CONFIDENTIAL



FORM 245-C

ANNUAL REPORT FOR COAL MINES FOR POSSESSORY INTEREST TAX TAX YEAR 2007

FORM DUE April 1, 2007

YEAR ENDING
December 31, 2006

COMPANY/BUSINESS NAME & ADDRESS

A Detailed Set of Instructions are included with this Form. Please include your most recent (2007) 10K and Stockholder Report A Form 200 must accompany this form.

COMPLETE & MAIL TO:

OFFICE OF THE NAVAJO TAX COMMISSION POST OFFICE BOX 1903 WINDOW ROCK, ARIZONA 86515

FOR INQUIRIES, PLEASE CALL: (928) 871-7513

www.navajotax.org

ONTC PIT-FORM 245-C Revised 1/2007

COAL MINES FOR THE YEAR ENDED DECEMBER 31, 2006 COMPANY/BUSINESS NAME: FILING INSTRUCTIONS ARE ENCLOSED Please refer to filing instructions when completing this report. If you need assistance in completing this report, call the Office of the Navajo Tax Commission at (928) 871-7513. Abbreviations used in this report include: TN = Short Tons RECL = Reclamation PROD = Production PITX = Possessory Interest Tax **K** = Thousands **ENVI** = Environmental BLDG = Building H/S = Health & Safety YD = Cubic Yards **DEV** = **Development** ROY = RoyaltyTN-K = Tons Thousands MINING COMPANY CONFIDENTIAL DATA Lease or Contract No.: Name of Property Name of Operator/Lessee: Address of Operator/Lessee : Name of Company Official Responsible For This Report: Telephone Number: Name of Contact Person Regarding Information In This Report: **Telephone Number:** Type of Mine - - Underground, Strip Mine : Coal Quality for 2006 Sales BULK DENSITY (lb.ft³) BTUASH % **MOISTURE % SULFUR % Date Production Started: Date Production Stopped:** Average Weighted Sales Price Per Unit Received for Coal Sold in the Year 2006 If you need assistance in completing this report, call the Office of the Navajo Tax Commission at (928) 871-7513

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FOR THE	COAL MINES E YEAR ENDED DECEMBER 31, 2006	
OMPANY/BUSINESS NAME :		
ADD ist any additional information which you be	DITIONAL INFORMATION elieve should be considered in determinin	g the value of this mine.
accompanying schedules and statements	correct, and complete.	mation and belief, it is true,
(d	day of , 200 lay)	
Taxpayer or Duly Authorized Agent Signature	Print or Type Name	() Telephone Number
Title	Company	
************	Company	·
**************************************		·
State Of	**************************************	******