# **Minerals Reclamation Permit Annual Report**



## **Disclaimer**

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.

If you have requested reclamation responsibility release from the Division of Reclamation, Mining and Safety ("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 following is due:

### Select Permit Number \*

Only Permit Numbers with currently due Annual Fees will be listed. If the Permit Number is not listed, then the Annual Fees are not due, the Permit Number has already been submitted, or the Permit Number Annual Fee payment has been processed.

M1999060

### Select Anniversary Date \*

06-15-2016

IF THE <u>COMPLETE</u> ANNUAL FEE SUBMITTALS ARE NOT RECEIVED ON OR BEFORE YOUR ANNIVERSARY DATE, THE ENFORCEMENT PROCESS WILL AUTOMATICALLY BE INITIATED. ENFORCEMENT ACTIONS WILL RESULT IN CIVIL PENALTIES AND POSSIBLE REVOCATION OF YOUR PERMIT.

Please check the box indicating you have read and understand the terms of the Annual Report and Annual Fee \*

☑ I understand and agree to the terms

### **General Information**

#### **Permittee Name**

Las Animas County

### **Operation Name**

Yocam Pit

Permit Number Fee Due Permit Acreage

M1999060 323.00 67.30

County Anniversary Date Current Bond Amount

Las Animas 06-15-2016 0.00

# **Permittee Contact Information**

**Permitting Contact Name** 

| Phil Dorenkamp                                                                                                                                                                                                                                                                                                                                                      |            |           |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|--|--|
| Company Las Animas County                                                                                                                                                                                                                                                                                                                                           |            |           |  |  |
| Address 1 2000 N. Linden Ave.                                                                                                                                                                                                                                                                                                                                       |            |           |  |  |
| Address 2                                                                                                                                                                                                                                                                                                                                                           |            |           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                     |            |           |  |  |
| City                                                                                                                                                                                                                                                                                                                                                                | State      | Zip Code  |  |  |
| Trinidad                                                                                                                                                                                                                                                                                                                                                            | СО         | 810820000 |  |  |
| Phone # Fax #                                                                                                                                                                                                                                                                                                                                                       |            |           |  |  |
| 7198462931                                                                                                                                                                                                                                                                                                                                                          | 7198460434 |           |  |  |
| Permitting Contact Email Address                                                                                                                                                                                                                                                                                                                                    |            |           |  |  |
| Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. *                                                                                                                                                                                                            |            |           |  |  |
| • Yes • No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |
| Annual Report Questions                                                                                                                                                                                                                                                                                                                                             |            |           |  |  |
| Information contained in this report is required and 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 identification sign posted in accordance with Rule 3.1.12(1). *                                                                                                                                                                                                                                                                                      |            |           |  |  |
| ⊙ Yes ○ No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |
| 2. Is the affected area boundary clearly marked in accordance 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.                                                                                                                                                                                                                                                                                 |            |           |  |  |
| C Yes ⊙ No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |
| 4. Has excavation, processing or hauling activity commenced at the site? *                                                                                                                                                                                                                                                                                          |            |           |  |  |
| ⊙ Yes ○ No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |
| What was the date of last excavation, processing or hauling activity at the mine? * 3/15/2016                                                                                                                                                                                                                                                                       |            |           |  |  |
| 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. Has this mine been granted approval of TEMPORARY CESSATION Status? *                                                                                                                                                                                                                                                                                             |            |           |  |  |
| ○ Yes ⊙ No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |
| 7. Has this mine been granted approval for INTERMITTENT OPERATION? *                                                                                                                                                                                                                                                                                                |            |           |  |  |
| • Yes • No                                                                                                                                                                                                                                                                                                                                                          |            |           |  |  |

