
5	Marilyn Craver, Trust PO Box 707 Champaign, IL 61824	26	18 North	14 West	X	X	No Control	No Control	N/A
6, 7, 8, 12	Sunrise Coal, LLC 1183 Canvasback Dr. Terre Haute, In 47802	26, 35	18 North	14 West	X	6,8,12 Sunrise	Control	X	Deed
	7-Sunrise				7-Kizer	7-Sunrise Control	X	Lease	
9, 10, 19, 45	Gary & Nedra Pridemore 7561 N 100 E Rd Homer, IL 61849	35, 36	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
11, 42, 47	Barbara Gerdes 52 CR 2700 E Broadlands, IL 61816	35, 36	18 North	14 West	X	X	No Control	No Control	N/A
13	Jeff Ward 7886 N 200 E Rd Homer, IL 61849	35	18 North	14 West	X	X	No Control	No Control	N/A
14	Joan F. & Harry Allen, Trust 761 CR 100 N Champaign, IL 61822	35, 36	18 North	14 West	X	X	No Control	X	Lease
15, 31, 32	Paul & Susan Messman 2476 CR 1150 N Homer, IL 61849	35, 36	18 North	14 West	X	X	No Control	X	Lease
16	Jean P. Zenke 34257 Pioneer Ave Aitkin, MN 56431	35	18 North	14 West	X	X	No Control	No Control	N/A
17	Jerry Messman 2718 CR 700 N Homer, IL 61849	35	18 North	14 West	X	X	No Control	X	Lease
18	Neal Easton, etal 7197 N 100 E Rd Homer, IL 61849	35	18 North	14 West	X	X	No Control	X	Lease
20	William & Jeanette Hart 474 Marcus Dr Lewisville, TX 75057	25	18 North	14 West	X	X	No Control	X	Lease
21	Inuka, Inc 7327 N 500 E Rd Fairmount, IL 61841	25	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
22	Eldon & Marjorie Craddock 901 S Scarborough St Sidney, IL 61877	25	18 North	14 West	X	X	No Control	X	Lease
23, 121	J. Tyler & Timothy J. Trisler 3746 E 800 N Rd Fairmount, IL 61841	24, 25	18 North	14 West	X	X	No Control	X	Lease
26, 30	Julie Catlett 3322 E 800 N Rd Fairmount, IL 61841	25	18 North	14 West	X	X	No Control	X	Lease
27	Larry & Judy Frick 902 S Main St Homer, IL 61849	25	18 North	14 West	X	X	No Control	X	Lease
28	Randy Frick RR 1, Box 34 Longview, IL 61852	25	18 North	14 West	X	X	No Control	X	Lease
29	Trisler Seed Farms, Inc 3274 E 800 N Rd Fairmount, IL 61841	25	18 North	14 West	X	X	No Control	X	Lease
33	Jerry & Constance Messman 2718 CR 700 N Homer, IL 61849	36	18 North	14 West	X	X	No Control	X	Lease
34, 39	Delores Hageman 2444 N 600 E Rd Sidell, IL 61876	36	18 North	14 West	X	X	No Control	No Control	N/A
36, 89	Jay Hageman 7558 N 300 E Rd Fairmount, IL 61841	34, 36	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
37	Doug & Connie Chew 6270 N 600 E Rd Sidell, IL 61876	36	18 North	14 West	X	X	No Control	X	Lease
38, 90	Eagco, Inc 7558 N 300 E Rd Fairmount, IL 61841	34, 36	18 North	14 West	X	X	No Control	X	Lease
40	Linda Pierce PO Box 508 Sidney, IL 61877	36	18 North	14 West	X	X	No Control	X	Lease
41	Joseph Hageman 2444 N 600 E Rd Sidell, IL 61876	36	18 North	14 West	X	X	No Control	No Control	N/A
43	Stewart Messman, etal 1014 W Hill St Champaign, IL 61821	36	18 North	14 West	X	X	No Control	No Control	N/A
44	Timothy & Pamela Tighe 7039 N 200 E Rd Homer, IL 61849	36	18 North	14 West	X	X	No Control	No Control	N/A
48	Harbourt, Christopher & Susan 6917 N 200 E Rd Homer, IL 61849	1	17 North	14 West	X	X	No Control	No Control	N/A
49	Anthony & Tracey Beck 913 E 550 N Rd Allerton, IL 61810	1	17 North	14 West	X	X	No Control	X	Lease
50	Sara Jo Cast PO Box 673 Catlin, IL 61817	1	17 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
51	First Midwest trust No. 2763, Attn: Melissa Panzeca 9684 Zig Zag Rd Cincinnati, OH 45252	1	17 North	14 West	X	X	No Control	X	Lease
52	First Midwest Bank Attn: Melissa Panzeca 9684 Zig Zag Rd Cincinnati, OH 45252	1	17 North	14 West	X	X	No Control	X	Lease
53	Melissa Panzeca 9684 Zig Zag Rd Cincinnati , OH 45252	1	17 North	14 West	X	X	No Control	X	Lease
54	Busey trust Co Attn: Brian Waibel 3002 W Windsor Rd Champaign, IL 61822	1	17 North	14 West	X	X	No Control	X	Lease
55	Shirley Tighe Attn: John and Carolyn Wemlinger 16 Schooner Ct Nogales, AZ 85621	1, 2, 11, 12	17 North	14 West	X	X	No Control	No Control	N/A
56, 58, 62	Beck Ranch, LP Attn: Anthony Beck 913 E 550 North Rd Allerton, IL 61810	2, 10, 11, 14	17 North	14 West	X	X	No Control	X	Lease
57	S. Shull 1456 E 700 North Rd Homer, IL 61849	2	17 North	14 West	X	X	No Control	No Control	N/A

