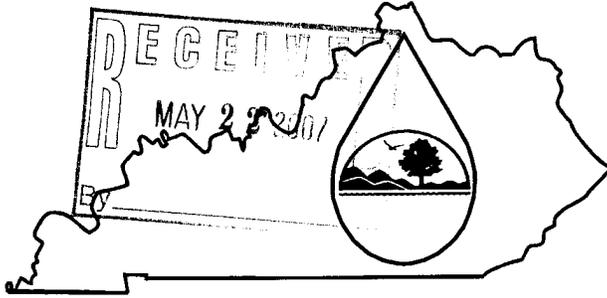


KENTUCKY POLLUTANT DISCHARGE  
ELIMINATION SYSTEM

PERMIT APPLICATION



This is an application to: (check one)

- Apply for a new permit.
- Apply for reissuance of expiring permit.
- Apply for a construction permit.
- Modify an existing permit.
- Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:  
KPDES Branch (502) 564-3410

ENK 240

<b>I. FACILITY LOCATION AND CONTACT INFORMATION</b>		AGENCY USE	0	0	4	2	7	6	5
A. Name of business, municipality, company, etc. requesting permit Nally & Hamilton Enterprises, Inc.									
<b>B. Facility Name and Location</b>					<b>C. Facility Owner/Mailing Address</b>				
Facility Location Name: Wilder Branch Job					Owner Name: Nally & Hamilton Enterprises, Inc.				
Facility Location Address (i.e. street, road, etc.): KY 987 Rd's junction with Hen Wilder Branch					Mailing Street: P.O. Box 157				
Facility Location City, State, Zip Code: Balkan, KY 40977					Mailing City, State, Zip Code: Bardstown, KY 40004				
					Telephone Number: (502)364-0084				

<b>II. FACILITY DESCRIPTION</b>									
A. Provide a brief description of activities, products, etc: Adding permit acres to original permit. Surface Mining.									
B. Standard Industrial Classification (SIC) Code and Description									
Principal SIC Code & Description:		1221							
Other SIC Codes:									

<b>III. FACILITY LOCATION</b>									
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)									
B. County where facility is located: Bell					City where facility is located (if applicable): N/A				
C. Body of water receiving discharge: Hen Wilder Branch and Board Tree Hollow Br.									
D. Facility Site Latitude (degrees, minutes, seconds): 36° 45' 44"					Facility Site Longitude (degrees, minutes, seconds): 83° 33' 33"				
E. Method used to obtain latitude & longitude (see instructions):					ARC View GIS 3.2				
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):					N/A				

<b>IV. OWNER/OPERATOR INFORMATION</b>	
A. Type of Ownership: <input type="checkbox"/> Publicly Owned <input checked="" type="checkbox"/> Privately Owned <input type="checkbox"/> State Owned <input type="checkbox"/> Both Public and Private Owned <input type="checkbox"/> Federally owned	
B. Operator Contact Information (See instructions)	
Name of Treatment Plant Operator: N/A	Telephone Number:
Operator Mailing Address (Street):	
Operator Mailing Address (City, State, Zip Code):	
Is the operator also the owner? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input type="checkbox"/>
Certification Class:	Certification Number:

<b>V. EXISTING ENVIRONMENTAL PERMITS</b>		
Current NPDES Number:	Issue Date of Current Permit:	Expiration Date of Current Permit:
Number of Times Permit Reissued:	Date of Original Permit Issuance:	Sludge Disposal Permit Number:
Kentucky DOW Operational Permit #: KYG0042765	Kentucky DSMRE Permit Number(s): 807-8056 AM01	

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	
Solid or Special Waste	N/A	
Hazardous Waste - Registration or Permit	N/A	

<b>VI. DISCHARGE MONITORING REPORTS (DMRs)</b>
--

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	Logos Engineering
B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)	
DMR Mailing Name:	Logos Engineering
DMR Mailing Street:	P.O. Box 350 / 275 White Street
DMR Mailing City, State, Zip Code:	Manchester, KY 40962
DMR Official Telephone Number:	(606) 598-6746

**VII. APPLICATION FILING FEE**

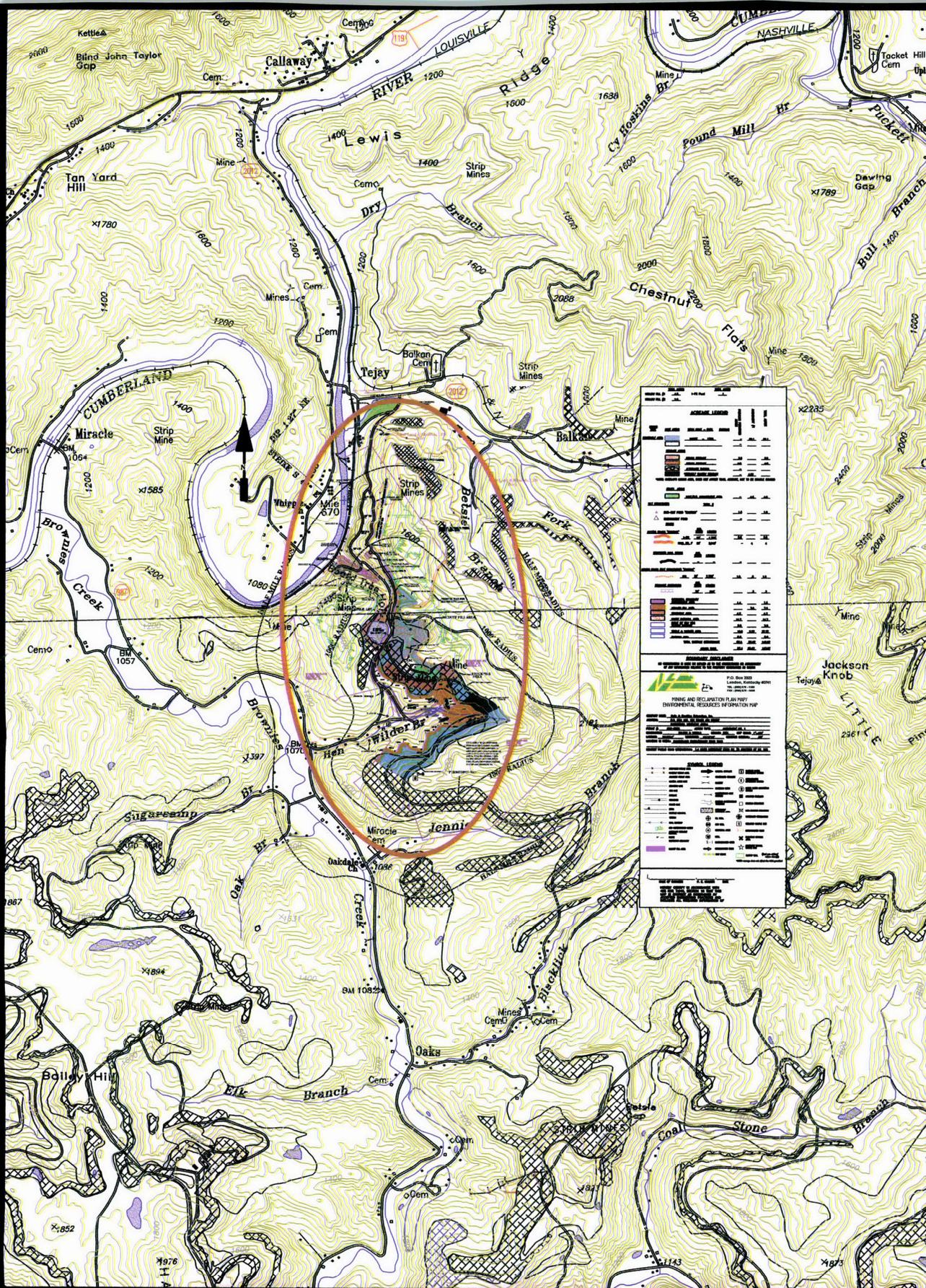
KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category: Surface Mining Operation <i>HAZARD</i>	Filing Fee Enclosed: \$240.00
--	----------------------------------

