NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

Received 09/22/2014

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

NAME: AG Andrikopoulous Resources Inc
ADDRESS: PO Box 788
Cheyenne, WY 82003-0788

FACILITY: ELK SPRINGS #3 WELL
LOCATION: NO ADDRESS GIVEN
NEAR ELK SPRINGS, CO 81633

ATTN: A.G. Andrikopoulous, Pres

COG840009	001-A
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	07/01/2014	TO	07/31/2014

DMR Mailing ZIP CODE: 82003
MINOR

Discharge to Wolf Creek
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******	******	7.69	******	7.69	SU	0	Monthly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6.5 MINIMUM	******	9 MAXIMUM	SU		Monthly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	******	******	******	******	11	11	mg/L	0	Monthly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	30 30DA AVG	45 DAILY MX	mg/L		Monthly	GRAB
Arsenic, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
00978 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Selenium, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
00981 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Beryllium, total recoverable (as Be)	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
00998 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Nickel, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	5	5	ug/L	0	Monthly	Grab
01074 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Zinc, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	20	20	ug/L	0	Monthly	Grab
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
William R Scribner, V.P.	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.	[signature]	307	634444	09/16/2014
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

Oil and grease - see D.24, pg 14.

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Cadmium, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
01113 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Lead, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
01114 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Copper, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	******	******	******	******	******	0	mg/L	0	Cont.	Grab
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	10 INST MAX	mg/L		Contingent	GRAB
Chromium, trivalent total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
04262 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	14.489247	14.489247	gal/min	******	******	******	******	0	Monthly	Inst.
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	21 30DA AVG	Req. Mon. DAILY MX	gal/min	******	******	******	******		Monthly	INSTAN
Solids, total dissolved	SAMPLE MEASUREMENT	******	******	******	******	5630	5630	mg/L	0	Monthly	Grab
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Chromium, hexavalent tot recoverable	SAMPLE MEASUREMENT	******	******	******	******	0	0	ug/L	0	Monthly	Grab
78247 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	******	0	N	******	******	******	******	0	Monthly	Visual
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. INST MAX	Y=1;N=0	******	******	******	******		Monthly	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
William R Scribner VP	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.	[signature]	307 634 4441		09/16/2014
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Oil and grease - see D.24, pg 14.

Received 09/22/2014

A. G. ANDRIKOPOULOS RESOURCES, INC.

September 16. 2014

Colorado Department of Health and Environment
Attn.: DMR
WQCD - Compliance
4300 Cherry Creek Dr. S, Bldg B-2.
Denver, CO 80246-1530

RE: Permit No. COG840009
Elk Springs #3
Moffat County, Colorado

Ladies & Gentlemen:

Attached are the Discharge Monitoring Reports for 7/1/14 to 7/31/14 for outfall 001-A.

If you should have any questions, please call either Anthony Andrikopoulos or Bill Scribner at (307) 634-4441.

Sincerely,

A. G. ANDRIKOPOULOS RESOURCES, INC.

William R. Scribner, Vice President

WRS/bs

Enclosures

Office and **Mailing Address**
P. O. Box 788
Cheyenne, Wyoming 82003-0788

Telephone (307) 634-4441
Telefax (307) 634-4445
eMail A. G. Andrikopoulos [redacted]
W. R. Scribner [redacted]