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
59	Inuka, Inc Attn: John Mills 7327 N 500 E Rd Fairmount, IL 61841	2	17 North	14 West	X	X	No Control	X	Lease
60	O.K.D. Farm, Inc Attn: Madge Warters 6292 N 100 East Rd, POB 19 Allerton, IL 61810	2, 3	17 North	14 West	X	X	No Control	X	Lease
61	Julie A. Happ, est. 6737 N Vermilion West Rd. Homer, IL 61849	3	17 North	14 West	X	X	No Control	No Control	N/A
63	Marjorie Craddock 901 S Scarborough St Sidney, IL 61877	11	17 North	14 West	X	X	No Control	X	Lease
64	Bruce & Douglas Darr 8695 E. 980 North Rd. Fairmount, IL 61841	11	17 North	14 West	X		No Control	X	Lease
					X				
65	Maddox Farms, Inc 6035 N 600 E Rd Sidell, IL 61876	12	17 North	14 West	X	X	No Control	X	Lease
66	Eldon Craddock 901 S Scarborough St Sidney, IL 61877	12	17 North	14 West	X	X	No Control	X	Lease
67	Rodney & Britta Maddox 2499 E. 500 North Rd. Allerton, IL 61810	12	17 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
68	E. & E. Weidemann 169 Huntley Rd Buffalo, NY 14215	12	17 North	14 West	X	X	No Control	No Control	N/A
69	Scott Rowand 5641 N. 200 East Rd. Allerton, IL 61810	12	17 North	14 West	X	X	No Control	No Control	N/A
71	John & Janet Terry, Trust P.O. Box 542016 Omaha, NE 68154	12	17 North	14 West	X	X	No Control	No Control	N/A
72	Linda McCrone 108 Franklin St Georgetown, IL 61846	12	17 North	14 West	X	X	No Control	X	Lease
73	Robert & Kathryn Banta 100 W North St Ridge Farm, IL 61870	13	17 North	14 West	X	X	No Control	X	Lease
		18	17 North	13 West					
74	Alexander Family Properties P.O. Box 540 Terre Haute, IN 47808	13	17 North	14 West	X	X	No Control	No Control	N/A
75	Russell K. Newlin, etal 4663 W Vermilion Allerton, IL 61810	15	17 North	14 West	X	X	No Control	X	Lease
77	Beck's Superior Hybrids, Inc 6767 E. 276th St. Atlanta, IN 46031	23, 24	17 North	14 West	X	Unknown	No Control	No Control	N/A
78	Carl & Helen Burgener 301 Prospect Ave San Francisco, CA 94110	24	17 North	14 West	X	X	No Control	No Control	N/A

Sunrise Coal, LLC
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Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
79	Dorothy L. Pepper 38 Woodland Hills Bismarck, IL 61814	24	17 North	14 West	X	X	No Control	No Control	N/A
80	Joe & Janet Ford 3858 E 600 N Rd Allerton, IL 61810	24	17 North	14 West	X	X	No Control	X	Lease
81	Catherine Allen 548 Shady Lane Lebanon, IL 62254	24	17 North	14 West	X	X	No Control	No Control	N/A
82	Jeff & Debra Ford 707 S Chicago Sidell, IL 61876	25	17 North	14 West	X	X	No Control	X	Lease
83	Beck's Superior Hybrids, Inc Attn: Lawrence Beck 6767 E. 276th St. Atlanta, IN 46031	14, 23, 26	17 North	14 West	X	X	No Control	X	Lease
84	Phyllis Sinclair 290 Chase St. Sonoma, CA 95476	27	18 North	14 West	X	X	No Control	No Control	N/A
85	Frieda Block 210 S. Ellen Homer, IL 61849	27	18 North	14 West	X	X	No Control	No Control	N/A
86	Laverne Allen Attn: Ron Allen 783 E. 800 North Rd. Homer, IL 61849	27	18 North	14 West	X	X	No Control	X	Lease
87	Edgar & Rose Kizer 310 N Josephine Homer, IL 61849	27, 34	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
88	Douglas O'Neill 1073 Catlin-Homer Rd Homer IL 61849	34	18 North	14 West	X	X	No Control	X	Lease
91	Gerhardt Mohr 7464 N 100 E Rd Homer IL 61849	34	18 North	14 West	X	X	No Control	No Control	N/A
92	Lisbeth Zumkeller 7352 N 100 E Rd Homer IL 61849	34	18 North	14 West	X	X	No Control	No Control	N/A
93	David Mohr 1265 Range View Rd Estes Park, CO 80517	34	18 North	14 West	X	X	No Control	X	Lease
94	Elizabeth Heskett P.O. Box 542016 Omaha, NE 68154	34	18 North	14 West	X	X	No Control	No Control	N/A
95	Richard L. Knight PO Box 88 Sidney IL 61877	3, 10	18 North	14 West	X	X	No Control	X	Lease
96	Faye Messman 3706 Gina Dr. Bloomington, IL 61704	10	18 North	14 West	X	X	No Control	No Control	Option to Purchase
97	Cecil Sy 480 E. 1150 North Rd. Homer, IL 61849	10, 15	18 North	14 West	X	X	No Control	X	Lease
98, 99	Roxie A. O'Neill, Trust 1714 Tin Cup Rd Mahomet, IL 61853	10, 15	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
100	Kemberly A. Kensell 10923 Vermilion West Rd. Homer, IL 61849	15	18 North	14 West	X	X	No Control	X	Lease
101	David & Giese, Trust Attn: Virginia Davis 210 E. Thomaras Ave. A Savoy, IL 61874	15	18 North	14 West	X	X	No Control	X	Lease
104	James & Eleanor Smith, Trust 13474 N. 130 East Rd. Homer, IL 61849	15	18 North	14 West	X	X	No Control	No Control	N/A
105	N. Craver Jr. P.O. Box 707 Champaign, IL 61824	15	18 North	14 West	X	X	No Control	X	Lease
106	Marjorie & Walter Clem, etal 1003 E. Mumford Dr. Urbana, IL 61801	15	18 North	14 West	X	X	No Control	No Control	N/A
107	Terry & Janice Wolfe, etal Trust 2761 CR 1100 N Homer, IL 61849	15	18 North	14 West	X	X	No Control	X	Lease
108	Christopher & Jenny Kirschner 1113 CR 2375 E Homer, IL 61849	15	18 North	14 West	X	X	No Control	X	Lease
109	Marilyn Dalenberg & Carol Ghiselli 18920 100th Ave. N Maple Grove, MN 55311	15	18 North	14 West	X	X	No Control	No Control	N/A
110	Frederick & Alice K. Messman, Trust 612 County Rd. 2500 East Homer, IL 61849	22	18 North	14 West	X	X	No Control	No Control	N/A

