Minerals Reclamation Permit Annual Report



General Information

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 Reports and Fees will be listed. If nothing appears in the dropdown box below, there are no annual fees or reports due for any of your permits.

M2013041

Select Anniversary Date *

05-30-2019

PLEASE REMEMBER TO CLICK "SUBMIT" AFTER YOU HAVE COMPLETED YOUR REPORT AND PAYMENT.

Please check the box indicating you have read and understand the terms of the Annual Report and Annual Fee $^{\mbox{*}}$

▼ I understand and agree to the terms

General Information

Permittee Name

Brian Busse

Operation Name

Thank You Lord Claim

| Permit Number | Fee Due | Permit Acreage |
|---------------|------------------|---------------------|
| M2013041 | 259.00 | 9.90 |
| | | |
| County | Anniversary Date | Current Bond Amount |
| Chaffee | 05-30-2019 | 5700.00 |



Contact Information

Here is the contact information we have on file for this permit. If any of it is inaccurate, you will have the opportunity to correct it after this form has been submitted.

- 1. Upon submission of this form you will be presented with a link to the contact information update form.
- 2. There is a question asking about the accuracy of this information at the bottom of this page. Indicating that it is inaccurate will send an e-mail to notify your administrator to make the appropriate changes.

Permittee Contact Information

Permittee Contact Name

Brian Busse

Permittee Company

Brian Busse

Permittee Address 1

1437 G St.

Permittee Address 2

Permittee City Permittee State Permittee Zip

Salida CO 812010000

Permittee Phone # Permittee Fax #

7192350680

Permittee Contact Email Address

Permitting Contact Info

Permitting Contact Name

Yolanda Busse

Permitting Company

Brian Busse

Permitting Address 1

1437 G Street

Permitting Address 2

Permitting City Permitting State Permitting Zip

Salida CO 812010000

Permitting Phone # Permitting Fax #

7204590443

Permitting Contact Email Address brianbusseaqua@gmail.com

Inspection Contact Info

Inspection Contact Name

Brian Busse

Inspection Company

Brian Busse

Inspection Address 1

1437 G Sreet

Inspection Address 2

Inspection City Inspection State Inspection Zip

Salida CO 812010000

Inspection Phone # Inspection Fax #

7204590443

Inspection Contact Email Address

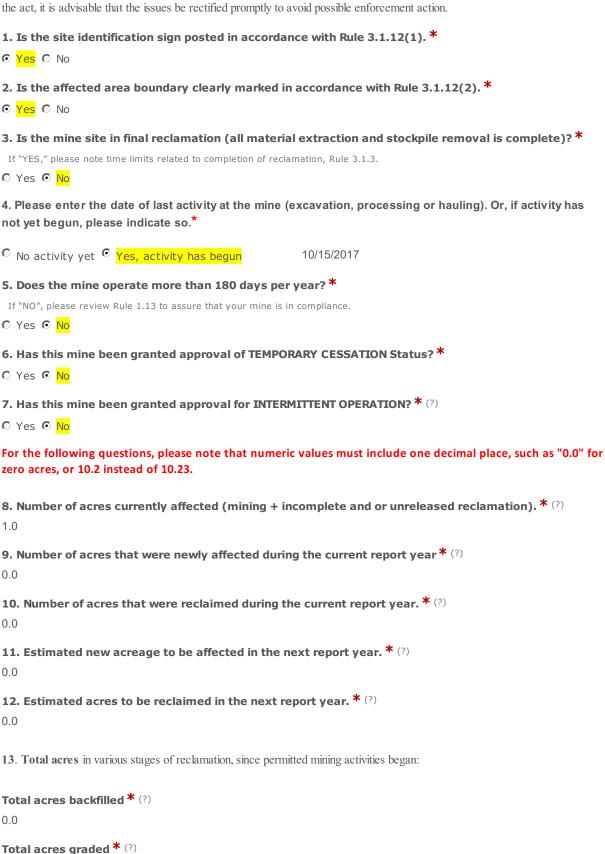
aquamineusa@yahoo.com

Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. *

Previous Proceed

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.



| 0.0 |
|---|
| Total acres seeded with approved mix * (?) 0.0 |
| Total acres fertilized with aproved fertilizer * (?) 0.0 |
| Total acres with topsoil replaced * (?) 0.0 |
| Total acres mulched with approved mulch * (?) 0.0 |
| Previous Proceed |

Annual Report Questions

| 14. Is weed control being conducted in accordance with an ap | proved Weed Control Plan? * | | | |
|--|---|--|--|--|
| If "YES", indicate the weed species, control area, control type, application rate and treatment date on the report map. | | | | |
| C Yes C No O N/A | | | | |
| 15. Is adequate topsoil reserved for reclamation, based on yo | our approved permit? * | | | |
| If "NO", please explain | | | | |
| O Yes O No ⊙ N/A | | | | |
| 16. Is the reserved topsoil vegetated/stabilized in accordance with Rule 3.1.9(1)? * | | | | |
| If "NO", please explain | | | | |
| C Yes C No ⊙ N/A | | | | |
| 17. If mining has exposed groundwater, is the site in complian Office of the State Engineer (Well Permit, S.W.S.P., and/or Permit) | | | | |
| C Yes C No C N/A | | | | |
| 18. Are all hazardous materials stored within approved spill c ○ Yes ○ No ○ N/A | ontainment structures? * | | | |
| Tes C no C nya | | | | |
| 19. Is your financial warranty value sufficient to cover the cost to complete reclamation? * | | | | |
| ⊙ Yes C No C N/A | | | | |
| 20. Is your basis for legal right to enter still valid? * | | | | |
| ⊙ Yes ○ No | | | | |
| 21. Does your permit require you to submit monitoring information annually? * | | | | |
| C Yes C No C N/A | | | | |
| 22. As required by Colorado Mined Land Reclamation Act and Extraction of Construction Materials (C.R.S.34-32-116 or 34-3 accurately depicts the permit boundary, current affected area specified in items 8-12 and 15. * | 32.5-116), attach a map to this report that | | | |
| Only PDF formatted files can be uploaded. | | | | |
| M2013041_18 May 30_Annual Report Map (24).pdf | 819.71KB | | | |
| M2013041_18 May 30_Annual Report Map (25).pdf | 2.52MB | | | |
| 23. If you have supplemental information you would like to pr | ovide, please upload it here. | | | |
| Only PDF formatted files can be uploaded. | | | | |
| 24. Rule 5.7 requires submittal of final abandonment reports artesian flows and no later than 12 months for all other comp component of your exploration/prospecting activities, have to Yes O No O NA | leted drill holes. If drill holes are a | | | |
| Previous Proceed | | | | |
| | | | | |

Annual Fee Payment

Annual Fee Payment

Payment Confirmation Number * (?)

117033550

Signature

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. *

✓ I Agree

If you do not see the "Submit" button after completing your report, try to un-check and then re-check the "I Agree" box.

Previous