**VIII. CERTIFICATION**

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

NAME AND OFFICIAL TITLE (type or print): Stephen Hamilton / Secretary-Treasurer	TELEPHONE NUMBER (area code and number): (502) 348-0084
SIGNATURE <i>Stephen Hamilton</i>	DATE: February 27, 2007



Nally & Hamilton Enterprises Inc.  
 Permit #: 807-8056

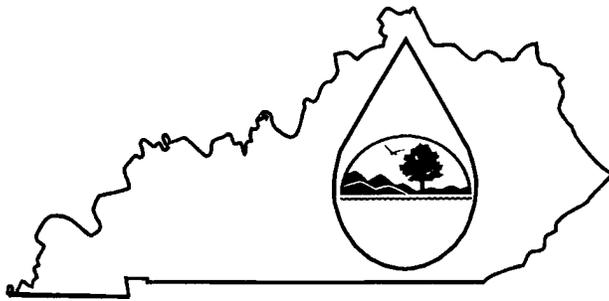
# Location Map

Scale: 1" = 2000'

# KPDES FORM C

## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

### PERMIT APPLICATION



A complete application consists of this form and Form 1.  
For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Nally & Hamilton Enterprises, Inc. Wilder Br.		County: Bell					
<b>I. OUTFALL LOCATION</b>		AGENCY USE					

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
See Attachment							

### II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
A	Surface Mining	35.37	None Proposed	I - U
B	Surface Mining	30.41	None Proposed	I - U
C	Surface Mining	36.69	None Proposed	I - U
D	Surface Mining	18.24	None Proposed	I - U
E	Surface Mining	53.12	None Proposed	I - U
F	Surface Mining	24.95	None Proposed	I - U
G	Surface Mining	76.25	None Proposed	I - U
I-PS	Surface Mining	175.02	None Proposed	I - U

Nally & Hamilton Enterprises, Inc.

DNR Permit No. 807-8056 AM 01

I (Continued)

Outfall Locations

Pond	Latitude	Longitude	Receiving Water
A	36° 45' 3.59"	83° 33' 31.98"	Cumberland River
B	36° 44' 47.76"	83° 33' 37.24"	Hen Wilder Branch
C	36° 44' 44.12"	83° 33' 30.08"	Hen Wilder Branch
D	36° 44' 34.11"	83° 33' 22.20"	Hen Wilder Branch
E	36° 44' 29.84"	83° 33' 25.55"	Hen Wilder Branch
F	36° 44' 29.80"	83° 33' 33.14"	Hen Wilder Branch
G	36° 44' 53.21"	83° 33' 37.22"	Hen Wilder Branch
I-PS	36° 44' 38.92"	83° 33' 22.42"	Hen Wilder Branch

# I-PS EXISTING POND

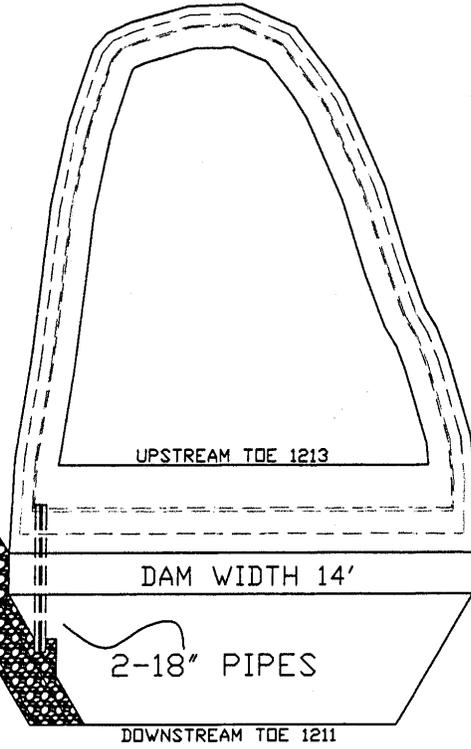
1"=50'

(signature) *[Signature]*  
 (registration no.) 12575  
 (date) 6/6/04

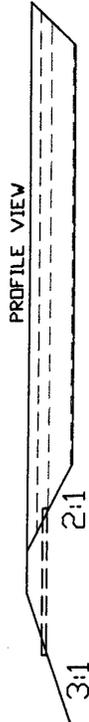
I hereby certify, in accordance with 405 KAR 7:04DE, Section 10, that this document is correct as determined by accepted engineering practices and includes all the information required of it by KRS Chapter 350 and KAR Title 405. (Affix engineer's seal)



PLAN VIEW

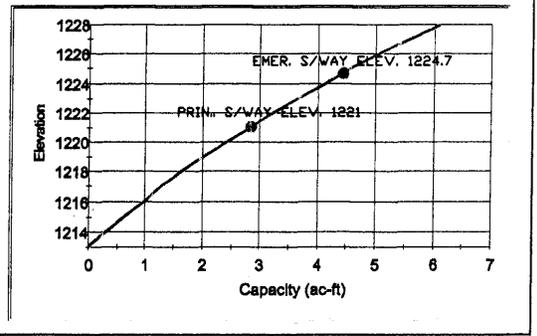


PROFILE VIEW

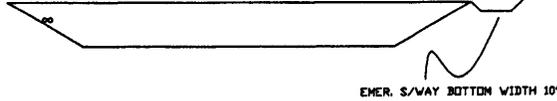


- EMERGENCY S/WAY ELEV.
- PRINC. S/WAY ELEV.
- SEDIMENT ELEV.

SEDIMENT LEVEL/CLEANOUT ELEV.  
 EMER. S/WAY SIDE SLOPE 2  
 EMER. S/WAY BOTTOM WIDTH 10'  
 EMER. S/WAY ELEV. 1224.7  
 PRIN. S/WAY ELEV. 1221  
 TOP OF DAM ELEV. 1228  
 BOTTOM ELEV. 1213