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
111	Robert & Marilyn Lee 999 County Rd. 2500 East Homer, IL 61849	22	18 North	14 West	X	X	No Control	No Control	N/A
112	John Craver & Holly Diedrich P.O. Box 707 Champaign, IL 61824	22	18 North	14 West	X	X	No Control	X	Lease
113	O'Neill Farms, Inc C/O Scott O'Neill 3449 Lincoln Trail Rd Fithian, IL 61844	22	18 North	14 West	X	X	No Control	X	Lease
114	Harold Reed 616 W 4th St Homer, IL 61849	22	18 North	14 West	X	X	No Control	X	Lease
115	Eugene O'Neill 3449 Lincoln Trail Rd Fithian, IL 61844	23	18 North	14 West	X	X	No Control	X	Lease
117	Kenneth McElwee 2194 CR 1100 N Sidney IL 61877	23	18 North	14 West	X	X	No Control	No Control	N/A
118	Cynthia Adkins 110 E University Champaign, IL 61820	23	18 North	14 West	X	X	No Control	No Control	N/A
119	Maplelawn Land, LLC 714 Hanover Close Zionsville, IN 46077	23	18 North	14 West	X	X	No Control	X	Lease
120	James & Sheryll Craig 10295 E 370 N Rd Indianaola, IL 61850	13	18 North	14 West	X	X	No Control	X	Lease

Sunrise Coal, LLC
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Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
122	Barbara Phillips Attn: Donald Allen Farm Manager 13638 N 200 E Rd Fairmount, IL 61841	24	18 North	14 West	X	X	No Control	No Control	N/A
123	Marital Non-X Trust Attn: Vernon Rohrscheib 11914 N. 2500 East Rd. Fairmount, IL 61841	24	18 North	14 West	X	X	No Control	No Control	N/A
124	C. Douglas Miller 8430 N 980 East Rd Indianola, IL 61850	24	18 North	14 West	X	X	No Control	X	Lease
125	Donald Kizer, Trust 2384 Abington Columbus, OH 43221	24	18 North	14 West	X	X	No Control	No Control	N/A
126	Daisy Easton 7197 N 100 E Rd Homer, IL 61849	35	18 North	14 West	X	X	No Control	No Control	N/A
127	Carey Hall 303 W. North Danville, IL 61832	11	17 North	14 West	X	X	No Control	No Control	N/A
128	Michele Hall 431 Love Danville, IL 61832	11	17 North	14 West	X	X	No Control	No Control	N/A
129	Timothy & Heidi Craddock 3000 E. 500 North Rd. Allerton, IL 61810	13	17 North	14 West	X	X	No Control	No Control	N/A
130	Steven & Peggy Craddock 3092 E. 500 North Rd. Allerton, IL 61810	18	17 North	13 West	X	X	No Control	No Control	N/A

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit and Shadow Area Property Ownership

Map ID #	Owner	Section(s)	Township	Range	Surface Owned	Mineral Owned	Surface Rights	Mineral Rights	ROE Type
131	J & J Ford 707 S Chicago Sidell, IL 61876	25	17 North	14 West	X	X	No Control	X	Lease
132	J. Trisler 3746 E 800 N Rd Fairmount, IL 61841	24	18 North	14 West	X	X	No Control	X	Lease
133	Matthew Stoudt & Kathryn Rainge 2875 E. 900 North Rd. Fairmount, IL 61841	24	18 North	14 West	X	X	No Control	No Control	N/A
134	David Reed 9233 Vermilion West Homer, IL 61849	22	18 North	14 West	X	X	No Control	No Control	N/A
135	John Patrick Ryan 8578 N 300 E Rd Fairmount, IL 61841	25	18 North	14 West	X	X	No Control	No Control	N/A
136	Troy Chew 2490 E 700 N Rd Homer, IL 61849	1	17 North	14 West	X	X	No Control	No Control	N/A

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429

Government and Utilities Possessing Interests Within Permit and Shadow Areas

Government/Utility
Ameren Illinois P.O. Box 66893 St. Louis, MO 63166-6893
AT&T 208 South Akard Street Dallas, TX 75202
Eastern Illini Electric Cooperative 330 W Ottawa Paxton, IL 60957
Norfolk Southern Corporation c/o Jim Skeens 800 Princeton Ave Bluefield, WV 24701

Sunrise Coal, LLC
Bulldog Mine
Permit No. 429

ATTACHMENT I-2B

PERMIT AREA CONTIGUOUS PROPERTY OWNERSHIP

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit Area Contiguous Property Ownership

