DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the NPDES eReporting Help Desk for further guidance. Please note that EPA may contact you after you submit this report for more information.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(l)(4)(i). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Permit

Permit #:	**ING040030**	Permittee:	Triad Mining LLC Freelandville Mine	Facility:	TRIAD MINING LLC FREELANDVILLE MINE
Major:	No	Permittee Address:	14521 E SR 58 Edwardsport, IN 47528	Facility Location:	14521 E S. R. 58 250 W MAIN STREET STE 2000 LEXINGTON, KY 40507 EDWARDSPORT, IN 47528
Permitted Feature:	002 External Outfall	Discharge:	**002-A** ALK, S-0311 SP-02, UNT TO RICHTER DITCH		

Report Dates & Status

Monitoring Period:	**From 08/01/24 to 08/31/24**	DMR Due Date:	**09/28/24**	Status:	**NetDMR Validated**

Considerations for Form Completion

ALK COAL MINE KNOX COUNTY

Principal Executive Officer

First Name:	D. Edward	Title:	Senior Vice President	Telephone:	859-543-0515
Last Name:	Brown				

No Data Indicator (NODI)

Form NODI: --

Parameter Code	Parameter Name	Monitoring Location	Season #	Param. NODI		Quantity or Loading Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Quality or Concentration Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units	# of Ex.	Frequency of Analysis	Sample Type
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	7.77			=	7.81	12 - SU		02/30 - Twice Per Month	GR - GRAB
					Permit Req.						>=	6.0 DAILY MN			<=	9.0 DAILY MX	12 - SU		02/30 - Twice Per Month	GR - GRAB
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample								=	10.3	=	12.4	19 - mg/L		02/30 - Twice Per Month	GR - GRAB
					Permit Req.								<=	35.0 DAILY AV	<=	70.0 DAILY MX	19 - mg/L		02/30 - Twice Per Month	GR - GRAB
					Value NODI															
00545	**Solids, settleable**	1 - Effluent Gross	0	--	Sample								<	0.4	<	0.4	25 - mL/L		02/30 - Twice Per Month	GR - GRAB
					Permit Req.									Req Mon DAILY AV	<=	0.5 DAILY MX	25 - mL/L		02/30 - Twice Per Month	GR - GRAB
					Value NODI															
01045	**Iron, total [as Fe]**	1 - Effluent Gross	0	--	Sample								=	0.721	=	0.778	19 - mg/L		02/30 - Twice Per Month	GR - GRAB
					Permit Req.								<=	3.0 DAILY AV	<=	6.0 DAILY MX	19 - mg/L		02/30 - Twice Per Month	GR - GRAB
					Value NODI															
50037	**Duration**	Y - Effluent Gross (Supplementary)	0	--	Sample			=	4.0	84 - d/mo									AL/EV - All Events	RT - RCOTOT
					Permit Req.				Opt Mon MO TOTAL	84 - d/mo									AL/EV - All Events	RT - RCOTOT
					Value NODI															
50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Sample	=	0.032	=	0.036	03 - MGD									02/30 - Twice Per Month	IN - INSTAN
					Permit Req.		Req Mon DAILY AV		Req Mon DAILY MX	03 - MGD									02/30 - Twice Per Month	IN - INSTAN
					Value NODI															
79777	**Precipitation volume**	Y - Effluent Gross (Supplementary)	0	--	Sample										=	1.71	5W - in/mo		AL/EV - All Events	RT - RCOTOT
					Permit Req.											Opt Mon MO TOTAL	5W - in/mo		AL/EV - All Events	RT - RCOTOT
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

Name	Type	Size
ING040030_0002-0050_MMR_2024_08.pdf	pdf	610758.0
RainGauge-Aug24-40030.pdf	pdf	54912.0

Report Last Saved By

Triad Mining LLC Freelandville Mine

User:	KSHORT@BLACKHAWKMINING.COM
Name:	Kelly Short
E-Mail:	kshort@blackhawkmining.com
Date/Time:	2024-09-26 10:48 (Time Zone: -04:00)

Report Last Signed By

User:	KSHORT@BLACKHAWKMINING.COM
Name:	Kelly Short
E-Mail:	kshort@blackhawkmining.com
Date/Time:	2024-09-26 11:01 (Time Zone: -04:00)

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R2 / 8-07)

FACILITY NAME AND ADDRESS:

Triad Mining, LLC
250 W. Main Street, Suite 2000
Lexington, KY 40750
Attn: Ed Brown
Freelandville Mine

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.
THIS REPORT MUST BE POSTMARKED NO LATER THAN THE 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management
Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	0	2
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge
This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30	2/30			2/30		2/30		1/30
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MD/L
	Thu 1									
	Fri 2									
	Sat 3									
	Sun 4									
	Mon 5									
	Tue 6									
	Wed 7									
	Thu 8	0.036	7.77			12.4		0.663		
	Fri 9									
	Sat 10									
	Sun 11									
	Mon 12									
	Tue 13									
	Wed 14									
	Thu 15									
	Fri 16									
	Sat 17									
	Sun 18									
	Mon 19									
	Tue 20									
	Wed 21									
	Thu 22	0.027	7.81			8.2		0.778		< 0.4
	Fri 23									
	Sat 24									
	Sun 25									
	Mon 26									
	Tue 27									
	Wed 28									
	Thu 29									
	Fri 30									
	Sat 31									
MONTHLY AVERAGE		0.032				10.3		0.721		0.4
HIGHEST VALUE		0.036	7.81			12.4		0.778		0.4
LOWEST VALUE		0.027	7.77			8.2		0.663		0.4
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0							0
TOTAL FLOW		0.063								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Prepared by or under the direction of (Certified Operator): JOB WILSON

