## **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.

M1991074

Select Anniversary Date \*

11-12-2019

#### 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**

Kiowa County

#### **Operation Name**

Barnett Pit

Permit Number	Fee Due	Permit Acreage
M1991074	791.00	35.00
County	<b>Anniversary Date</b>	<b>Current Bond Amount</b>
Kiowa	11-12-2019	0.00



## **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** 

Jack Howard

**Permittee Company** 

Kiowa County

**Permittee Address 1** 

P.O. Box 100

**Permittee Address 2** 

Permittee City Permittee State Permittee Zip

Eads CO 810360000

Permittee Phone # Permittee Fax #

7194385810 7194385615

**Permittee Contact Email Address** 

Commissioners@kiowacountycolo.com

## **Permitting Contact Info**

**Permitting Contact Name** 

Rodney Hopkins

**Permitting Company** 

Kiowa County

**Permitting Address 1** 

P.O. Box 100

**Permitting Address 2** 

1305 Goff St

Permitting City Permitting State Permitting Zip

Eads CO 810360000

Permitting Phone # Permitting Fax #

7194385810 7194385327

# **Inspection Contact Info**

**Inspection Contact Name** 

Rodney Hopkins

**Inspection Company** 

Kiowa County

**Inspection Address 1** 

P.O. Box 100

**Inspection Address 2** 

1305 Goff St

Inspection City Inspection State Inspection Zip

Eads CO 810360000

Inspection Phone # Inspection Fax #

7194385810 7194385327

**Inspection Contact Email Address** 

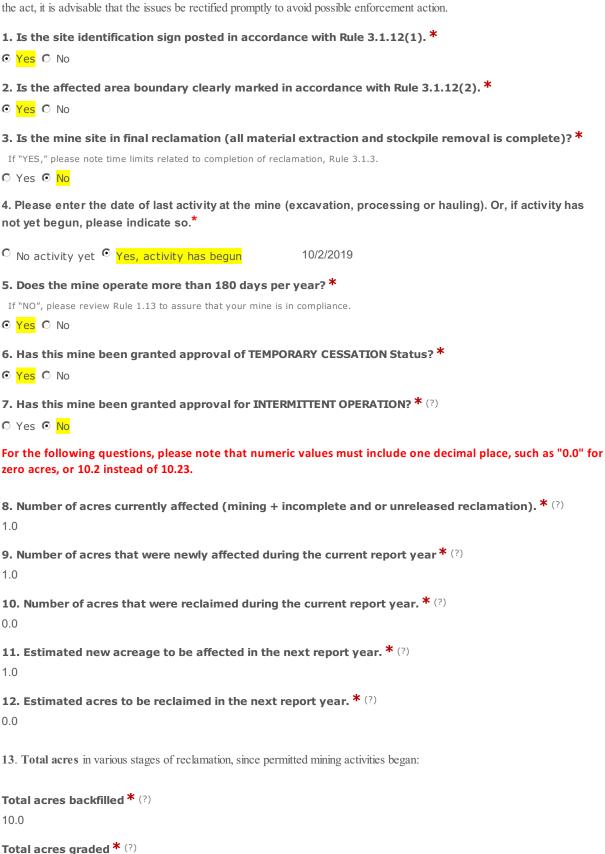
Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. \*

⊙ Yes ○ No

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# **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.



```
Total acres seeded with approved mix * (?)
10.0

Seed Application Method *
Broadcast seeding

Total acres fertilized with aproved fertilizer * (?)
0.0

Total acres with topsoil replaced * (?)
10.0

Topsoil replacement depth (in.) * (?)
5.0

Total acres mulched with approved mulch * (?)
0.0

Previous Proceed
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# 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 ⊙ N/A				
15. Is adequate topsoil reserved for reclamation, based on yo	ur approved permit? *			
If "NO", please explain				
⊙ Yes ○ No ○ N/A				
16. Is the reserved topsoil vegetated/stabilized in accordance	e 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 compliant Office of the State Engineer (Well Permit, S.W.S.P., and/or Per C Yes C No ⊙ N/A				
18. Are all hazardous materials stored within approved spill co	ontainment structures? *			
⊙ Yes ○ No ○ N/A				
19. Is your financial warranty value sufficient to cover the cost to complete reclamation? *				
⊙ Yes ○ No ○ 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 of the control	ation annually? "			
⊙ <mark>Yes</mark> ○ No ○ N/A				
Required Monitoring Results Upload *				
Only PDF formatted files can be uploaded.				
Report.pdf	652.49KB			
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. *	2.5-116), attach a map to this report that			
Only PDF formatted files can be uploaded.				
Kiowa County - Barnett Pit Map.pdf	70.05KB			
23. If you have supplemental information you would like to pro	ovide, please upload it here.			
Only PDF formatted files can be uploaded.	70.05VP			
Kiowa County - Barnett Pit Map.pdf	70.05KB			
24. Rule 5.7 requires submittal of final abandonment reports wartesian flows and no later than 12 months for all other complete component of your exploration/prospecting activities, have the Component of No ⊙ NA	eted drill holes. If drill holes are a			
Previous Proceed				

# Annual Fee Payment

# **Annual Fee Payment**

Payment Confirmation Number \* (?)

121132554

# **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.

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