Map ID#	Owner	Surface	Mineral	Sections(s)	Township	Range	County
1	Cunningham Children's Home Foundation Attn: Brian Waibel 3002 W Windsor Rd Champaign, IL 61822	X	X	26	18 North	14 West	Vermilion
2	O.T.C., Inc C/O Scott O'Neill 3449 Lincoln Trail Rd Fithian, IL 61844	X	X	26	18 North	14 West	Vermilion
4	Donald P. Allen 13638 N 200 E Rd Fairmount, IL 61841	X	X	26	18 North	14 West	Vermilion
5	Marilyn Craver, Trust PO Box 707 Champaign, IL 61824	X	X	26	18 North	14 West	Vermilion
13	Jeff Ward 7886 N 200 E Rd Homer, IL 61849	X	X	35	18 North	14 West	Vermilion
14	Joan F. & Harry Allen, trust 761 CR 100 N Champaign, IL 61822	X	X	35	18 North	14 West	Vermilion
19	Gary & Nedra Pridemore 7561 N 100 E Rd Homer, IL 61849	X	X	35	18 North	14 West	Vermilion
11	Barbara Gerdes 52 CR 2700 E Broadlands, IL 61816	X	X	35	18 North	14 West	Vermilion

Sunrise Coal, LLC
Bulldog Mine, Permit No. 429
Permit Area Contiguous Property Ownership

Map ID#	Owner	Surface	Mineral	Sections(s)	Township	Range	County
—	Vermilion County 2732 Batestown Rd Oakwood, IL 61858	X		26, 35	18 North	14 West	Vermilion

Sunrise Coal, LLC
Bulldog Mine
Permit No. 429

ATTACHMENT I-5

SECRETARY OF STATE APPROVAL TO TRANSACT
BUSINESS IN THE STATE OF ILLINOIS



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

NOVEMBER 30, 2006

0204283-5

JERRY A. DAVIS
800 OAK ST.
DANVILLE, IL 61832-0000

RE SUNRISE COAL, LLC

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND AN APPROVED APPLICATION OF ADMISSION.

THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SINCERELY YOURS,

A handwritten signature in black ink that reads "Jesse White".

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY COMPANY DIVISION
TELEPHONE (217)524-8008

JW:LLC

Form LLC-45.5 December 2004	Illinois Limited Liability Company Act Application for Admission to Transact Business	FILE # <u>0204-283-5</u>
Secretary of State Jesse White Department of Business Services Limited Liability Division Room 351 Howlett Building 501 S. Second St. Springfield, IL 62756 www.cyberdriveillinois.com	SUBMIT IN DUPLICATE Must be typewritten This space for use by Secretary of State.	This space for use by Secretary of State. FILED NOV 30 2006 JESSE WHITE SECRETARY OF STATE
Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order payable to Secretary of State.	Filing Fee: \$ 500 Penalty: \$ Approved:	

1. Limited Liability Company name: Sunrise Coal, LLC
Must comply with Section 1-10 of ILLCA or item 2 below applies.
2. Assumed name, other than the true company name, under which the company proposes to transact business in Illinois:

If applicable, form LLC-1.20, Application to Adopt an Assumed Name, must be completed and attached to this application.
3. Jurisdiction of organization: State of Indiana
4. Date of organization: November 1, 2002
5. Period of duration: Perpetual
6. Address, including county, of the office required to be maintained in the jurisdiction of its organization or, if not required, of the principal place of business (P.O. Box alone or c/o is unacceptable):
4461 State Road 46

Number	Street	Suite #
<u>Terre Haute, Indiana</u>	<u>47802</u>	<u>Vigo</u>
City/State	ZIP Code	County
7. Registered agent: Jerry A. Davis

First Name	Middle Name	Last Name
<u>Jerry</u>	<u>A.</u>	<u>Davis</u>

Registered office: 800 Oak Street
(P.O. Box alone or c/o is unacceptable.)

Number	Street	Suite #
<u>800</u>	<u>Oak</u>	<u>Street</u>
<u>Danville</u>	<u>Vermilion</u>	<u>Illinois</u>
City	County	ZIP Code
8. If applicable, date on which the company first did business in Illinois: _____

(continued on back page)

LLC-45.5

9. Purpose or purposes for which the company is organized and proposes to conduct business in Illinois: (Include the Business Code # from IRS Form 1065.)

IRS Code #212110.

The purpose for which the Company is formed is to transact any and all lawful business for which limited liability companies may be organized under the Act.

10. The Limited Liability Company:
- is managed by a manager or managers
 - has management vested in the member or members
11. The Illinois Secretary of State is, hereby, appointed the agent of the Limited Liability Company for service of process under the circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act.
12. This application is accompanied by a Certificate of Good Standing or Existence, as well as a copy of the Articles of Organization, as amended, duly authenticated within the last 60 days, by the officer of the state or country wherein the LLC is formed.
13. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date also must be submitted.
14. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated November 10, 2006

Ronald Laswell

Signature (Must comply with Section 5-45 of ILLCA.)

Ronald Laswell, Member

Name and Title (type or print)

If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC. Please refer to Sections 178.20(d) of the Administrative Rules.

Sunrise Coal, LLC
Bulldog Mine
Permit No. 429

ATTACHMENT I-6

OWNERSHIP AND CONTROL INFORMATION

Revised: 06/24/2014

Name and address of all persons who are of record the beneficial owners of 10 percent or more of any class of voting stock of the applicant:

Sunrise Coal, LLC is 100% owned by:

Hallador Energy Company

1660 Lincoln Street

Suite 2700

Denver CO 80264

Federal Employee Identification Number – 84-1014610

Mailing addresses are the same as Company address

No other individuals or Corporations owned 10% or more of any stock.