CROSS SECTION VIEW

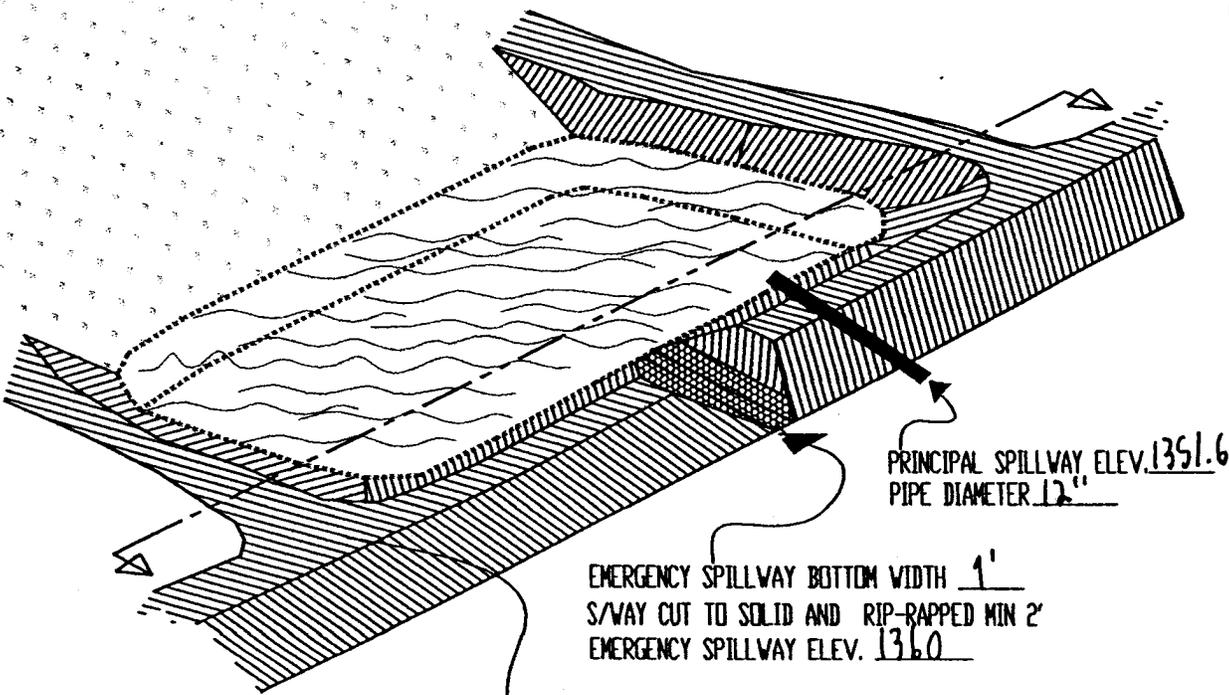
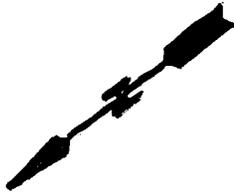


PIPE OUTLET RIP-RAPPED IF NOT DISCHARGING INTO SPILLWAY CHANNEL

# SILT STRUCTURE # A

NOT TO SCALE

POND DIMENSIONS	
BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	63'
BOTTOM LENGTH	94'
TOP LENGTH AT EMER. SPILLWAY	152'
POND DEPTH	14.5'
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1

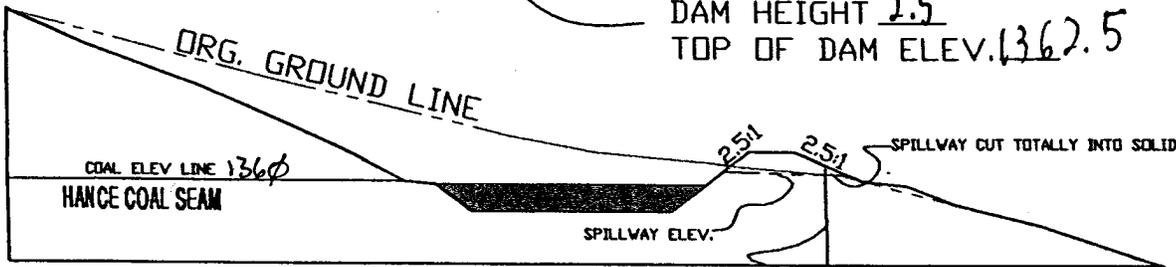


ORG. GND

BOTTOM ELEV. 1345.5  
 SEDIMENT POOL ELEV. 1350.1  
 CLEANOUT 100%

EMERGENCY SPILLWAY BOTTOM WIDTH 1'  
 S/WAY CUT TO SOLID AND RIP-RAPPED MIN 2'  
 EMERGENCY SPILLWAY ELEV. 1360

TOP OF DAM WIDTH 10'  
 DAM HEIGHT 2.5  
 TOP OF DAM ELEV. 1362.5

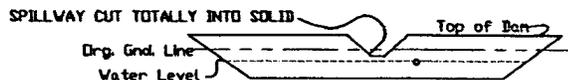


ORG. GND

SPILLWAY CROSS-SECTION

*[Signature]*  
 hereby certify, in accordance with 405 KAR 7040E, Section 10, that this document is correct as determined by accepted engineering practices and includes all the information required of it by KRS Chapter 350 and KAR Title 405. (Affix engineer's seal)

12575 (Registration no.)  
 02/12/06 (Date)

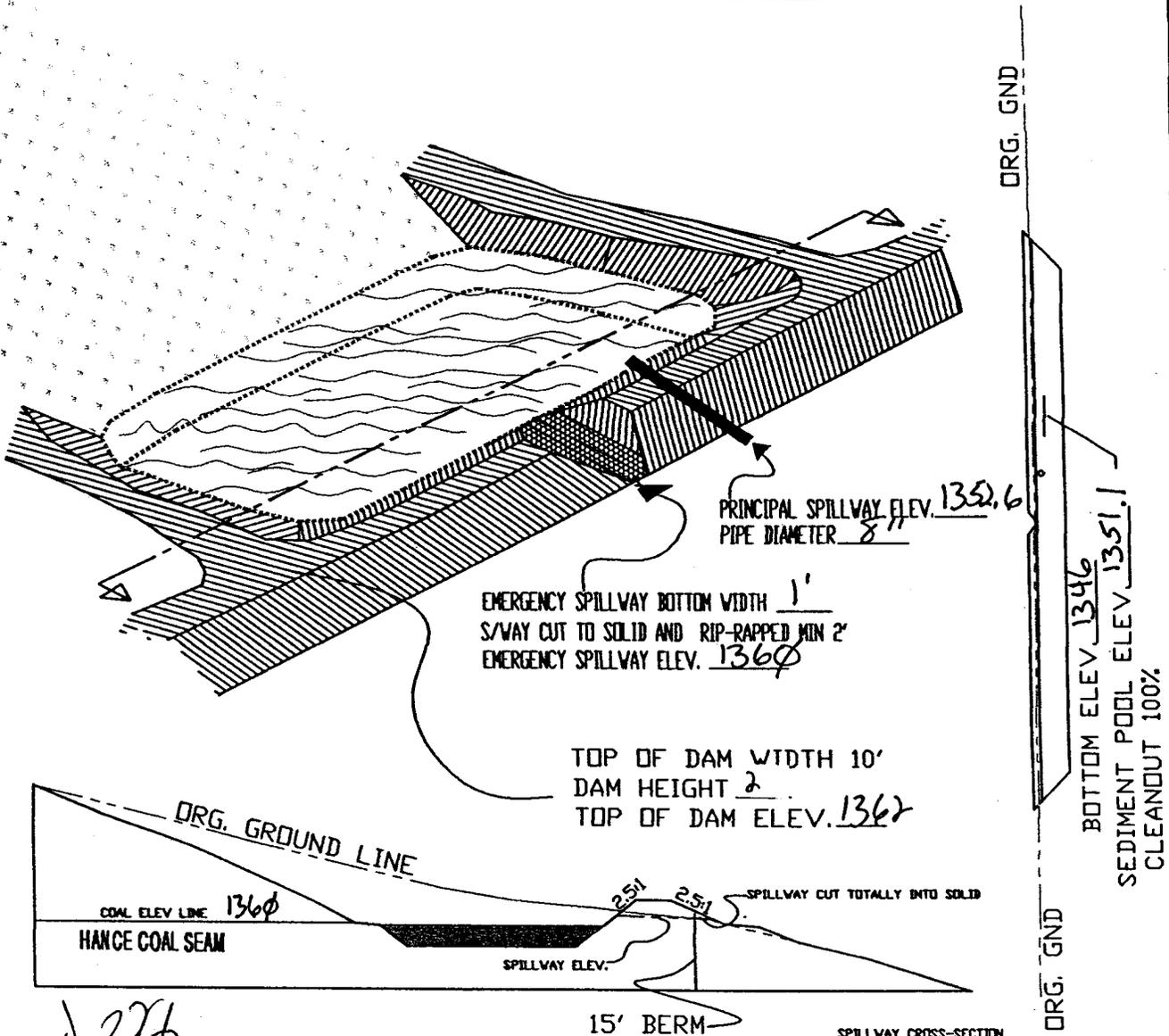
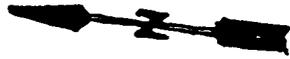


