## STATE OF COLORADO

#### DIVISION OF RECLAMATION, MINING AND SAFETY

Department of Natural Resources

1313 Sherman St., Room 215 Denver, Colorado 80203 Phone: (303) 866-3567 FAX: (303) 832-8106

April 1, 2014

Jason Lockard Washington County 150 Ash Avenue Akron, CO 80720



John W. Hickenlooper Governor

Mike King Executive Director

Loretta E. Pineda Director

#### Shook Gravel Pit 1, Permit M-2001-012, Annual Fee Invoice and Report Request

# PLEASE READ CAREFULLY – ACTION REQUIRED Please attach your COMPLETED written Annual Report and Annual Report Map to this form

Under the terms of your NOI or Reclamation Permit and Colorado Statutes, you must submit Annual Fees and Annual Reports (including a map). You must pay the Annual Fee and submit an Annual Report each year until reclamation responsibility release is granted. The Annual Fee is not a renewal fee. The Fee and Report are for LAST YEAR'S mining and reclamation season, and MUST be paid even if your operation was inactive.

The Annual Report and Fee requirement will be considered submitted when we have received the following components:

- 1. APPROPRIATE ANNUAL FEE
- 2. COMPLETED ANNUAL REPORT
- 3. ASSOCIATED MAP as required by rule

If you have requested reclamation responsibility release from the Division of Reclamation, Mining and Safety (the "Division") but your permit is not released by the anniversary date listed below, the Annual Fee MUST be paid. If the permit is released before the anniversary date, then by Statute, it is not necessary to pay an Annual Fee or submit an Annual Report for that year.

Division records indicate the \$791.00 fee is due for the following:

Permit: M-2001-012
Operation Name: Shook Gravel Pit 1
Anniversary Date: May 31, 2014

Total Fee Due: \$791.00 (Due on or before your Anniversary Date)

Return the enclosed <u>Annual Report FORM</u>, a <u>MAP</u>, and a <u>CHECK</u> or <u>MONEY ORDER</u> made payable to: Division of Reclamation, Mining and Safety, 1313 Sherman St., Room 215, Denver, CO 80203. If your records indicate these documents and fees have already been submitted, please notify the Division.

If you have additional comments and/or information that should be provided to the Division, please provide it below or attach it to this form along with your written report and map. Annual Report instructions are enclosed. If you have any questions, please feel free to contact Michelle Ramirez (303) 866-3567 ext 8114. Thank you for your cooperation in this matter.

IF THE ANNUAL FEE SUBMITTALS ARE NOT RECEIVED ON OR BEFORE YOUR ANNIVERSARY DATE, THE ENFORCEMENT PROCESS WILL BE AUTOMATICALLY INIATIED. ENFORCMENT ACTIONS MAY RESULT IN CIVIL PENALTIES AND/OR REVOCATION OF YOUR PERMIT.

### 112c Annual Report

Permittee Name:	Washington County	Permit Number:	M-2001-012
Operation Name:	Shook Gravel Pit 1	County:	Washington
Annual Fee Due:	\$791.00	Anniversary Date:	May 31, 2014
Permit Acreage:	270.00	Current Bond Amt:	\$0.00

According to C.R.S. 34-32.5-116 or 34-32-116, each year, on the anniversary date of the permit, an operator shall submit the Annual Fee, an Annual Report and map showing the extent of current disturbances to affected land, required monitoring information, reclamation accomplished to date and during the preceding year, any new disturbance that is anticipated to occur during the upcoming year, any reclamation that will be performed during the upcoming year, the dates for the beginning of active operations, and the date active operations ceased for the year.

Information contained in this report will be reviewed by the Division upon receipt and prior to the next compliance inspection of the site. If, while completing this report, you learn that your site is not in compliance with the rules and the act, it is advisable that the issues be rectified promptly to avoid possible enforcement action.

							_							
1.	Is the site identi	identification sign posted in accordance with Rule 3.1.12(1).								Yl	ES	NO		
2.	. Is the affected area boundary clearly marked in accordance with Rule 3.1.12(2).									Yl	ES	NO		
3.	3. Is the mine site in final reclamation (all material extraction and stockpile removal is complete)? If "YES," please note time limits related to completion of reclamation, Rule 3.1.3.								lete)?	Yl	ES	NO		
4.	4. What was the date of last excavation, processing or hauling activity at the mine?													
5.	5. Does the mine operate more than 180 days per year If "NO", please review Rule 1.13 to assure that your mine is in compliance.									Yl	ES	NO		
6.	<ul><li>a) approval of TEMPORARY CESSATION Status?</li><li>b) approval for INTERMITTENT OPERATION?</li></ul>								YI YI	ES ES	NO NO			
7.	7. Number of acres currently affected (mining + incomplete and or unreleased reclamation).													
8.	Number of acre	s that were	newly af	fected du	ring th	e cu	irrent report year	r.						
9.	Number of acre	s that were	reclaime	d during t	he cur	rent	report year.							
10.	. Estimated new	acreage to l	e affecte	d in the n	ext rej	ort	year.							
11.	. Estimated acres	to be recla	imed in t	he next re	port y	ear.								
12	. Total acres in v	zarione etan	es of rec	lamation	cinca	narn	nitted mining act	tivit	ies her	an•				
ΙΔ,	Total acres		Total acr		Since	рстп	Total acres	LIVIL		Total a	cres			
	backfilled:		seeded w				w/topsoil			mulche				
	ouckillieu.		approved				replaced:				ed mul	ch:		
-	Total acres		Total acr			Topsoil		Mulch appl						
	graded:			replacement	**									
			apvd fert				depth (in.):				,			
Ī	Seed	I	•	Fertilize	r		• • • •		Mulch			I		
	application			applicati	on				applica	ition				
	mathad:			mathade					matha		]			

13. Is weed control being If "YES", indicate to	YES ent date or	NO n the rep	N/A port map.			
14. Is adequate topsoil If "NO", please exp	YES	NO	N/A			
15. Is the reserved tops If "NO" please exp	YES	NO	N/A			
16. If mining has exposed groundwater, is the site in compliance with the approved mining plan and Office of the Engineer (Well Permit, S.W.S.P., and/or Permanent Augmentation Plan)?  YES NO						
17. Are all hazardous n	YES	NO	N/A			
18. Is your financial wa	YES	NO	N/A			
19. Is your basis for leg	YES	NO				
20. Does your permit ro If "Yes", please atta	YES	NO	N/A			
Construction Mater permit boundary, co UPDATED MAP A	rials (C.R.S. 34-32-116 or 34-32.5 current affected area boundary and ATTACHED: te the following permittee contact	act and/or Colorado Land Reclamation (-116), attach a map to this report that location of the acreages specified in it information. If this information is no	accurately tems 7- 12	y depict 2 and 14	s the 1.	
Permittee Contact:	Jason Lockard					
Permittee Company:	Washington County					
Address:	150 Ash Avenue					
	Akron, CO 80720					
Phone Number:	(970) 246-3347					
Fax Number:	(970) 246-3347					
Email Address:	CF.PR.email					
	by state that the information provordance with the Division approve	ided in this report is true and accurate, ed mining and reclamation plans.	, and that	site ope	erations are	
Signature of <u>Permitte</u>	e, Corporate Officer, Owner, or	<b>Documented Designee</b>	Date		_	