Revised: 06/24/2014

Name and address of all persons who are of record the beneficial owners of 10 percent or more of any class of voting stock of the Hallador Energy Company:

Hallador Alternative Assets Fund, LLC 14.85%
c/o David Hardie
555 Dale Drive
Incline Valley NV 89451
Federal Employee Identification Number – 20-1064809
Directors: Corlandt S. Dietler, David C. Hardie, Steven P. Hardie,
 Victor P. Stabio, Bryan H. Lawrence
Officers: Victor P. Stabio – CEO, President, and Treasurer
 Teresa Jones – Controller and Corporate Secretary
 Jane Sanders – Landman and Assistant Secretary
All addresses are same as Company address

Note: There are no additional person(s) with voting stock of 10% or greater of Hallador Alternative Assets Funds, LLC

Yorktown Energy Partners,VI L.P. 40.07%
410 Park Avenue
19th Floor
New York, NY 1022
Federal Employee Identification Number - 20-1384906

Yorktown Energy Partners,VII L.P. 14.79%
410 Park Avenue
19th Floor
New York, NY 1022
Federal Employee Identification Number - 20-5451317

For Yorktown Energy Partners see attached letter for information concerning their management.

Note: According to Yorktown's Legal Representative the individuals listed in the attached letter are the only owners of Yorktown Partners LLC(including Yorktown Energy Partners VI LP, Yorktown VI Company LP, Yorktown VI Associates LLC, Yorktown Energy Partners VII LP, Yorktown VII Company LP, and Yorktown VII Associates LLC).

No Officer or Directorship information was provided by said company.

Applicant's Name Sunrise Coal, LLCPage 1 of 3

Name Brent K. Bilsland
 Title/Relationship President
 Mailing Address 1183 East Canvasback Drive
 If a P.O. Box, provide street address _____
 City Terre Haute State IN Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/31/06
 Percent of Ownership N/A

NAME BRENT K. BILSLAND
 TITLE/RELATIONSHIP MANAGER
 MAILING ADDRESS 1183 EAST CANVASBACK DRIVE
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY TERRE HAUTE STATE IN ZIP 47802
 TELEPHONE # (812) 299-2800
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/31/06
 PERCENT OF OWNERSHIP N/A

Name Brent K. Bilsland
 Title/Relationship Chief Financial Officer
 Mailing Address 1183 East Canvasback Drive
 If a P.O. Box, provide street address _____
 City Terre Haute State IN Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/31/06
 End Date for Ownership and/or Office Indicated 01/29/08
 Percent of Ownership N/A

Name Lawrence Martin
 Title/Relationship Chief Financial Officer
 Mailing Address 1183 East Canvasback Drive
 If a P.O. Box, provide street address _____
 City Terre Haute State IN Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 01/29/08
 Percent of Ownership N/A

Applicant's Name Sunrise Coal, LLCPage 2 of 3

Name Victor Stabio
 Title/Relationship Secretary
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/31/06
 Percent of Ownership N/A

NAME VICTOR STABIO
 TITLE/RELATIONSHIP MANAGER
 MAILING ADDRESS 1660 LINCOLN STREET, SUITE 2700
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY DENVER STATE CO ZIP 80264
 TELEPHONE # (303) 839-5504
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/31/06
 PERCENT OF OWNERSHIP N/A

Name David Hardie
 Title/Relationship Managing Member
 Mailing Address 555 Dale Drive
 If a P.O. Box, provide street address _____
 City Incline Valley State NV Zip 89451
 Telephone # (775) 831-2272
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/31/06
 Percent of Ownership N/A

Name Bryan Lawrence
 Title/Relationship Managing Member
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/31/06
 Percent of Ownership N/A

Applicant's Name Sunrise Coal, LLC

Page 3 of 3

Name Hallador Energy Company
Title/Relationship Ownership
Mailing Address 1660 Lincoln Street, Suite 2700
If a P.O. Box, provide street address _____
City Denver State CO Zip 80264
Telephone # (303) 839-5504
Employer ID No _____ Social Security No _____
Beginning Date for Ownership and/or Office Indicated 07/31/06
Percent of Ownership 100%

Note: No individuals or corporations own more than 10% of any stock.

Hallador Energy Company

Page 1 of 4

Name David Hardie
 Title/Relationship Chairman of the Board
 Mailing Address 555 Dale Drive
 If a P.O. Box, provide street address _____
 City Incline Valley State NV Zip 89451
 Telephone # (775) 831-2272
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/01/89
 End Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Name David Hardie
 Title/Relationship Director
 Mailing Address 555 Dale Drive
 If a P.O. Box, provide street address _____
 City Incline Valley State NV Zip 89451
 Telephone # (775) 831-2272
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Name Steven Hardie
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/27/94
 Percent of Ownership N/A

Name Bryan Lawrence
 Title/Relationship Director
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 11/16/95
 Percent of Ownership N/A

Hallador Energy Company

Page 2 of 4

Name Sheldon Lunbar
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/24/08
 Percent of Ownership N/A

Name Jon Van Heuvelen
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/16/2009
 Percent of Ownership N/A

Name Victor Stabio
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 03/22/91
 End Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Name Victor Stabio
 Title/Relationship Chairman
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Hallador Energy Company

Page 3 of 4

Name Brent Bilslund
 Title/Relationship Director
 Mailing Address 1183 E Canvasback Dr.
 If a P.O. Box, provide street address _____
 City Terre Haute State IN Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/14/09
 End Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Name Brent Bilslund
 Title/Relationship Chief Executive Officer
 Mailing Address 1183 E Canvasback Dr
 If a P.O. Box, provide street address _____
 City Terre Haute State IN Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

Name Brent Bilslund
 Title/Relationship President
 Mailing Address 1183 E Canvasback Dr
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 47802
 Telephone # (812) 299-2800
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 01/24/14
 Percent of Ownership N/A

