



COLORADO

Division of Reclamation,
Mining and Safety

Department of Natural Resources

1313 Sherman Street, Room 215
Denver, CO 80203

RECEIVED

JAN 06 2017

Division of Reclamation,
Mining & Safety

Leigh Simmons
Environmental Protection Specialist
Colorado Division of Reclamation, Mining, and Safety
Coal Program
1313 Sherman Street, Room 215
Denver, CO 80203

Dear Mr. Simmons

Please find enclosed 6 keys for the gate installed at the bridge access to the Bear Coal Mine site in Somerset, CO. Please keep 2 keys for the Coal Program and distribute 2 keys each to Mountain Coal and Oxbow Mining.

In addition, please find enclosed the well abandonment reports for the two alluvial wells that were sealed during the reclamation.

Thanks for all your assistance with the Bear Coal Mine Bond Forfeiture Project.

Sincerely,

Jeff Litteral
Inactive Mines Reclamation Program
Project Manager

P 970.216.1330 | F 970.626-4045
P.O.Box 2058, Ridgway, CO 81432
jeff.litteral@state.co.us | www.mining.state.co.us

cc: DRMS IMRP file



Form No GWS-09 09/2016	STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 303.866.3581 www.water.state.co.us and dwrpermitsonline@water.state.co.us	For Office Use Only
WELL ABANDONMENT REPORT Use to report plugging and sealing of permitted wells, monitoring and other holes. Type or print in black or blue ink. Instructions and plugging standards are on reverse side		
1. Well Permit Number of the well being plugged <u>AA-1</u> or MH File Number MH- _____ Receipt Number: _____		
2. Individual/Company responsible for plugging and sealing the well: Name(s) <u>McCollum Excavating</u> License # <u>AA-1</u> Mailing Address <u>P.O. Box 790</u> City, St., Zip <u>Nederland CO 80466</u> Phone <u>(303) 582-1500</u> Email <u>mccollumexe@aol.com</u>		
3. Well (Hole) Owner: Name(s): <u>Bear Coal Company / Bear Mine Permit C-19810</u> Phone: <u>(303) 866-3567</u> Email: <u>Bond Forfeiture Reclamation</u> Mailing Address, City, St., Zip: <u>Colorado Div. Reclamation, Mining & Safety / 1313 Sherman Rm 26</u>		
4. Well Location Address: <u>Bear Coal Mine, Somerset CO Denver, CO 80203</u> 5. GPS Well Location: County <u>Gunnison</u> UTM <input type="checkbox"/> Zone 12 or <input checked="" type="checkbox"/> Zone 13 Easting <u>0286334</u> Northing <u>4311550</u>		
6. Legal Location: <u>SW1/4</u> of the <u>SW1/4</u> , Sec <u>9</u> , Twp <u>13</u> <input type="checkbox"/> N or S <input checked="" type="checkbox"/> Range <u>90</u> <input type="checkbox"/> E or W <input checked="" type="checkbox"/> , <u>6th</u> P.M. Distance from Section Lines _____ Ft. From <input type="checkbox"/> N or S <input type="checkbox"/> , _____ Ft. From <input type="checkbox"/> E or W <input type="checkbox"/> Line. Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____		
7. I/we report the existing well/hole was plugged and sealed on <u>10/26/16</u> (date) for the following reason(s): <input type="checkbox"/> The well was plugged and sealed as required under Well Permit Number _____. <input type="checkbox"/> The well was not in use and was plugged and sealed. <input checked="" type="checkbox"/> Other (please explain) <u>Plugged as required under Mine Reclamation Plan</u>		
8. Aquifer Type: <input type="checkbox"/> Type I (One Confining Layer) <input type="checkbox"/> Type I (Multiple Confining Layer) <input type="checkbox"/> Laramie-Fox Hills (check one) <input type="checkbox"/> Type II (Not Overlain by Type III) <input type="checkbox"/> Type II (Overlain by Type III) <input checked="" type="checkbox"/> Type III (alluvial)		
9. Intervals of Casing Removed/Ripped: <u>surface casing removed</u> from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet,		
10. Amount and Type of Material Method of Placement Interval <u>Quickcrete 5000 / 12016.</u> <u>Bucket</u> from <u>9.5</u> feet to <u>4.5</u> feet <u>Precision Non-Shrink Grout / 10016</u> <u>Bucket</u> from <u>4.5</u> feet to <u>0</u> feet _____ _____ from _____ feet to _____ feet _____ _____ from _____ feet to _____ feet		
I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed (or name entered if filing online) and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402.2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), C.R.S., and is punishable by fines up to \$1,000 and/or revocation of the contracting license. If filing online the State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4		
11. Signature(s) <u>Steve McCollum</u>	Please Print the Name, Title, & License No. <u>Steve McCollum / Member</u>	Date <u>10/26/16</u>
It is the responsibility of the well owner to have the well/hole properly plugged and sealed. The Well Construction Contractor is responsible for notifying the owner of this requirement in writing.		