# SILT STRUCTURE # B

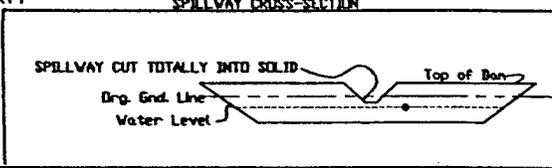
NOT TO SCALE

## POND DIMENSIONS

BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	61
BOTTOM LENGTH	94
TOP LENGTH AT EMER. SPILLWAY	150'
POND DEPTH	14
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1



  
 (signature) 12575 02/17/06  
 (registration no.) (date)  
 hereby certify, in accordance with 405 KAR 740E, Section 10, that  
 this document is correct as determined by accepted engineering  
 practices and includes all the information required of it by KRS  
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

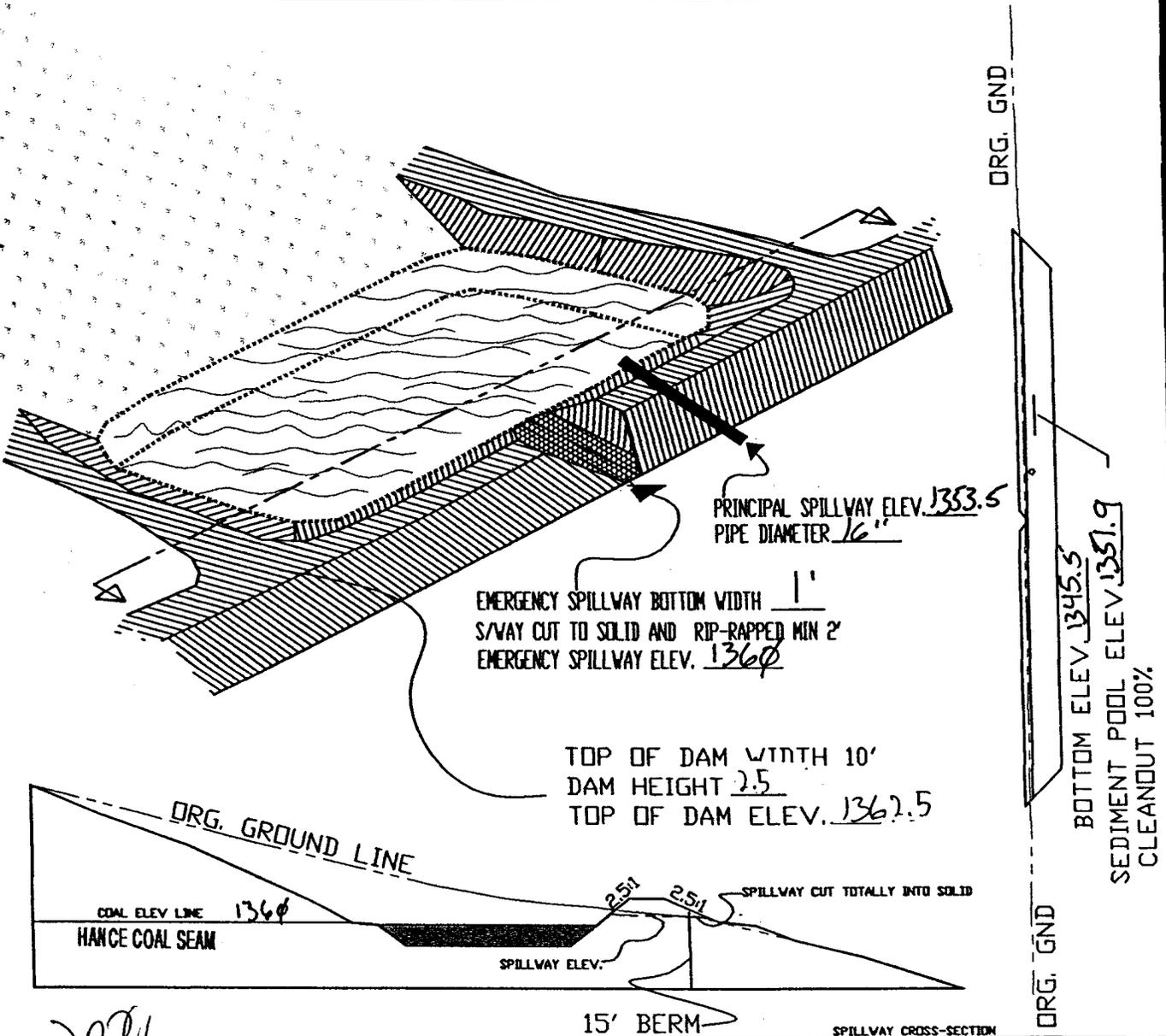


# SILT STRUCTURE# C

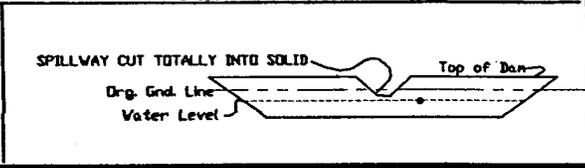
NOT TO SCALE

## POND DIMENSIONS

BOTTOM WIDTH	5
TOP WIDTH AT EMER. SPILLWAY	61
BOTTOM LENGTH	94
TOP LENGTH AT EMER. SPILLWAY	150
POND DEPTH	14.5
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1



  
 (signature) 12575 02/17/06  
 (registration no.) (date)  
 hereby certify, in accordance with 405 KAR 7040E, Section 10, that  
 this document is correct as determined by accepted engineering  
 practices and includes all the information required of it by KRS  
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

