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.

M1979140

Select Anniversary Date *

02-16-2020

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

Delta County

Operation Name

Lemoine Gravel Pit

| Permit Number | Fee Due | Permit Acreage |
|---------------|------------------|---------------------|
| M1979140 | 791.00 | 33.30 |
| | | |
| County | Anniversary Date | Current Bond Amount |
| Delta | 02-16-2020 | 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

Bob Basher

Permittee Company

Delta County

Permittee Address 1

501 Palmer St

Permittee Address 2

Permittee City Permittee State Permittee Zip

Delta CO 814160000

Permittee Phone # Permittee Fax #

9708745914 9708742455

Permittee Contact Email Address

bbasher@deltacounty.com

Permitting Contact Info

Permitting Contact Name

Permitting Company

Permitting Address 1

Permitting Address 2

Permitting City Permitting State Permitting Zip

Permitting Phone # Permitting Fax #

Permitting Contact Email Address

Inspection Contact Info

Inspection Contact Name

Larry Record

Inspection Company

Delta County

Inspection Address 1

501 Palmer St Ste 227

Inspection Address 2

Inspection City Inspection State Inspection Zip

Delta CO 814160000

Inspection Phone # Inspection Fax #

9708742133 9708742114

Inspection Contact Email Address

Irecord@deltacounty.com

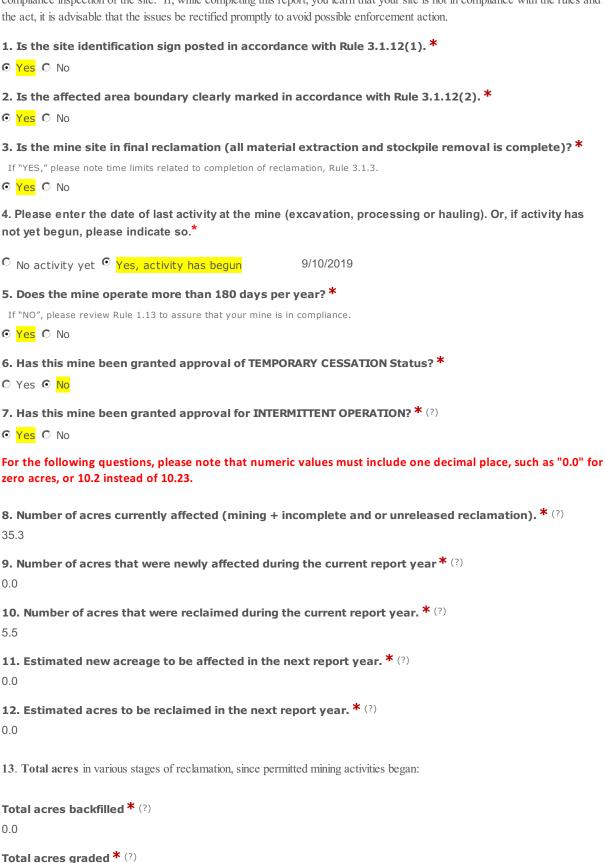
Is the Permitting Contact information listed above correct? If it is not correct your organization's Administrator will receive an email notification. *

⊙ 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.



| 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 C N/A | | | | |
| 15. Is adequate topsoil reserved for reclamation, based on yo | our approved permit? * | | | |
| If "NO", please explain | | | | |
| ⊙ Yes C No C N/A | | | | |
| 16. Is the reserved topsoil vegetated/stabilized in accordance | e with Rule 3.1.9(1)? * | | | |
| If "NO", please explain | | | | |
| ⊙ Yes ○ No ○ N/A | | | | |
| 17. If mining has exposed groundwater, is the site in complia Office of the State Engineer (Well Permit, S.W.S.P., and/or Permit, S.W.S.P., and/or Permit, S.W.S.P., and/or Permit State Engineer (Well Permit, S.W.S.P., and | | | | |
| C Yes C No € N/A | | | | |
| 18. Are all hazardous materials stored within approved spill c | ontainment structures? * | | | |
| C Yes C No C N/A | | | | |
| 19. Is your financial warranty value sufficient to cover the co | st to complete reclamation? * | | | |
| C Yes C No ⊙ N/A | | | | |
| 20. Is your basis for legal right to enter still valid? * | | | | |
| © Yes C No | | | | |
| 21. Does your permit require you to submit monitoring inform | nation annually 2 * | | | |
| C Yes © No C N/A | auon annuany : | | | |
| 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. * Only PDF formatted files can be uploaded. | | | | |
| Lemoine Site Map.pdf | 70.27KB | | | |
| | 10.2110 | | | |
| | | | | |
| 23. If you have supplemental information you would like to pr | ovide, please upload it here. | | | |
| 23. If you have supplemental information you would like to properly PDF formatted files can be uploaded. | | | | |
| 23. If you have supplemental information you would like to pr | rovide, please upload it here. 223.05KB | | | |
| 23. If you have supplemental information you would like to properly PDF formatted files can be uploaded. | 223.05KB within 60 days for any drill hole(s) with leted drill holes. If drill holes are a | | | |
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Annual Fee Payment

Annual Fee Payment

Payment Confirmation Number * (?)

130518172

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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