NAME CORTLANDT S. DIETLER
 TITLE/RELATIONSHIP DIRECTOR
 MAILING ADDRESS 1600 LINCOLN STREET, SUITE 2700
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY DENVER STATE CO ZIP 80264
 TELEPHONE # (303) 839-5504
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED _____
 END DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/10/2008
 PERCENT OF OWNERSHIP N/A

Hallador Energy Company

Page 4 of 4

Name Hallador Alternative Assets Fund LLC
 Title/Relationship Ownership
 Mailing Address 555 Dale Drive
 If a P.O. Box, provide street address _____
 City Incline Valley State NV Zip 89451
 Telephone # (775) 831-2272
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership 14.85%

Name Yorktown Energy Partners, VI L.P.
 Title/Relationship Ownership
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/21/2004
 Percent of Ownership 40.07%

Name Yorktown Energy Partners, VII L.P.
 Title/Relationship Ownership
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership 14.79%

Note: No individuals or corporations own more than 10% of any stock.

Note: Hallador Energy Company is 100% owner of Sunrise Coal, LLC

Note: Hallador Petroleum Company changed its entity name to Hallador Energy Company, February 25, 2010.

Note: The initial appointment dates shown represent those under the name Hallador Petroleum Company.

Hallador Alternative Assets Fund, LLC

Page 1 of 2

Name Victor Stabio
 Title/Relationship President, Chief Executive Officer, Treasurer, & Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership N/A

Name Teressa Jones
 Title/Relationship Controller & Corporate Secretary
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership N/A

Name Jane Sanders
 Title/Relationship Landman & Assistant Secretary
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership N/A

Name David Hardie
 Title/Relationship Director
 Mailing Address 555 Dale Drive
 If a P.O. Box, provide street address _____
 City Incline Valley State NV Zip 89451
 Telephone # (775) 831-2272
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership N/A

Name Bryan Lawrence
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 11/01/95
 Percent of Ownership N/A

Attachment I.A.(8)(b)
Applicant Information

Hallador Alternative Assets Fund, LLC

Page 2 of 2

Name Steven Hardie
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 04/24/06
 Percent of Ownership N/A

Name Sheldon Lubar
 Title/Relationship Director
 Mailing Address 1660 Lincoln Street, Suite 2700
 If a P.O. Box, provide street address _____
 City Denver State CO Zip 80264
 Telephone # (303) 839-5504
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/24/08
 Percent of Ownership N/A

NAME CORTLANDT S. DIETLER
 TITLE/RELATIONSHIP DIRECTOR
 MAILING ADDRESS 1600 LINCOLN STREET, SUITE 2700
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY DENVER STATE CO ZIP 80264
 TELEPHONE # (303) 839-5504
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED _____
 END DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/10/2008
 PERCENT OF OWNERSHIP N/A

Note: No individuals or corporations own more than 10% of any stock.

Attachment I.A.(8)(b)
Applicant Information

Applicant's Name Yorktown Energy Partners, VI L.P.

Page 1 of 2

Name Bryan Lawrence
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/21/04
 Percent of Ownership N/A

Name W. Howard Keenan, Jr.
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/21/04
 Percent of Ownership N/A

Name Peter A. Leidel
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/21/04
 Percent of Ownership N/A

Name Tomas R. LaCosta
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 07/21/04
 Percent of Ownership N/A

Attachment I.A.(8)(b)
 Applicant Information

Applicant's Name Yorktown Energy Partners, VI L.P.

Page 2 of 2

Name Robert A. Signorino
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No _____ Social Security No _____
 Beginning Date for Ownership and/or Office Indicated 07/21/04
 Percent of Ownership N/A

NAME YORKTOWN VI COMPANY LP
 TITLE/RELATIONSHIP GENERAL PARTNER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/21/04
 PERCENT OF OWNERSHIP _____

NAME YORKTOWN VI COMPANY LP
 TITLE/RELATIONSHIP MANAGER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/21/04
 PERCENT OF OWNERSHIP _____

Note: No individuals or corporations own more than 10% of any stock.

APPLICANT'S NAME YORKTOWN VI COMPANY L.P.PAGE 1 OF 2

NAME BRYAN LAWRENCE
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP N/A

NAME W. HOWARD KEENAN, JR.
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP N/A

NAME PETER A. LEIDEL
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP N/A

NAME TOMAS R. LACOSTA
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP N/A

Attachment I.A.(8)(b)
Applicant Information

APPLICANT'S NAME YORKTOWN VI COMPANY L.P.

PAGE 2 OF 2

NAME ROBERT A. SIGNORINO
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP N/A

NAME YORKTOWN VI ASSOCIATES LLC
 TITLE/RELATIONSHIP GENERAL PARTNER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP _____

Note: No individuals or corporations own more than 10% of any stock.