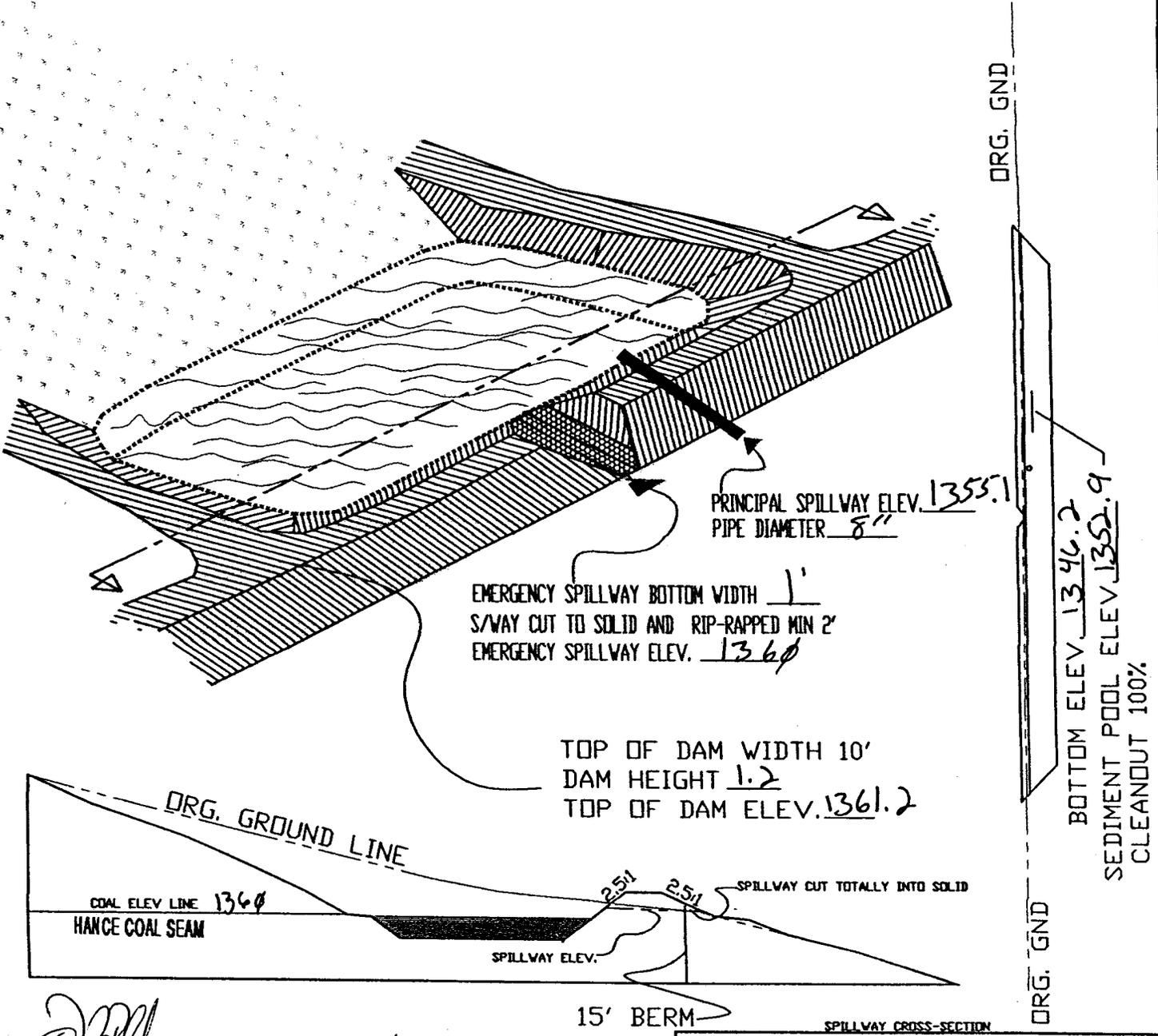


# SILT STRUCTURE# D

NOT TO SCALE

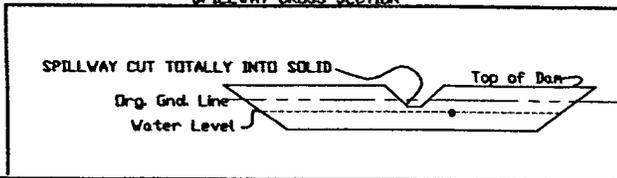


POND DIMENSIONS	
BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	61'
BOTTOM LENGTH	94'
TOP LENGTH AT EMER. SPILLWAY	150'
POND DEPTH	13.7
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1



  
 hereby certify, in accordance with 405 KAR 7040E, Section 10, that  
 this document is correct as determined by accepted engineering  
 practices and includes all the information required of it by KRS  
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

12575 (registration no.)  
02/17/06 (date)

