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.

M1985173

Select Anniversary Date *

02-03-2020

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

Rother Gravel Pit

Permit Number	Fee Due	Permit Acreage
M1985173	791.00	113.00
County	Anniversary Date	Current Bond Amount
Kiowa	02-03-2020	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

Allen Watts

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

Permitting Contact Info

Permitting Contact Name

Allen Watts

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 810360591

Permitting Phone # Permitting Fax #

7194385810

Inspection Contact Info

Inspection Contact Name

Allen Watts

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 810360591

Inspection Phone # Inspection Fax #

7194385810

Inspection Contact Email Address

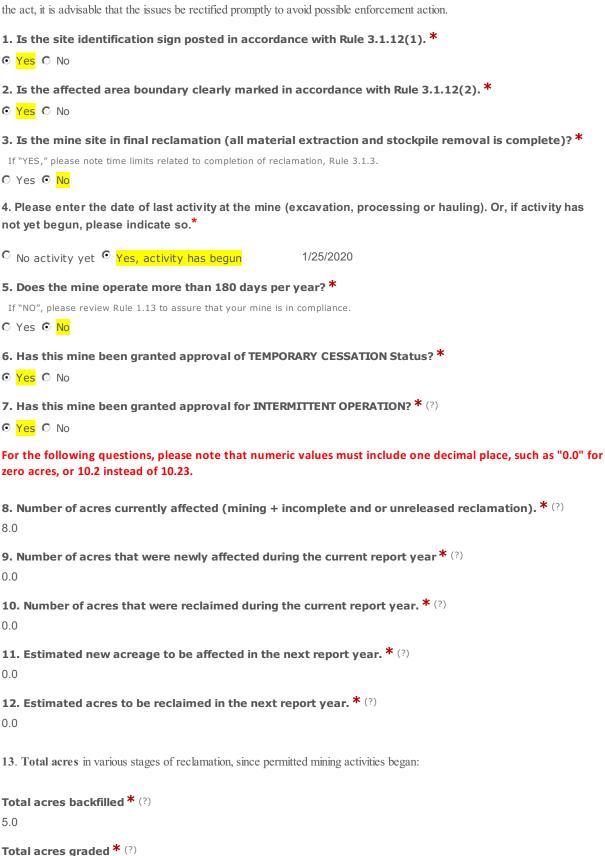
Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. *

⊙ Yes ○ No

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.



Annual Report Questions

	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	our 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				
⊙ Yes C No C 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 approved spill c	ontainment structures? *			
C Yes C No O N/A				
19. Is your financial warranty value sufficient to cover the cos	st to complete reclamation? *			
⊙ Yes C No C N/A				
20. Is your basis for legal right to enter still valid? *				
⊙ <mark>Yes</mark> C No				
21. Does your permit require you to submit monitoring 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. *				
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			
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Annual Fee Payment

Annual Fee Payment

Payment Confirmation Number * (?)

129103636

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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