| 8. Number of acres currently affected (mining + incomplete and or unreleased reclamation). * (?) 11.3                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 9. Number of acres that were newly affected during the current report year ★ (?) 5.2                                                                                                                                                      |
| <ul><li>10. Number of acres that were reclaimed during the current report year. * (?)</li><li>0.0</li></ul>                                                                                                                               |
| 11. Estimated new acreage to be affected in the next report year. ★ (?) 0.0                                                                                                                                                               |
| 12. Estimated acres to be reclaimed in the next report year. * (?) 0.0                                                                                                                                                                    |
| 13. Total acres in various stages of reclamation, since permitted mining activities began:                                                                                                                                                |
| Total acres backfilled * (?) 0.0                                                                                                                                                                                                          |
| Total acres graded * (?) 0.0                                                                                                                                                                                                              |
| Total acres seeded with approved mix * (?) 0.0                                                                                                                                                                                            |
| Seed Application Method * NA                                                                                                                                                                                                              |
| Total acres fertilized with aproved fertilizer * (?) 0.0                                                                                                                                                                                  |
| Fertilizer Application Method * NA                                                                                                                                                                                                        |
| Total acres with topsoil replaced * (?) 0.0                                                                                                                                                                                               |
| Topsoil replacement depth (in.) * (?) 0.0                                                                                                                                                                                                 |
| Total acres mulched with approved mulch * (?) 0.0                                                                                                                                                                                         |
| Mulch application rate (tons/ac) * (?) 0.0                                                                                                                                                                                                |
| Mulch Application Method * NA                                                                                                                                                                                                             |
| <b>14.</b> 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 date on the report map.  © Yes © No © N/A |
| <ul> <li>15. Is adequate topsoil reserved for reclamation, based on your approved permit? *</li> <li>If "NO", please explain</li> <li>Yes O No O N/A</li> </ul>                                                                           |

| 16. Is the reserved topsoil vegetated/stabilized in ac                                                                                                                                                                                                                                                                                            | cordance with Rule 3.1.9(1)? *         |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--|--|--|
| If "NO", please explain                                                                                                                                                                                                                                                                                                                           |                                        |  |  |  |
| Yes ○ No ○ N/A                                                                                                                                                                                                                                                                                                                                    |                                        |  |  |  |
| 17. 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)?*                                                                                                                                                     |                                        |  |  |  |
| C Yes C No ⊙ N/A                                                                                                                                                                                                                                                                                                                                  |                                        |  |  |  |
| 18. Are all hazardous materials stored within approve                                                                                                                                                                                                                                                                                             | ed spill containment structures? *     |  |  |  |
| C Yes C No ⊙ N/A                                                                                                                                                                                                                                                                                                                                  |                                        |  |  |  |
| 19. Is your financial warranty value sufficient to cover the cost to complete reclamation? *                                                                                                                                                                                                                                                      |                                        |  |  |  |
| C Yes C No € N/A                                                                                                                                                                                                                                                                                                                                  |                                        |  |  |  |
| 20. Is your basis for legal right to enter still valid? *                                                                                                                                                                                                                                                                                         |                                        |  |  |  |
| ⊙ Yes ○ No                                                                                                                                                                                                                                                                                                                                        |                                        |  |  |  |
| 21. Does your permit require you to submit monitorin                                                                                                                                                                                                                                                                                              | g information annually? *              |  |  |  |
| C Yes C No ⊙ N/A                                                                                                                                                                                                                                                                                                                                  |                                        |  |  |  |
| 22. 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 8-12 and 15. * |                                        |  |  |  |
| Only PDF formatted files can be uploaded.                                                                                                                                                                                                                                                                                                         |                                        |  |  |  |
| 2016 annual map.pdf                                                                                                                                                                                                                                                                                                                               | 200.04KB                               |  |  |  |
| 23. If you have supplemental information you would l                                                                                                                                                                                                                                                                                              | ike to provide, please upload it here. |  |  |  |
| Only PDF formatted files can be uploaded.                                                                                                                                                                                                                                                                                                         |                                        |  |  |  |
| 24. Rule 5.7 requires submittal of final abandonment reports within 60 days for any drill hole(s) with artesian flows and no later than 12 months for all other completed drill holes. If drill holes are a component of your exploration/prospecting activities, have they been properly abandoned?                                              |                                        |  |  |  |
| C Yes C No C NA                                                                                                                                                                                                                                                                                                                                   |                                        |  |  |  |
| Annual Fee Payment                                                                                                                                                                                                                                                                                                                                |                                        |  |  |  |
| Payment Confirmation Number * (?)                                                                                                                                                                                                                                                                                                                 |                                        |  |  |  |
| 58135286                                                                                                                                                                                                                                                                                                                                          |                                        |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                         |                                        |  |  |  |
| Sidilatuic                                                                                                                                                                                                                                                                                                                                        |                                        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                   |                                        |  |  |  |
| Submittal Date                                                                                                                                                                                                                                                                                                                                    |                                        |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                   |                                        |  |  |  |
| Submittal Date                                                                                                                                                                                                                                                                                                                                    |                                        |  |  |  |

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