APPLICANT'S NAME YORKTOWN VI ASSOCIATES LLCPAGE 1 OF 2

NAME BRYAN LAWRENCE
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO . _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP 20%

NAME W. HOWARD KEENAN, JR.
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO . _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP 20%

NAME PETER A. LEIDEL
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO . _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP 20%

NAME TOMAS R. LACOSTA
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO . _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
 PERCENT OF OWNERSHIP 20%

APPLICANT'S NAME YORKTOWN VI ASSOCIATES LLC

PAGE 2 OF 2

NAME ROBERT A. SIGNORINO
TITLE/RELATIONSHIP SHAREHOLDER
MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
IF A P.O. BOX, PROVIDE STREET ADDRESS _____
CITY NEW YORK STATE NY ZIP 10022
TELEPHONE # (212) 515-2100
EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/95
PERCENT OF OWNERSHIP 20%

Applicant's Name Yorktown Energy Partners, VII L.P.Page 1 of 2

Name Bryan Lawrence
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership N/A

Name W. Howard Keenan, Jr.
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership N/A

Name Peter A. Leidel
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership N/A

Name Tomas R. LaCosta
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership N/A

Applicant's Name Yorktown Energy Partners, VII L.P.Page 2 of 2

Name Robert A. Signorino
 Title/Relationship CONTROLLER
 Mailing Address 410 Park Avenue, 19th Floor
 If a P.O. Box, provide street address _____
 City New York State NY Zip 10022
 Telephone # (212) 515-2100
 Employer ID No. _____ Social Security No. _____
 Beginning Date for Ownership and/or Office Indicated 08/11/06
 Percent of Ownership N/A

NAME YORKTOWN VII COMPANY LP
 TITLE/RELATIONSHIP GENERAL PARTNER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO. _____ SOCIAL SECURITY NO. _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/21/04
 PERCENT OF OWNERSHIP _____

NAME YORKTOWN VII COMPANY LP
 TITLE/RELATIONSHIP MANAGER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO. _____ SOCIAL SECURITY NO. _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 07/21/04
 PERCENT OF OWNERSHIP _____

Note: No individuals or corporations own more than 10% of any stock.

APPLICANT'S NAME YORKTOWN VII COMPANY L.P.PAGE 1 OF 2

NAME BRYAN LAWRENCE
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP N/A

NAME W. HOWARD KEENAN, JR.
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP N/A

NAME PETER A. LEIDEL
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP N/A

NAME TOMAS R. LACOSTA
 TITLE/RELATIONSHIP CONTROLLER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP N/A

APPLICANT'S NAME YORKTOWN VII COMPANY L.P.

PAGE 2 OF 2

NAME ROBERT A. SIGNORINO
TITLE/RELATIONSHIP CONTROLLER
MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
IF A P.O. BOX, PROVIDE STREET ADDRESS _____
CITY NEW YORK STATE NY ZIP 10022
TELEPHONE # (212) 515-2100
EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
PERCENT OF OWNERSHIP N/A

NAME YORKTOWN VII ASSOCIATES LLC
TITLE/RELATIONSHIP GENERAL PARTNER
MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
IF A P.O. BOX, PROVIDE STREET ADDRESS _____
CITY NEW YORK STATE NY ZIP 10022
TELEPHONE # (212) 515-2100
EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 08/11/06
PERCENT OF OWNERSHIP _____

Note: No individuals or corporations own more than 10% of any stock.

APPLICANT'S NAME YORKTOWN VII ASSOCIATES LLCPAGE 1 OF 2

NAME BRYAN LAWRENCE
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP 20%

NAME W. HOWARD KEENAN, JR.
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP 20/5

NAME PETER A. LEIDEL
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP 20%

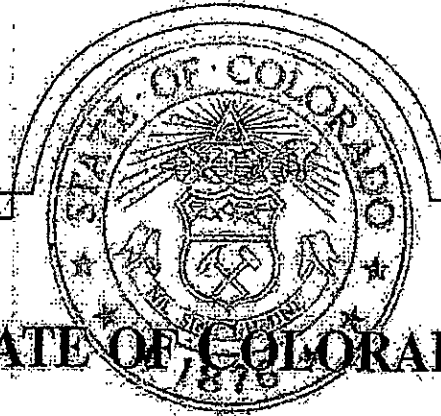
NAME TOMAS R. LACOSTA
 TITLE/RELATIONSHIP SHAREHOLDER
 MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
 IF A P.O. BOX, PROVIDE STREET ADDRESS _____
 CITY NEW YORK STATE NY ZIP 10022
 TELEPHONE # (212) 515-2100
 EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
 BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
 PERCENT OF OWNERSHIP 20%

APPLICANT'S NAME YORKTOWN VII ASSOCIATES LLC

PAGE 2 OF 2

NAME ROBERT A. SIGNORINO
TITLE/RELATIONSHIP SHAREHOLDER
MAILING ADDRESS 410 PARK AVENUE, 19TH FLOOR
IF A P.O. BOX, PROVIDE STREET ADDRESS _____
CITY NEW YORK STATE NY ZIP 10022
TELEPHONE # (212) 515-2100
EMPLOYER ID NO _____ SOCIAL SECURITY NO _____
BEGINNING DATE FOR OWNERSHIP AND/OR OFFICE INDICATED 01/01/06
PERCENT OF OWNERSHIP 20%

ATTACHMENT I.H. (8)



STATE OF COLORADO

DEPARTMENT OF
STATE

CERTIFICATE

I, *BERNIE BUESCHER*, SECRETARY OF STATE OF THE STATE OF
COLORADO HEREBY CERTIFY THAT ACCORDING TO THE RECORDS OF THIS
OFFICE, AMENDED AND RESTATED ARTICLES WERE FILED ON DECEMBER
24, 2009, CHANGING THE ENTITY NAME OF

HALLADOR PETROLEUM COMPANY
(COLORADO CORPORATION)

TO

HALLADOR ENERGY COMPANY

Dated: February 25, 2010

A handwritten signature in cursive script, appearing to read "Bernie Buescher", is written over a horizontal line.