Date (month, day, year): 9/25/2024

Preparer's telephone number: 270-830-7075

Operator's certification number: WW018636

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)

Date (month, day, year): 09/25/2024

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Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	8	A
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge: X
This is a revised submittal:

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0							0
TOTAL FLOW		0								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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Operator's certification number: WW018636

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100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	1	0
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge: X
This is a revised submittal:

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0							0
TOTAL FLOW		0								

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I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	1	1	1
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge X
This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0							0
TOTAL FLOW		0								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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Indiana Discharge Monitoring Report

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100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	1	4
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge
This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30	1/30			1/30		1/30		
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0.036	8.10			27.4		2.04		
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE		0.018				27.4		2.04		
HIGHEST VALUE		0.036	8.10			27.4		2.04		
LOWEST VALUE		0.000	8.10			27.4		2.04		
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0.036								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	1	9
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge
This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00586
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30	2/30			2/30		2/30		1/30
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0.054	7.70			2.0		< 0.3		
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0.036	8.00			5.4		0.224		< 0.40
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE		0.045				3.7		0.262		0.4
HIGHEST VALUE		0.054	8.00			5.4		0.300		0.4
LOWEST VALUE		0.036	7.70			2.0		0.224		0.4
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0.09								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Prepared by or under the direction of (Certified Operator): JOB WILSON

Date (month, day, year): 9/25/2024

Preparer's telephone number: 270-830-7075

Operator's certification number: WW018636

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)

Date (month, day, year): 09/25/2024

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R2 / 8-07)

FACILITY NAME AND ADDRESS:
Triad Mining, LLC
250 W. Main Street, Suite 2000
Lexington, KY 40750
Attn: Ed Brown
Freelandville Center Mine

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.
THIS REPORT MUST BE POSTMARKED NO LATER THAN THE 28TH OF THE FOLLOWING MONTH.
Mail To: Indiana Department of Environmental Management
Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	4	7
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge: X
This is a revised submittal:

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00545
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0								

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Date (month, day, year): 9/25/2024

Preparer's telephone number: 270-830-7075

Operator's certification number: WW018636

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100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	4	8
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge: X
This is a revised submittal:

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00545
SAMPLE TYPE	Permit Condition	Instan	Grab			Grab		Grab		Grab
	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0								

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100 North Senate Avenue
Indianapolis, Indiana 46204-2251

Facility e-mail address: ebrown@blackhawkmining.com

I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	4	9
OUTFALL NO.			

0	8	2	4
MO.		YR.	

No Discharge: X
This is a revised submittal:

EFFLUENT CHARACTERISTICS		FLOW	pH		Solids, Total Suspended		Iron, Total		Settleable Solids	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00545
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	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0								

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I	N	G	0	4	0	0	3	0
PERMIT NUMBER								

0	0	5	0
OUTFALL NO.			

0	8	2	4
MO.		YR.	

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EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C00530	Q	C01045	Q	C00545
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	Monitored	Instan	Grab			Grab		Grab		Grab
FREQUENCY	Permit Condition	2/30	2/30			2/30		2/30		
	Monitored	2/30								
EFFLUENT LIMITATIONS	Permit Minimum	N/A	6.0			N/A		N/A		N/A
	Permit Average	N/A	N/A			35.00		3.00		N/A
	Permit Maximum	N/A	9.0			70.00		6.00		0.50
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	ML/L
Thu	1									
Fri	2									
Sat	3									
Sun	4									
Mon	5									
Tue	6									
Wed	7									
Thu	8	0								
Fri	9									
Sat	10									
Sun	11									
Mon	12									
Tue	13									
Wed	14									
Thu	15									
Fri	16									
Sat	17									
Sun	18									
Mon	19									
Tue	20									
Wed	21									
Thu	22	0								
Fri	23									
Sat	24									
Sun	25									
Mon	26									
Tue	27									
Wed	28									
Thu	29									
Fri	30									
Sat	31									
MONTHLY AVERAGE										
HIGHEST VALUE										
LOWEST VALUE										
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0								

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Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)

Date (month, day, year): 09/25/2024

Triad Mining, LLC
KINOAKTO8

Date	Precipitation	
8/1/2024	0.11	
8/2/2024	0.01	
8/3/2024	0.00	
8/4/2024	0.00	
8/5/2024	0.00	
8/6/2024	0.00	
8/7/2024	0.00	
8/8/2024	0.00	
8/9/2024	0.00	
8/10/2024	0.00	
8/11/2024	0.00	
8/12/2024	0.00	
8/13/2024	0.00	
8/14/2024	0.00	
8/15/2024	0.00	
8/16/2024	0.23	
8/17/2024	0.00	
8/18/2024	0.00	
8/19/2024	0.00	
8/20/2024	0.00	
8/21/2024	0.00	
8/22/2024	0.00	
8/23/2024	0.00	
8/24/2024	0.00	
8/25/2024	0.00	
8/26/2024	0.00	
8/27/2024	0.00	
8/28/2024	1.36	
8/29/2024	0.00	
8/30/2024	0.00	
8/31/2024	0.00	
Total	**1.71**	**in**
Duration	**4**	**Days**

Use for ING040030