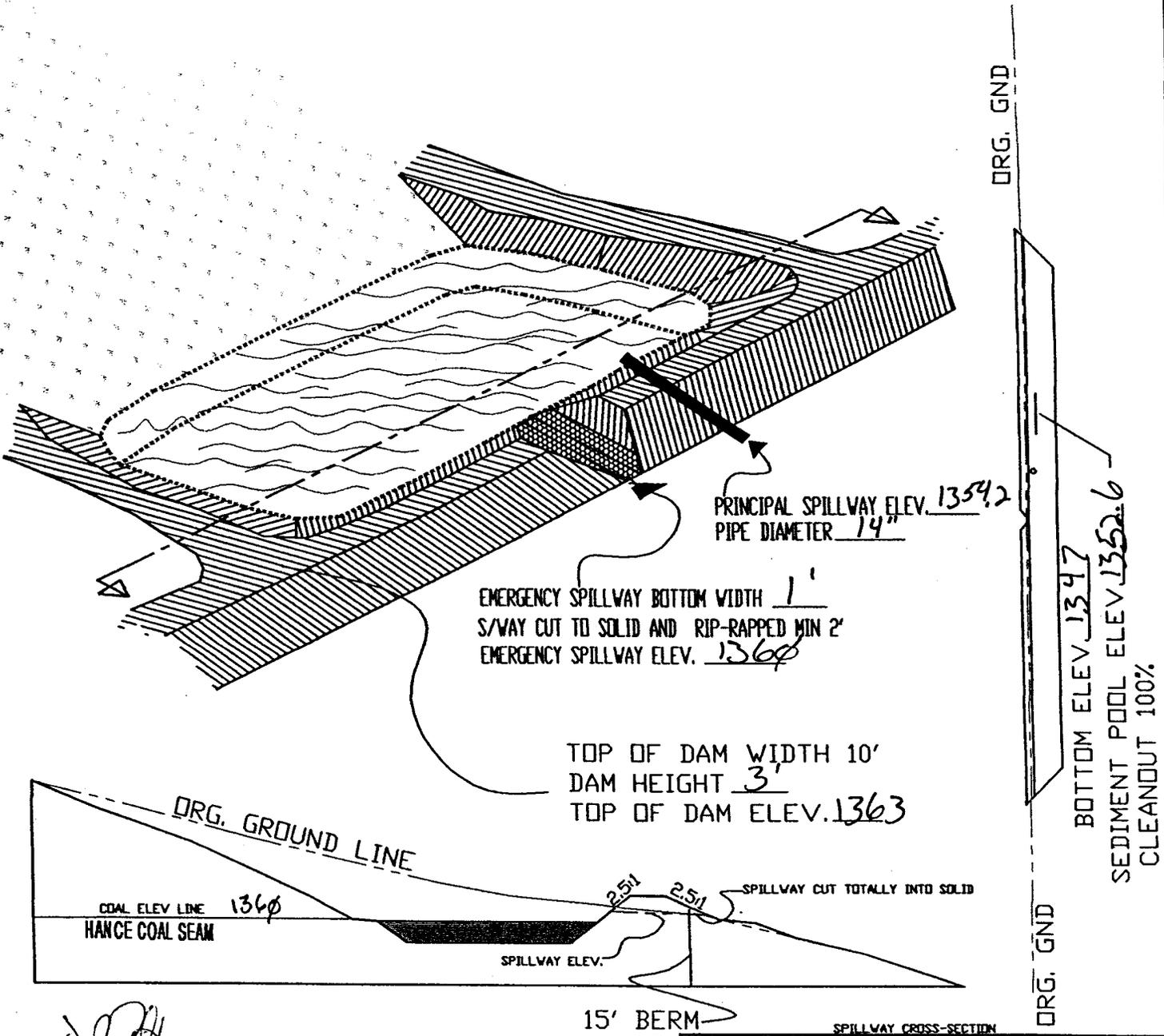


# SILT STRUCTURE # E

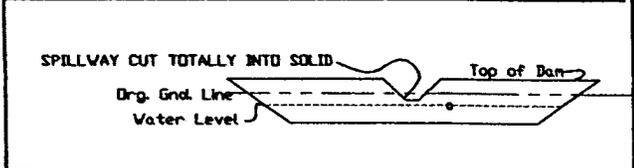
NOT TO SCALE



POND DIMENSIONS	
BOTTOM WIDTH	40'
TOP WIDTH AT EMER. SPILLWAY	66'
BOTTOM LENGTH	120'
TOP LENGTH AT EMER. SPILLWAY	146'
POND DEPTH	13'
POND SIDE SLOPES	1:1
SPILLWAY SIDE SLOPES	2:1



I, [Signature] 12575 02/11/06  
 (Signature) (registration no.) (date)  
 hereby certify, in accordance with 405 KAR 7040E, Section 10, that  
 this document is correct as determined by accepted engineering  
 practices and includes all the information required of it by KRS  
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

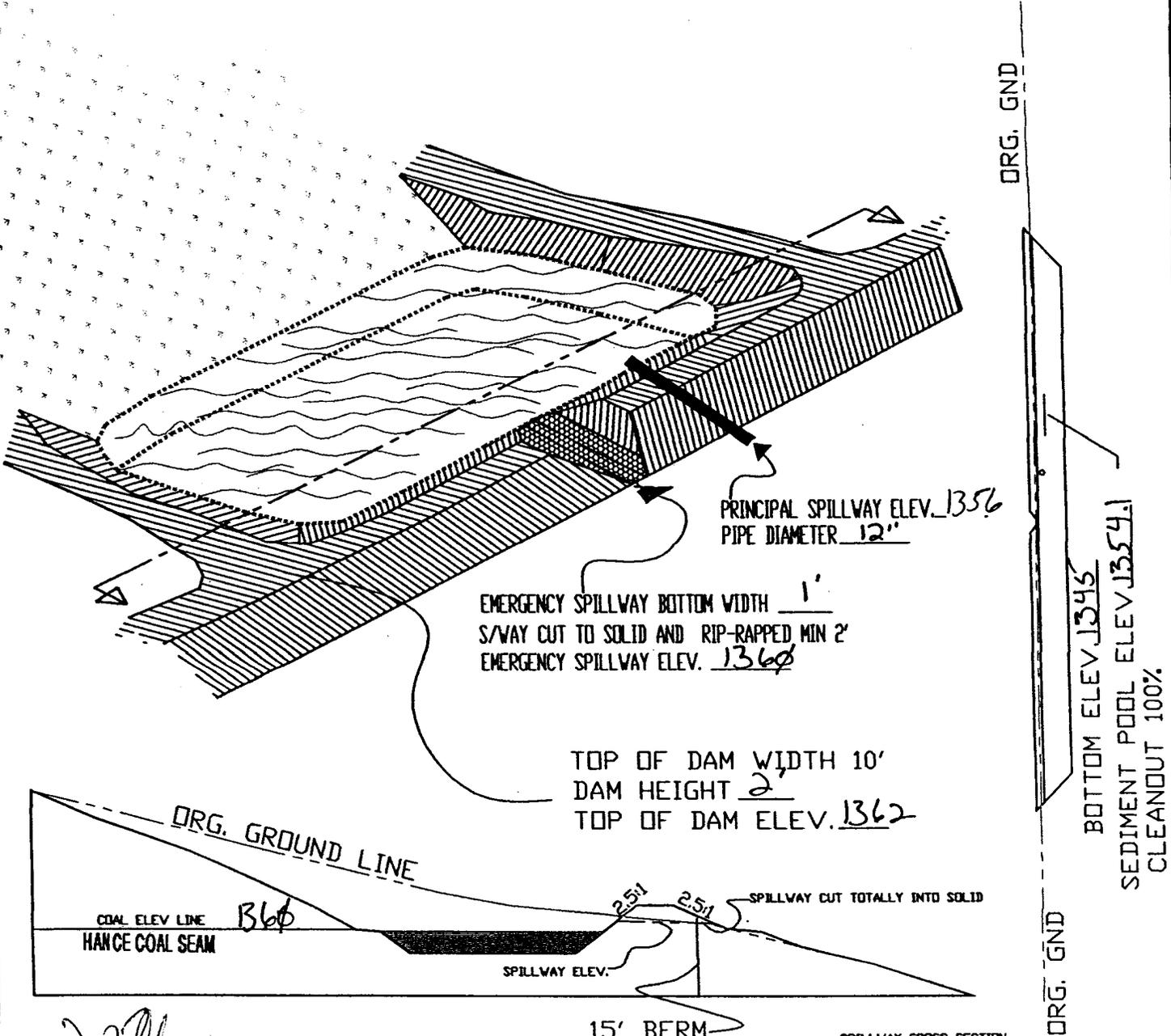


# SILT STRUCTURE # F

NOT TO SCALE



POND DIMENSIONS	
BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	65'
BOTTOM LENGTH	94'
TOP LENGTH AT EMER. SPILLWAY	154'
POND DEPTH	15'
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	0.25:1



ORG. GND

PRINCIPAL SPILLWAY ELEV. 1356  
PIPE DIAMETER 12"

EMERGENCY SPILLWAY BOTTOM WIDTH 1'  
S/WAY CUT TO SOLID AND RIP-RAPPED MIN 2'  
EMERGENCY SPILLWAY ELEV. 1360

TOP OF DAM WIDTH 10'  
DAM HEIGHT 2'  
TOP OF DAM ELEV. 1362

ORG. GROUND LINE

COAL ELEV LINE 1360  
HANCE COAL SEAM

SPILLWAY CUT TOTALLY INTO SOLID

SPILLWAY ELEV.

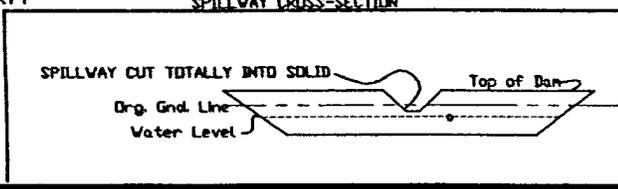
15' BERM

SPILLWAY CROSS-SECTION

BOTTOM ELEV. 1345  
SEDIMENT POOL ELEV. 1354  
CLEANOUT 100%

ORG. GND

I.  12575 02/17/06  
 (signature) (registration no.) (date)  
 hereby certify, in accordance with 405 KAR 7440E, Section 10, that  
 this document is correct as determined by accepted engineering  
 practices and includes all the information required of it by KRS  
 Chapter 350 and KAR Title 405. (Affix engineer's seal)



**II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)**

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

- Yes (Complete the following table.)  No (Go to Section III.)