SECRETARY OF STATE

Sunrise Coal, LLC
Bulldog Mine
Permit No. 429

ATTACHMENT I-9

VIOLATION HISTORY

Revision Date: 12/06/2010

Sunrise Coal, LLC
NOTICE OF VIOLATIONS

- (1) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
04/13/05 #N50413-U-029 1 of 1
- (c) The name of the person to whom the violation notice was issued.
Ray Pittman
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Surface water discharge from disturbed area prior to completion and certification of sediment basin.
- (f) Current status of the proceedings and of the violation notice.
The NOV was terminated 04/25/05
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Sediment basin was completed and construction certification completed and submitted to the Division of Reclamation.
- (2) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
05/11/05 #N50511-U-029 1 of 1
- (c) The name of the person to whom the violation notice was issued.
Ray Pittman
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to monitor surface water and ground water in first quarter of 2005 and submit data on water tests.
- (f) Current status of the proceedings and of the violation notice.
The NOV was terminated 05/31/2005
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Water samples were obtained from the monitor wells and surface site and the test results were submitted to the Division of Reclamation.

Revision Date: 12/06/2010

Sunrise Coal, LLC
NOTICE OF VIOLATIONS

- (3) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
04/13/06 #N60412-U-29 1 of 2
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to construct coal refuse pile/cell in accordance with the approved plan.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 06/28/2006
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Remedial activities were completed.
- (4) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
04/13/06 #N60412-U-29 2 of 2
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to provide Director with a copy of refuse pile inspection reports as required by 312 IAC 25-6-100.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 06/28/2006
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
An inspection was completed and report submitted.

Revision Date: 12/06/2010

Sunrise Coal, LLC
NOTICE OF VIOLATIONS

- (5) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
01/19/07 #N70119-U-29
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to notify properties on which mining would take place within six months.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 02/15/2007
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Notices were mailed to surface owners and copies were sent to the Division.
- (6) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Howesville Mine, U-29, MSHA # 12-02354
- (b) Dates of issuance of the violation notice and the MSHA number.
09/14/07 #N50913-U-029 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to monitor Sediment Basin
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 10/11/2005
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Monthly monitoring reports for Basin were submitted

Revision Date: 12/06/2010

Sunrise Coal, LLC**NOTICE OF VIOLATIONS**

- (7) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
06/14/07 #N70614-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to get approval of IBR3 prior to disturbance
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 06/17/2007
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Bond was submitted and IBR was approved
- (8) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
01/24/08 #N80123-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
**Condition of Permit – Part IV.L Refuse Disposal Plan
Failure to conduct monthly proctor and density testing as stated in permit. Missed
August 2007 Test.**
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 01/24/2008
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Test had resumed and was taken first week of September.

Revision Date: 12/06/2010

Sunrise Coal, LLC**NOTICE OF VIOLATIONS**

- (9) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
03/05/08 #N080226-U-028 1 OF 2
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Did not follow condition of Permit _Part IV.L. Did not recompact failed test on coarse gob pile.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 03/05/2008
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Administratively terminated with understanding that future failed test areas would be compacted before applying any additional refuse.
- 10) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
03/05/08 #N080226-U-028 2 OF 2
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to provide 6 month notices to owners and occupants of surface property and structures above underground workings.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 03/26/2008
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Verified that 6 month notices had been sent and were current at this time.

Revision Date: 12/06/2010

Sunrise Coal, LLC**NOTICE OF VIOLATIONS**

- 11) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
10/01/08 #N80930-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Off Bonded Area – Operator was travelling with mining equipment from Bonded area across Non-Bonded area.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 10/29/2008
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Operator ceased to travel across Non-Bonded area.
- 12) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
9/01/09 #N90901-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Not giving surface landowner 6 months written notice prior to underground mining activities below the property.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 9/02/2009.
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
The notice to the landowner had been sent, but increased production resulted in mining the property prior to 6 months.

Revision Date: 12/06/2010

Sunrise Coal, LLC
NOTICE OF VIOLATIONS

- 13) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
10/07/2009 #N91007-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure to maintain and meet federal and state discharge limits. Pond C was discharging water near pH 4.0.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 10/19/2009.
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
The operator currently maintains and treats acid water runoff from the coarse refuge pile prior to discharge into Pond C.
- 14) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
2/25/2010 #N100225-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Conducting mine operations off permit and off bonded areas south of the U-28-2 permit.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 3/8/2010.
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
The operator provided correspondence stating intent to stay within permitted and bonded areas when conducting mining operations.

Revision Date: 12/06/2010

Sunrise Coal, LLC
NOTICE OF VIOLATIONS

- 15) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Carlisle Mine, U-28, MSHA # 12-02349
- (b) Dates of issuance of the violation notice and the MSHA number.
10/20/2010 #N101019-U-028 1 OF 1
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Ron Laswell
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Conducting mine operations off permit and off bonded areas south of the U-28-2 permit. Portions of slurry line and silt fencing off permitted area.
- (f) Current status of the proceedings and of the violation notice.
The NOV has been terminated 10/22/2010.
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
The operator removed silt fencing and re-placed the portion of slurry line back on permitted and bonded area.
- 16) (a) State or federal permit identification, MSHA number and any other identifying number(s).
Ace in the Hole Mine, S-370, MSHA # 12-02460
- (b) Dates of issuance of the violation notice and the MSHA number.
7/16/2013 #N30716-S-370 MSHA # 12-02460
- (c) The name of the person to whom the violation notice was issued.
Certified Mail to Sam Elder
- (d) Identity of the issuing regulatory authority, department or agency.
IDNR DIVISION OF RECLAMATION
- (e) A description of the violation alleged in the notice.
Failure monitor blasts at several structures within approved scaled distance equation.
- (f) Current status of the proceedings and of the violation notice.
The NOV was terminated on 7/16/13.
- (g) Date, location and type of any administrative or judicial proceedings initiated concerning the violation and the current status of those proceedings.
None
- (h) Actions taken by any person to abate the violation.
Subsequent blasts have been monitored with a seismograph at the closest dwelling. Subsequent blasts have been monitored with a properly set seismograph at "other structures" when the approved scaled distance equation is exceeded.