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WELL ABANDONMENT REPORT

Use to report plugging and sealing of permitted wells, monitoring and other holes. Type or print in black or blue ink. Instructions and plugging standards are on reverse side

1. Well Permit Number of the well being plugged AA-3 or
 MH File Number MH- _____ Receipt Number: _____
2. Individual/Company responsible for plugging and sealing the well:
 Name(s) McCollum Excavating License # _____
 Mailing Address P.O. Box 790
 City, St., Zip Nederland, CO 80466
 Phone (303) 582-1500 Email mccollumex@aol.com
3. Well (Hole) Owner: Name(s): Bear Coal Co. / Bear Mine Permit C-1981-033
 Phone: (303) 866-3567 Email: Bond Forfeiture Reclamation
 Mailing Address, City, St., Zip: Colorado Div. Reclamation, Mining & Safety / 1313 Sherman St
4. Well Location Address: Bear Coal Mine / Somerset, CO Denver, CO 80203
5. GPS Well Location: County Gunnison
 UTM ☐ Zone 12 or ☒ Zone 13 Easting 0286455 Northing 4311682
6. Legal Location: SW 1/4 of the SW 1/4, Sec 9, Twp 13 ☐ N or S ☒ , Range 90 ☐ E or W ☒ , 6th P.M.
 Distance from Section Lines 727 Ft. From ☒ N or S ☐ , 4,074 Ft. From ☐ E or W ☒ Line.
 Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____
7. I/we report the existing well/hole was plugged and sealed on 10/26/16 (date) for the following reason(s):
☐ The well was plugged and sealed as required under Well Permit Number _____
☐ The well was not in use and was plugged and sealed.
☒ Other (please explain) Plugged as required under Mine Reclamation Plan
8. Aquifer Type: ☐ Type I (One Confining Layer) ☐ Type I (Multiple Confining Layer) ☐ Laramie-Fox Hills
 (check one) ☐ Type II (Not Overlain by Type III) ☐ Type II (Overlain by Type III) ☒ Type III (alluvial)
9. Intervals of Casing Removed/Ripped: surface casing removed
 from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet,
 from _____ feet to _____ feet, from _____ feet to _____ feet, from _____ feet to _____ feet,
- | 10. Amount and Type of Material | Method of Placement | Interval |
|-----------------------------------|---------------------|---|
| <u>Quickcrete 5000/10016</u> | <u>Bucket</u> | from <u>9.0</u> feet to <u>4.0</u> feet |
| <u>Precision Non-Shrink Grout</u> | <u>Bucket</u> | from <u>4.0</u> feet to <u>0</u> feet |
| _____ | _____ | from _____ feet to _____ feet |
| _____ | _____ | from _____ feet to _____ feet |

I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed (or name entered if filing online) and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402.2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), C.R.S., and is punishable by fines up to \$1,000 and/or revocation of the contracting license. If filing online the State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4

11. Signature(s) 	Please Print the Name, Title, & License No. <u>Steve McCollum / Member</u>	Date <u>10/26/16</u>
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