OUTFALL NUMBER (list)	OPERATIONS CONTRIBUTING FLOW (list)	FREQUENCY		FLOW				Duration (in days)
		Days Per Week (specify average)	Months Per Year (specify average)	Flow Rate (in mgd)		Total volume (specify with units)		
				Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	
A	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
B	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
C	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
D	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
E	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
F	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
G	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
I-PS	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown

**III. MAXIMUM PRODUCTION**

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

- Yes (Complete Item III-B) List effluent guideline category:  
 No (Go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measures of operation)?

- Yes (Complete Item III-C)  No (Go to Section IV)

C. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your maximum level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

MAXIMUM QUANTITY			Affected Outfalls (list outfall numbers)
Quantity Per Day	Units of Measure	Operation, Product, Material, Etc. (specify)	

**IV. IMPROVEMENTS**

A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.

- Yes (Complete the following table)  No (Go to Item IV-B)

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

--	--	--	--	--	--

**B. OPTIONAL:** You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

**V. INTAKE AND EFFLUENT CHARACTERISTICS**

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.

NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered 5-18.

D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in Table C-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE	POLLUTANT	SOURCE

**VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS**

A. Is any pollutant listed in Item V-C a substance or a component of a substance which you use or produce, or expect to use or produce over the next 5 years as an immediate or final product or byproduct?

Yes (List all such pollutants below)

No (Go to Item VI-B)

B. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharge of pollutants may during the next 5 years exceed two times the maximum values reported in Item V?

Yes (Complete Item VI-C)

No (Go to Item VII)

C. If you answered “Yes” to Item VI-B, explain below and describe in detail to the best of your ability at this time the sources and expected levels of such pollutants which you anticipate will be discharged from each outfall over the next 5 years. Continue on additional sheets if you need more space.

**VII. BIOLOGICAL TOXICITY TESTING DATA**

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

Yes (Identify the test(s) and describe their purposes below)  No (Go to Section VIII)

Empty box for providing details of biological toxicity testing.

**VIII. CONTRACT ANALYSIS INFORMATION**

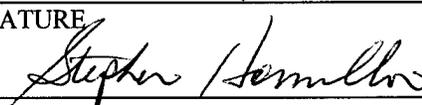
Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below)  No (Go to Section IX)

NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)

**IX. CERTIFICATION**

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

NAME AND OFFICIAL TITLE (type or print): Stephen Hamilton / Secretary-Treasurer	TELEPHONE NUMBER (area code and number): (502) 348-0084
SIGNATURE 	DATE February 27, 2007

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C)										OUTFALL NO.		
Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.												
1. POLLUTANT	2. EFFLUENT						3. UNITS (specify if blank)		4. INTAKE (optional)			
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No of Analyses
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Biochemical Oxygen Demand (BOD)								N/A				
b. Chemical Oxygen Demand (COD)								N/A				
c. Total Organic Carbon (TOC)								N/A				
d. Total Suspended Solids (TSS)							1	12 Mg/L				
e. Ammonia (as N)								N/A				
f. Flow (in units of MGD)	VALUE		VALUE		VALUE		1	10 gpm MGD	VALUE			
g. Temperature (winter)	VALUE		VALUE		VALUE			1.11 °c	VALUE			
h. Temperature (summer)	VALUE		VALUE		VALUE			24.44 °c	VALUE			
i. pH	MINIMUM	MAXIMUM	MINIMUM	MAXIMUM				STANDARD UNITS 8.10				

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO.  (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		6. INTAKE (optional)			
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Bromide (24959-67-9)		X												
b. Bromine Total Residual		X												
c. Chloride		X												
d. Chlorine, Total Residual		X												
e. Color		X												
f. Fecal Coliform		X												
g. Fluoride (16984-48-8)		X												
h. Hardness (as CaCO <sub>3</sub> )		X												
i. Nitrate - Nitrite (as N)		X												
j. Nitrogen, Total Organic (as N)		X												
k. Oil and Grease		X												
l. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium Total		X												
(4) Radium, 226, Total		X												

Part B - Continued														
1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
n. Sulfate (as SO <sub>4</sub> ) (14808-79-8)	X		65						1	Mg/L				
o. Sulfide (as S)		X												
p. Sulfite (as SO <sub>3</sub> ) (14286-46-3)		X												
q. Surfactants		X												
r. Aluminum, Total (7429-90)		X												
s. Barium, Total (7440-39-3)		X												
t. Boron, Total (7440-42-8)		X												
u. Cobalt, Total (7440-48-4)		X												
v. Iron, Total (7439-89-6)	X		0.22						1	Mg/L				
w. Magnesium Total (7439-96-4)		X												
x. Molybdenum Total (7439-98-7)		X												
y. Manganese, Total (7439-96-6)	X		0.15						1	Mg/L				
z. Tin, Total (7440-31-5)		X												
aa. Titanium, Total (7440-32-6)		X												

**Part C** – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark "X" in the **Believed Absent** column for each pollutant you believe to be absent. If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
<b>METALS, CYANIDE AND TOTAL PHENOLS</b>															
1M. Antimony Total (7440-36-0)		X		0.002						1	Mg/L				
2M. Arsenic, Total (7440-38-2)			X												
3M. Beryllium Total (7440-41-7)		X		0.001						1	Mg/L				
4M. Cadmium Total (7440-43-9)		X		0.002						1	Mg/L				
5M. Chromium Total (7440-43-9)		X		0.002						1	Mg/L				
6M. Copper Total (7550-50-8)		X		0.02						1	Mg/L				
7M. Lead Total (7439-92-1)		X		0.001						1	Mg/L				
8M. Mercury Total (7439-97-6)		X		0.0001						1	Mg/L				
9M. Nickel, Total (7440-02-0)		X		0.01						1	Mg/L				
10M. Selenium, Total (7782-49-2)		X		0.003						1	Mg/L				
11M. Silver, Total (7440-28-0)		X		0.01						1	Mg/L				

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)		
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass		
<b>METALS, CYANIDE AND TOTAL PHENOLS (Continued)</b>																
12M. Thallium, Total (7440-28-0)		X		0.1						1	Mg/L					
13M. Zinc, Total (7440-66-6)		X		0.005						1	Mg/L					
14M. Cyanide, Total (57-12-5)		X		0.01						1	Mg/L					
15M. Phenols, Total		X		0.01						1	Mg/L					
<b>DIOXIN</b>																
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			X	DESCRIBE RESULTS:												
<b>GC/MS FRACTION – VOLATILE COMPOUNDS</b>																
1V. Acrolein (107-02-8)			X													
2V. Acrylonitrile (107-13-1)			X													
3V. Benzene (71-43-2)			X													
5V. Bromoform (75-25-2)			X													
6V. Carbon Tetrachloride (56-23-5)			X													
7V. Chloro- benzene (108-90-7)			X													
8V. Chlorodibro- momethane (124-48-1)			X													

