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

March 2, 2015

Paula Weeks Kit Carson County P.O. Box 160 Burlington, CO 80807



John W. Hickenlooper Governor

Mike King Executive Director

Virginia Brannon

Raymond Duell Pit, Permit M-1989-004, 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 \$323.00 fee is due for the following:

Permit: M-1989-004
Operation Name: Raymond Duell Pit
Anniversary Date: April 26, 2015

Total Fee Due: \$323.00 (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.

110c Annual Report

Permittee Name:	Kit Carson County	Permit Number:	M-1989-004
Operation Name:	Raymond Duell Pit	County:	Kit Carson
Annual Fee Due:	\$323.00	Anniversary Date:	April 26, 2015
Permit Acreage:	9.10	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 1 2		•					
1.	Is the site identi	fication sign po	osted in	accordance v	with	Rule 3.1.12(1).				YES	NO
2.	Is the affected a	rea boundary c	learly r	narked in acc	orda	ance with Rule 3.	1.12(2)).		YES	NO
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.						ete)?	YES	NO		
4. What was the date of last excavation, processing or hauling activity at the mine?											
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.							YES	NO		
6.	a) approval of TEMPORARY CESSATION Status? b) approval for INTERMITTENT OPERATION?							YES YES	NO NO		
7.	Number of acre	s currently affe	ected (m	nining + inco	nple	te and or unrelea	sed red	clamation).			
8.	Number of acre	s that were nev	vly affe	cted during th	ne cu	irrent report year					
9.	Number of acre	s that were recl	laimed	during the cu	rrent	report year.					
10.	. Estimated new a	acreage to be a	ffected	in the next re	port	year.					
11.	. Estimated acres	to be reclaime	d in the	e next report y	ear.						
12	. Total acres in v	zarious stages o	of reclai	mation since	nerr	nitted mining act	ivities	hegan:			
Γ	Total acres		al acres		реп	Total acres	TVICES	Total ac	cres		
	backfilled:		ded w/			w/topsoil		mulche			
			roved n	nix:		replaced:			ed mulch:		
	Total acres			Topsoil			application	Į.			
	graded:	fert	ilized w	7 /		replacement		rate (to			
		apv	d fertili	zer:		depth (in.):		ì	•		
Ī	Seed		F	Fertilizer			Μι	ılch		•	
	application		a	application			apı	plication			
	method:		r	nethod:			me	thod:			

	3. Is weed control being conducted in accordance with an approved Weed Control Plan? If "YES", indicate the weed species, control area, control type, application rate and treatment.					
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 t 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 warranty value sufficient to cover the cost to complete reclamation?					N/A	
19. Is your basis for leg	YES	NO				
20. Does your permit ro If "Yes", please atta	nformation annually? s to this Annual Report.	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 a location of the acreages specified in it information. If this information is no	accurately ems 7- 12	y depict 2 and 14	s the I.	
Permittee Contact:	Paula Weeks					
Permittee Company:	Kit Carson County					
Address:	P.O. Box 160					
	Burlington, CO 80807					
Phone Number:						
Fax Number:						
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	rations are	
Signature of <u>Permitte</u>	e, Corporate Officer, Owner, or	Documented Designee	Date		_	