



STATE OF
COLORADO

Ebert - DNR, Jared <jared.ebert@state.co.us>

RE: Notices

bruce humphries <hlhumphries2@comcast.net>
To: "Ebert - DNR, Jared" <jared.ebert@state.co.us>

Thu, Jan 17, 2019 at 11:51 AM

Sent from [Mail](#) for Windows 10

From: Ebert - DNR, Jared
Sent: Thursday, January 17, 2019 11:18 AM
To: [bruce humphries](#)
Subject: Re: Extension Request M2018-057

Sounds good. I received the adequacy response. I will review it and get back to you.

Thanks,

Jared

On Wed, Jan 16, 2019 at 8:51 AM bruce humphries <hlhumphries2@comcast.net> wrote:

Good morning and thanks

I dropped off our adequacy response yesterday at the front desk. Also, as soon as I get the green cards or returned letters of notice, I will send them to you via email.

Sent from [Mail](#) for Windows 10

From: Ebert - DNR, Jared
Sent: Wednesday, January 16, 2019 6:50 AM
To: [bruce humphries](#)
Cc: [PATRICK MAHER](#)
Subject: Re: Extension Request M2018-057

Good morning Bruce,

The Division approved the extension request. The decision date has been extended to February 22, 2019. Please let me know if you have any questions.

Thanks,

Jared

On Tue, Jan 15, 2019 at 10:11 AM bruce humphries <hlhumphries2@comcast.net> wrote:

Sent from [Mail](#) for Windows 10

--

Jared Ebert

Environmental Protection Specialist III



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

P 303.866.3567 ext. 8120 | F 303.832.8106 |

1313 Sherman St., Room 215, Denver, CO 80203

jared.ebert@state.co.us | mining.state.co.us

--

Jared Ebert

Environmental Protection Specialist III



COLORADO
Division of Reclamation,
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9 attachments

-  **1-16-2019 Scan.OTM Bon Land, Deciccopdf Hopkins[20308].pdf**
581K
-  **1-16-2019 Scan.OTM Bruno Valintine Parkpdf[20309].pdf**
568K
-  **1-16-2019 Scan.OTM CDPHE Red Tailpdf[20310].pdf**
569K
-  **1-16-2019 Scan.OTM Danirlspdf[20311].pdf**
226K
-  **1-16-2019 Scan.OTM Fed 107 GOMpdf[20312].pdf**
386K
-  **1-16-2019 Scan.OTM Jacobs Ross XCEL pdf[20313].pdf**
575K
-  **1-16-2019 Scan.OTM Jonespdf[20314].pdf**
205K
-  **1-16-2019 Scan.OTM Patersonpdf[20315].pdf**
205K
-  **1-16-2019 Scan.OTM Sandt pdf[20316].pdf**
350K

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BonanzaLand LLC
P.O. Box 1001
Tustin, CA 92781



9590 9402 1482 5329 2486 33

2. Article Number (Transfer from service label)

7015 3010 0000 0529 1181

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Wendy Smith 12-7-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *OTP*

1. Article Addressed to:

Edward Decicco
10860 - W 23rd Road
Lakewood, CO 80215



9590 9402 1482 5329 2486 64

2. Article Number (Transfer from service label)

7015 3010 0000 0528 7993

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Ann H. DeCicco 12/17/18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

West Pewabic Hopking Cew
2205 S. Stuart Street
Denver, CO 80219



9590 9402 1482 5329 2485 89

2. Article Number (Transfer from service label)

7015 3010 0000 0529 1105

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Denise B. B... 12-6-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gregory H. Bruno
Box 1121
Idaho Springs, Co
80452



9590 9402 1482 5329 2482 51

2. Article Number

7015 3010 0000 0529 1198

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *GB* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *OTP*

1. Article Addressed to:

Sharon Valentine
Box 101
Central City, Co.
80452



9590 9402 1482 5329 2486 40

2. Article Number (Transfer from service label)

7015 3010 0000 0528 8013

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon Valentine* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George Park
6433 S. Datura Street
Littleton, CO 80120



9590 9402 1482 5329 2486 02

2. Article Number (Transfer from service label)

7015 3010 0000 0528 7955

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *George Park* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CDPHE
water Quality
4300 Cherry CK. Dr. S. Wood-P-82
Denver, CO 80246-1530



9590 9402 2656 6336 5800 75

2. 7015 0640 0001 1553 5698

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

DEC 04 2018
11:37 AM☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Red Tail XP LLP
Box 1974
Idaho Springs, CO
80452



9590 9402 1482 5329 2485 65

2. 7015 3010 0000 0528 7979

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Old Town Mine LLC
Box 1974
Idaho Springs, CO
80452



9590 9402 1482 5329 2485 72

2. 7015 3010 0000 0529 1129

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

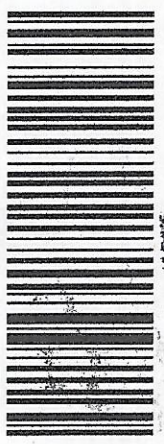
☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

Venture Resources INC
PO Box 1974
Idaho Springs, CO 80452

CERTIFIED MAIL



7015 3010 0000 0528 7986

Daniels, Susan R
7270 Newton St
Westminster (

NIXIE 808 DE 1 0012/30/18

UNC
80452-1974

BC: 80452197474 *1968-01115-30-03
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

