

DIVISION OF RECLAMATION,
MINING & SAFETY-MINERALS
FEE **REPORT** **MAP** **FEE**
not signed

110c Annual Report

Permittee Name:	Mask Ranch, LLC	Permit Number:	M-2002-087
Operation Name:	Mask Ranch Gravel Pit	County:	Archuleta
Annual Fee Due:	\$323.00	Anniversary Date:	November 25, 2014
Permit Acreage:	9.50	Current Bond Amt:	\$11,760.00

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.

- Is the site identification sign posted in accordance with Rule 3.1.12(1). YES ☒ NO
- Is the affected area boundary clearly marked in accordance with Rule 3.1.12(2). YES ☒ NO
- 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. YES ☒ NO
- What was the date of last excavation, processing or hauling activity at the mine? _____
- 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. YES ☒ NO
- Has this mine been granted: a) approval of TEMPORARY CESSATION Status? YES NO
b) approval for INTERMITTENT OPERATION? YES NO
- Number of acres currently affected (mining + incomplete and or unreleased reclamation). 7
- Number of acres that were newly affected during the current report year. 0
- Number of acres that were reclaimed during the current report year. 0
- Estimated new acreage to be affected in the next report year. 0
- Estimated acres to be reclaimed in the next report year. 0
- Total acres** in various stages of reclamation, since permitted mining activities began:

Total acres backfilled:	<u>0</u>	Total acres seeded w/ approved mix:	<u>3</u>	Total acres w/topsoil replaced:	<u>0</u>	Total acres mulched w/ approved mulch:	
Total acres graded:		Total acres fertilized w/ apvd fertilizer:		Topsoil replacement depth (in.):	<u>0</u>	Mulch application rate (tons/ac):	
Seed application method:	<u>BROAD CAST SPIKE METHOD</u>			Fertilizer application method:		Mulch application method:	

13. Is weed control being conducted in accordance with an approved Weed Control Plan? ☒ YES NO N/A
If "YES", indicate the weed species, control area, control type, application rate and treatment date on the report map.
14. Is adequate topsoil reserved for reclamation, based on your approved permit? ☒ YES NO N/A
If "NO", please explain:
15. Is the reserved topsoil vegetated/stabilized in accordance with Rule 3.1.9(1)? ☒ YES NO N/A
If "NO" please explain:
16. If mining has exposed groundwater, is the site in compliance with the approved mining plan and Office of the State Engineer (Well Permit, S.W.S.P., and/or Permanent Augmentation Plan)? ☒ YES NO N/A
17. Are all hazardous materials stored within approved spill containment structures? ☒ YES NO N/A
18. Is your financial warranty value sufficient to cover the cost to complete reclamation? ☒ YES NO N/A
19. Is your basis for legal right to enter still valid? YES ☒ NO
20. Does your permit require you to submit monitoring information annually? YES ☒ NO N/A
If "Yes", please attach the required monitoring results to this Annual Report.
21. As required by Colorado Mined Land Reclamation Act and/or Colorado Land Reclamation Act for the Extraction of Construction Materials (C.R.S. 34-32-116 or 34-32.5-116), attach a map to this report that accurately depicts the permit boundary, current affected area boundary and location of the acreages specified in items 7- 12 and 14.
UPDATED MAP ATTACHED: _____

Division records indicate the following permittee contact information. If this information is not current, please type or print current contact information:

Permittee Contact:	Roger August	
Permittee Company:	Mask Ranch, LLC	
Address:	P.O. Box 5356 Pagosa Springs, CO 81147	
Phone Number:	(970) 946-3074	
Fax Number:	(970) 264-6438	
Email Address:	CF.PR.email	maskranch@gmail.com

I, the undersigned, hereby state that the information provided in this report is true and accurate, and that site operations are being conducted in accordance with the Division approved mining and reclamation plans.

Signature of Permittee, Corporate Officer, Owner, or Documented Designee

Date _____

EXTREME DRY SPRING 2014

RECEIVED

NOV 25 2014

DIVISION OF RECLAMATION
MINING AND SAFETY

M-2002-087

PERMITTED AREA

BURIED IRRO PIPE
6" TO 4" RISERS

SPRAYED WEEDS
2ND BROADCAST OF FOUR SEASON COOL
2ND GRASS SEED

LARGE NUMBER CANADA GEESE
; PULL NEW SEEDING OUT OF GROUND

Division of Reclamation, Mining, and Safety

Fee Receipt for M2002087

Mask Ranch, LLC

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Receipt #: 18597

Date: 11/25/2014

Permit: M2002087

Payment Method	Revenue Code	Fee Description/Notes	Amount
1926 msr	4300-MAF0	Minerals Annual Fees M2002-087 paid by Mask, LLC	\$323.00
Receipt Total:			\$323.00