

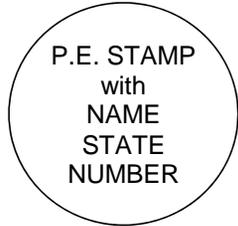
**Appendix 42.C**

Example Form for Annual Pond and Impoundment Inspection Report

**NAVAJO TRANSITIONAL ENERGY COMPANY  
PINABETE PERMIT  
[YEAR] ANNUAL IMPOUNDMENT INSPECTION REPORT**

| Impoundment Id. | Type | Structural Weaknesses or Instability | Monitoring Devices | Water/Sediment Level |                             | Maximum Permissible Depth or Gauge Reading | Existing Storage Capacity (ac-ft) | Req,d Capacity (ac-ft) | As-built Capacity (ac-ft) | Deficiencies noted or comments: |
|-----------------|------|--------------------------------------|--------------------|----------------------|-----------------------------|--|-----------------------------------|------------------------|---------------------------|---------------------------------|
|                 |      |                                      |                    | Elevation            | Depth or Gauge Reading (ft) |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |
|                 |      |                                      |                    |                      |                             |  |                                   |                        |                           |                                 |

I, [NAME OF LICENSED PROFESSIONAL ENGINEER], certify that the impoundments listed in the above table were inspected by myself or under my direction in accordance with 30 CFR Part 816.49(a)(11) and were found to be maintained in accordance with the approved design plans, except as noted below.



Notes:

1. (Notes will identify deficiencies items, corrective measures to be taken and the timing to correct the deficiency.)
- 2.