Material Safety Data Sheet

Section 1 — Product Identification

Trade Names:	Non-Traditional Cat Litter, Scoopable Cat Litter, Clumping Cat Litter, Blended Cat Litter, Traditional Cat Litter, Conventional Cat Litter, Non-Clumping Cat Litter
Common Names/ Synonyms:	Cat Litter
Product Use:	Absorbent, Adsorbent
Manufacturers Name:	Catsan.Inc, LLC, a wholly-owned subsidiary of Badger Mining Corporation
Manufacturers Address:	P.O. Box 328 409 South Church Street Berlin, WI 54923
Manufacturers Telephone:	800-9327263 (7 am — 5 pm Central Time Monday-Friday) 920-361 -2388
Manufacturers Fax:	920-361 -2826
Emergency Number:	800-932-7263 (7 am — 5 pm Central Time Monday-Friday) 920-361 -2388

Section 2 — Composition and Information on Ingredients

This product may contain varying concentrations of the following minerals:

Chemical Name	CAS Number	Specific Chemical Identity	Concentration
Clinoptilolite	1 31 8-02-1 (All Zeolites excluding Erionite) 1 2173-10-3 (Natural Zeolites — excluding Erionite)	Hydrated Sodium, Potassium Aluminosiiicate $(Na_3K_4Ca)(Al_8Si_{40}O_{96})\bullet 24H_2O$	O- 100%
Bentonite	1 302-78-9	H drous Silicate of Alumina	O- 100%
Smectite Clay	21 99-37-0 63800-37-3		O- 100% O- 100%
Sepiolite Fragrance		Trade Secret	0-0.1%

Exposure Limits in Air:

OSHA PEL (as Inert or Nuisance Dust): 1 5 mppcf/5 mg/m ^{3} (respirable fraction)
50 mppcf/1 5 mg/m ^{3} (total dust)

ACGIH TLV (as particles not otherwise specified): 10 mg/m ^{3} (inhalable particles)
3 mg/m ^{3} (respirable particles)

NOTE: There is no established occupational exposure level for the minerals contained in this product. The guidelines for Inert Dust are provided as guidelines.

Composition of these minerals varies naturally; product(s) may contain:

Name: Silica, Quartz, Si02

CAS Number: 14808 - 60- 7

Exposure Limits in Air:

OSHA - PEL 1 0 mg/m ^{3}

^{0}/0 Si02+2 (8-Hour Time Weighted Average)

ACGIH - TLV	0.05 mg/cubic meter	(8-Hour Time Weighted Average)
NOSH	0.05 mg/cubic meter	(1 0-Hour Time Weighted Average, 40-hour work week)

Exposure Limits for silica refer to the respirable fraction

Silica is classified as hazardous under Occupational Safety and Health Administration (OSHA) regulations (29 CFR 1910.1 200).

MSDS for Cat Litter

Signs and Symptoms of Exposure: There are generally no signs or symptoms of exposure to crystalline silica (quartz). Often, chronic silicosis has no symptoms. The symptoms of chronic silicosis, if present, are shortness of breath, wheezing, cough and sputum production. The symptoms of acute silicosis are the same as those associated with chronic silicosis; additionally, weight loss and fever may also OCCUr. The symptoms of scleroderma include thickening and stiffness of the skin, particularly in the fingers, shortness of breath, difficulty swallowing and ioint problems.

Medical Conditions Generally Aggravated by Exposure: The condition of individuals with lung disease (e.g., bronchitis, emphysema, chronic obstructive pulmonary disease) can be aggravated by exposure.

See Section 1 1, Toxicological Information, for additional detail on potential adverse health effects.

Section 4 — First Aid Procedures

Inhalation — There is no specific treatment because the health effects associated with silica are chronic. If gross inhalation of silica occurs, remove the person to fresh air, perform artificial respiration as needed, and obtain medical attention as needed.

Eye — Wash the eye with water. If irritation persists, seek medical attention.

Skin — If abrasion occurs, seek medical attention.

Ingestion — If large amounts are ingested, seek medical attention.

Section 5 — Fire Fighting Measures

Flashpoint:	None
Upper/ Lower Explosive Limit:	Not Combustible
Autoignition Temperature:	None
Unusual Fire and Explosion Habits:	None
Extinguishing Media:	Compatible with all media; Use the medium appropriate to the surrounding fire.
Special Fire Fighting Procedures:	None with respect to this product.
Hazardous Combustion Products:	None

Section 6 — Accidental Release Measures

Wear appropriate personal protective equipment as described in Section 8 of this document. Collect the material Using a method which does not produce dust [High-Efficiency Particulate Air (HEPA) vacuum or thoroughly wetting down the product]. Place the product in a covered container appropriate for disposal. Dispose of the product according to federal, state, and local regulations.

Section 7 — Handling and Storage

Do not breathe dust which may be created during the handling of this product. Do not rely on vision to determine whether respirable silica is present in the air, as it may be present without a visible CIOUd. Use good housekeeping procedures to prevent the accumulation of silica dust in the workplace. Avoid the creation of respirable dust.

Use adequate ventilation and dust collection equipment. Ensure that the dust collection system is adequate to reduce dust levels to below the appropriate occupational health limit.