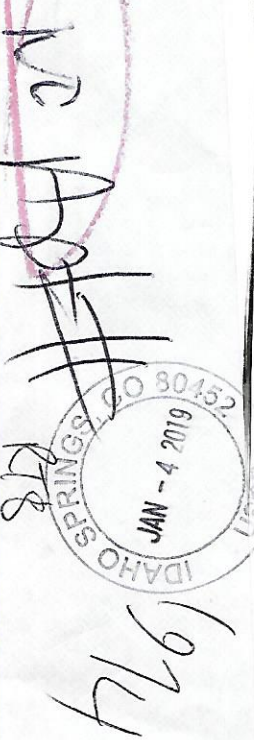


1000

80030-5256

R2303S103953-7

U.S. POSTAGE PAID
FCM LETTER
IDAHO SPRINGS, CO
80452
DEC 04, '18
AMOUNT
\$6.70



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Federal 107 LLC
Box 3338
Idaho Springs, CO 80452



9590 9402 1482 5329 9340 24

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. OTP

1. Article Addressed to:

Golden Opportunity Mines
Box 3338
Idaho Springs, CO
80452



9590 9402 1482 5329 2481 14

2. 7015 3010 0000 0528 8242

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jean Jacobs & M.B. Parks
6433 S. Datura St.
Littleton, CO 80120



9590 9402 1482 5329 2482 13

7015 3010 0000 0529 1143

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
B. Received by (Printed Name)
George J. Park

☒ Agent☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery | |

Domestic Return Receipt

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- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ross & Kathleen Beesing
Box 493
Black Hawk, CO 80422



9590 9402 1482 5329 2482 20

7015 3010 0000 0529 1082

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
B. Received by (Printed Name)
Ross Beesing

☐ Agent☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

XCEL Energy
1099-18th St
Suite 3000
Denver, CO 80202



9590 9402 1482 5329 2482 75

7015 3010 0000 0529 1075

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
B. Received by (Printed Name)
Vivian Caneas

☐ Agent☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

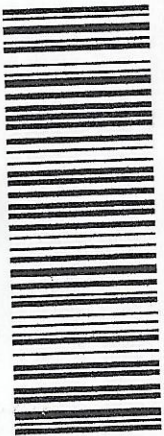
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| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
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| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

Venture Resources INC
PO Box 1974
Idaho Springs, CO 80452

CERTIFIED MAIL



7015 3010 0000 0529 1136

Judy Jones
PO Box 315
Springville CA 9

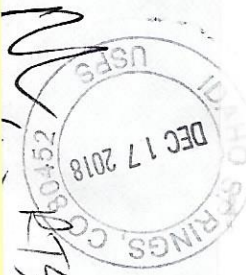


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93265-0315

\$6.70
R2303S103953-7

U.S. POSTAGE PAID
FOM LETTER
IDAHO SPRINGS, CO
80452
DEC 04, 18
AMOUNT

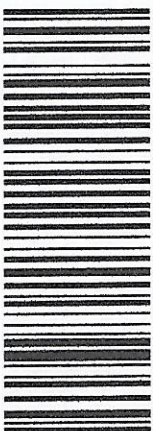


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334666357WOC

RELATE BILL RECEIVED
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
EC: 80452197474 *0256-00629-08-42

CERTIFIED MAIL®



7015 3010 0000 0529 1099

1990

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80134

U.S. POSTAGE PAID
FCM LETTER
IDAHO SPRINGS, CO
80452
DEC 04 '18
AMOUNT

\$6.70
R2303S103953-7

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80503







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0512/21-18

24 47 71 92 21 52 45 33 22 11

* 20-8146-66-44

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

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 3. **Methodology**
 4. **Results**
 5. **Conclusion**
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Track USPS package

7015301000005291112

Track

 USPS package #7015301000005291112
www.usps.com

Delivered: Sat, Dec 8, 11:46 AM

Processed		In transit	Delivered
DATE	TIME	LOCATION	STATUS
Dec 8	11:46 AM	Denver, CO, United States	Delivered
Dec 7	11:23 AM	Thornton, CO, United States	Notice left (no authorized recipient available)
Dec 7	10:54 AM	Thornton, CO, United States	Out for delivery
Dec 7	10:44 AM	Thornton, CO, United States	Sorting complete
Dec 7	9:13 AM	Denver, CO, United States	Arrived at unit

Data from usps.com

USPS.com® - USPS Tracking®

<https://tools.usps.com/go/TrackConfirmAction?input.action>

Service / Sample Number: **USPS Tracking** ... If a package qualifies for the **USPS Delivery Instructions™** service, you can tell **USPS** where to leave a package at your address, send it to a different address, or send it to your Post Office.

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☐ Certified Mail Restricted Delivery	\$0.00
☐ Adult Signature Required	\$0.00
☐ Adult Signature Restricted Delivery	\$0.00

Postage \$0.50

Total Postage and Fees \$6.70

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Street and Apt. No., or PO Box No. 5581 E 123 Rd Ave

City, State, ZIP+4® Thornton, CO 80241

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