Part C - Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)		
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass		
9V. Chloroethane (74-00-3)			X													
10V. 2-Chloroethylvinyl Ether (110-75-8)			X													
11V. Chloroform (67-66-3)			X													
12V. Dichlorobromomethane (75-71-8)			X													
14V. 1,1-Dichloroethane (75-34-3)			X													
15V. 1,2-Dichloroethane (107-06-2)			X													
16V. 1,1-Dichloroethylene (75-35-4)			X													
17V. 1,2-Dichloropropane (78-87-5)			X													
18V. 1,3-Dichloropropylene (452-75-6)			X													
19V. Ethylbenzene (100-41-4)			X													
20V. Methyl Bromide (74-83-9)			X													

Part C - Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)	
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
21V. Methyl Chloride (74-87-3)			X												
22V. Methylene Chloride (75-00-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V. Trichloroethylene (79-01-6)			X												
30V. Vinyl Chloride (75-01-4)			X												

Part C - Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
<b>GC/MS FRACTION - ACID COMPOUNDS</b>															
1A. 2-Chloro-phenol (95-57-8)			X												
2A. 2,4-Dichloro-phenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-o-cresol (534-52-1)			X												
5A. 2,4-Dinitro-phenol (51-28-5)			X												
6A. 2-Nitro-phenol (88-75-5)			X												
7A. 4-Nitro-phenol (100-02-7)			X												
8A. P-chloro-m-cresol (59-50-7)			X												
9A. Pentachloro-phenol (87-88-5)			X												
10A. Phenol (108-05-2)		X		0.01						1	Mg/L				
11A. 2,4,6-Tri-chlorophenol (88-06-2)			X												
<b>GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS</b>															
1B. Acena-phthene (83-32-9)			X												

Part C - Continued															
1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (Continued)															
2B. Acena- phtylene (208-96-8)			X												
3B. Anthra- cene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo(a)- anthracene (56-55-3)			X												
6B. Benzo(a)- pyrene (50-32-8)			X												
7B. 3,4-Benzo- fluoranthene (205-99-2)			X												
8B. Benzo(ghi) perylene (191-24-2)			X												
9B. Benzo(k)- fluoranthene (207-08-9)			X												
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)			X												
11B. Bis (2-chlor- oisopropyl)- Ether			X												
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			X												

Part C - Continued															
1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (Continued)															
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)			X												
14B. Butylbenzyl phthalate (85-68-7)			X												
15B. 2-Chloronaphthalene (7005-72-3)			X												
16B. 4-Chlorophenyl phenyl ether (7005-72-3)			X												
17B. Chrysene (218-01-9)			X												
18B. Dibenzo-(a,h) Anthracene (53-70-3)			X												
19B. 1,2-Dichlorobenzene (95-50-1)			X												
20B. 1,3-Dichlorobenzene (541-73-1)			X												
21B. 1,4-Dichlorobenzene (106-46-7)			X												
22B. 3,3-Dichlorobenzidene (91-94-1)			X												
23B. Diethyl Phthalate (84-66-2)			X												

Part C - Continued															
1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
<b>GC/MS FRACTION - BASE/NEUTRAL COMPOUNDS (Continued)</b>															
24B. Dimethyl Phthalate (131-11-3)			X												
25B. Di-N-butyl Phthalate (84-74-2)			X												
26B. 2,4-Dinitrotoluene (121-14-2)			X												
27B. 2,6-Dinitrotoluene (606-20-2)			X												
28B. Di-n-octyl Phthalate (117-84-0)			X												
29B. 1,2-diphenylhydrazine (as azonbenzene) (122-66-7)			X												
30B. Fluoranthene (208-44-0)			X												
31B. Fluorene (86-73-7)			X												
32B. Hexachlorobenzene (118-71-1)			X												
33B. Hexachlorobutadiene (87-68-3)			X												
34B. Hexachlorocyclopentadiene (77-47-4)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
<b>GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)</b>															
35B. Hexachloroethane (67-72-1)			X												
36B. Indeno-(1,2,3-oc)-Pyrene (193-39-5)			X												
37B. Isophorone (78-59-1)			X												
38B. Napthalene (91-20-3)			X												
39B. Nitrobenzene (98-95-3)			X												
40B. N-Nitrosodimethylamine (62-75-9)			X												
41B. N-nitrosodi-n-propylamine (621-64-7)			X												
42B. N-nitrosodiphenylamine (86-30-6)			X												
43B. Phenanthrene (85-01-8)			X												
44B. Pyrene (129-00-0)			X												
45B. 1,2,4 Trichlorobenzene (120-82-1)			X												

Part C - Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
<b>GC/MS FRACTION - PESTICIDES</b>															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (58-89-9)			X												
4P. gamma-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α- Endosulfan (115-29-7)			X												
12P. β- Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												

Part C - Continued

1. POLLUTANT And CAS NO.  (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
<b>GC/MS FRACTION - PESTICIDES</b>															
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

*Logos Engineering*  
*P.O. Box 350*  
*Manchester, Kentucky 40962*

*Don R. Roberts*  
*Professional Engineer*

*Office (606) 598-6746*  
*Fax (606) 598-1544*

May 18, 2007

Ms. Sara Beard  
KPDES BRANCH  
Division of Water  
Frankfort Office Park  
14 Reilly Road  
Frankfort, KY 40601

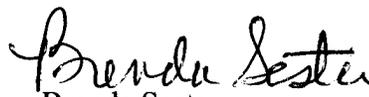
RE: Nally & Hamilton Enterprises, Inc.  
DNR Permit #807-8056, AM 01  
KPDES #KY0042765

Dear Sara:

Enclosed you will find KPDES FORM 1 (includes First National Bank Money Order for \$240.00 for filing fee) and KPDES FORM C concerning the above referenced project.

If you should have any questions, please contact our office.

Sincerely,

  
Brenda Sester  
Logos Engineering

BS/

Enclosures



ERNIE FLETCHER  
GOVERNOR

**ENVIRONMENTAL AND PUBLIC PROTECTION CABINET**

DEPARTMENT FOR ENVIRONMENTAL PROTECTION

DIVISION OF WATER

14 REILLY ROAD

FRANKFORT, KENTUCKY 40601-1190

[www.kentucky.gov](http://www.kentucky.gov)

TERESA J. HILL  
SECRETARY

June 6, 2007

Mr. Stephen Hamilton  
Nally & Hamilton Enterprises, Incorporated  
Post Office Box 157  
Balkan, Kentucky 40977

Re: Complete KPDES Permit Application  
KPDES No.: KY0042765  
AI ID: 133  
Wilder Branch Job  
Bell County, Kentucky

Dear Mr. Hamilton:

Your Kentucky Pollutant Discharge Elimination System (KPDES) permit application for the above-referenced facility was received by the Division of Water on May 23, 2007, and has been determined complete. As per 401 KAR 5:075, Section 1(7), the official effective date of your application has been determined as June 6, 2007, the date of this notice.

A technical review of your permit application will commence in the near future. Please be aware that you may be asked to provide additional information to clarify, modify, or supplement your application material. A request for this additional information will not render your application incomplete.

If you have any questions concerning this matter, please contact Larry Sowder at (502) 564-8158, extension 472.

Sincerely,

A handwritten signature in cursive script that reads "Vickie L. Pratter for NG".

**Nancy Green, Program Coordinator**  
Inventory and Data Management Section  
KPDES Branch  
Division of Water

NG:ng

c: Division of Water Files