In accordance with the U.S. Occupational Safety and Health Administration's (OSHA) Hazard Communication Standard (29 CFR 200, 1 91 5.99, 1 91 7.28, 1 91 8.90, 1 926.59, 1928.21), state, and/or local right-to-know laws and regulations, familiarize your employees with this MSDS and the information contained herein. Warn your employees (and your customers in case of resale) of the potential health risks associated with the use of this product and train them in the appropriate use of personal protective equipment and engineering controls which will reduce their risks of exposure.

See also American Society for Testing and Materials (ASTM) standard practice E 1 1 32-99a, "Standard Practice for Health Requirements Relating to Occupational Exposure to Respirable Crystalline Silica.'.

Section 8 — Exposure Controls/Personal Protection

Simple silicosis is characterized by lung lesions (shown as radiographic opacities) less than 1 centimeter in diameter, primarily in the upper lung zones. Often, simple silicosis is not associated with symptoms, detectable changes in lung function or disability. Simple silicosis may be progressive and may develop into complicated silicosis or progressive massive fibrosis (PMF).

Complicated silicosis or PMF is characterized by lung lesions (shown as radiographic opacities) greater than 1 centimeter in diameter. Although there may be no symptoms associated with complicated silicosis or PMF, the symptoms, if present, are shortness of breath, wheezing, cough and sputum production. Complicated silicosis or PMF may be associated with decreased lung function and may be disabling. Advanced complicated silicosis or PMF may lead to death. Advanced complicated silicosis or PMF can result in heart disease (cor pumonale) secondary to the lung disease.

Accelerated Silicosis can occur with exposure to high concentrations of respirable crystalline silica over a relatively short period; the lung lesions can appear within five (5) years of the initial exposure. The progression can be rapid. Accelerated silicosis is similar to chronic or ordinary silicosis, except that the lung lesions appear earlier and the progression is more rapid.

Acute Silicosis can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as a few months. The symptoms of acute silicosis include progressive shortness of breath, fever, cough and weight loss. Acute silicosis is fatal.

B. CANCER

IARC - The International Agency for Research on Cancer ("IARC") concluded that there was "sufficient evidence in humans for the carcinogenicity of crystalline silica in the forms of quartz or cristobalite from occupational sources", and that there is "sufficient evidence in experimental animals for the carcinogenicity of quartz and cristobalite." The overall IARC evaluation was that "crystalline silica inhaled in the form of quartz or cristobalite from occupational sources is carcinogenic fo humans (Group t The IARC evaluation noted that not all industrial circumstances studied evidenced carcinogenicity. The monograph also stated that ' '[C]arcinogenicity may be dependent on inherent characteristics of the crystalline silica or on external factors affecting its biological activity or distribution of its polymorphs." For further information on the IARC evaluation, see IARC Mono ra hs on the Evaluation of Carcino enic Risks to Humans Volume 68, "Silica, Some Silicates..." (1 997).

NT P - The National Toxicology Program, in its Ninth Annual Report on Carcinogens, concluded that respirable crystalline silica is known to be a human carcinogen, based on sufficient evidence of carcinogenicity from studies in humans indicating a causal relationship between exposure to respirable crystalline silica and increased lung cancer rates in workers exposed to crystalline silica dust.

There have been many articles published on the carcinogenicity of crystalline silica, which the reader should consult for additional information; the following are examples of recently published articles: (1) "Crystalline Silica and Long Cancer: The Problem of Conflicting Evidence", Indoor Built Environ Volume 8, pp. 1 21 -1 26 (1 998); (2) "Crystalline
Silica and the risk of lung cancer on the potteries", OCCUP. Environ. Med., Volume 55, pp. 779-785 (1 998); (3) "Is Silicosis Required for Silica-Associated Lung Cancer?", American Journal of Industrial Medicine Volume 37, pp. 252259 (2000); (4) " Silica, Silicosis, and Lung Cancer: A Risk Assessment", American Journal of Industrial Medicine, Volume 38, pp. 8-1 8 (2000); (5) "Silica, Silicosis, and Lung Cancer: A Response to a Recent Working Group Report", Journal of Occupational and Environmental Medicine, Volume 42, pp. 704-720 (2000).

C. AUTOIMMUNE DISEASES

There is evidence that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis may be associated with the increased incidence of several autoimmune disorders scleroderma, systemic lupus erythematosus, rheumatoid arthritis and diseases affecting the kidneys. For a review of the subiect, the following may be consulted: "Occupational Exposure to Crystalline Silica and Autoimmune Disease", Environmental Health Perspectives, Volume 1 07, Supplement 5, pp. 793-802 (1 999); "Occupational Scleroderma", Current Opinion in Rheumatology, Volume 1 1 , pp. 490-494 (1 999); "Connective tissue disease and silicosis", Am J Ind Med Volume 35, pp. 375-381 0999).

D. TUBERCULOSIS

Individuals with silicosis are at increased risk to develop pulmonary tuberculosis, if exposed to persons with tuberculosis. The following may be consulted for further information: Occupational Long Disorders, Third Edition,

Section 16 — Other Information

An electronic version of this MSDS is available at www.badgerminingcqrp.comlashmeadows . More information on the effects of crystalline silica exposure may be obtained from the Occupational Safety and Health Administration
(OSHA) (phone number: 1 -800-321 -OSHA; website: http://www.osha.aov) or from the National Institute for Occupational Safety and Health (NIOSH) (phone number: 1 -800-35-NIOSH; website: http://www.cdc.qov/niosh).