

## **DRMS Coal Revision Application Modification**



**COLORADO**

**Division of Reclamation,  
Mining and Safety**

Department of Natural Resources

Login

### **General Information**

**Permit Number \***

C1981008

**Select Revision \***

If there are no options available it's because there are no open revisions of the selected type for the selected permit number

Removal of SW-N102

**Operation Name**

New Horizon Mine

**Revision Application Form Selection \***

TR (Technical Revision  
Application)

**Revision Sequence \***

If this does not populate, please contact your specialist to determine which sequence number to use.

97

The following pages will show 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. Indicating that it is inaccurate will send an e-mail to notify your administrator to make the appropriate changes.

## Contact Information

### Permittee Contact Information

**Permittee Name**

Elk Ridge Mining and Reclamation, LLC

**Permittee Contact**

Barbara Waltz

**Permittee Address 1**

PO Box 33695

**Permittee Address 2****Permittee City**

Denver

**Permittee State**

CO

**Permittee Zip Code**

802330695

**Permittee Contact Email Address****Permittee Contact Phone Number**

### Permitting Contact Info

**Permitting Name**

Tri-State Generation and Transmission Assoc., Inc

**Permitting Contact**

Chris Gilbreath

**Permitting Address 1**

P.O. Box 33695

**Permitting Address 2****Permitting City**

Denver

**Permitting State**

CO

**Permitting Zip Code**

802330695

**Permitting Contact Email Address**

cgilbreath@tristategt.org

**Permitting Contact Phone Number**

3032543291

### Inspection Contact Info

**Inspection Name**

Elk Ridge Mining and Reclamation, LLC

**Inspection Contact**

Tony Tennyson

**Inspection Address 1**

5731 State Highway 13

**Inspection Address 2**

**Inspection City**

Meeker

**Inspection State**

CO

**Inspection Zip Code**

816410000

**Inspection Contact Email Address**

ttennyson@tristategt.org

**Inspection Contact Phone Number**

9708241210

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

☒ Yes ☐ No

Once this form is submitted you will see a link to update contact information, which you may do if you're an admin.

# Surface Area Changes

## Revision

**Revision Title \*** (?)

Removal of SW-N102

Short description

**Narrative Description of Revision \*** (?)

The operator is proposing to remove surface water monitoring site SW-N102 from the water monitoring requirements.

Detailed description used for notifications

**Bond Amount Change? \***

☐ Yes ☒ No

**Additional Surface Disturbance? \***

☐ Yes ☒ No

## Proposed Acreage Revisions

### Permit Area

**Current Value**

535.65

**Proposed Change Value \*** (?)

0.00

**Calculated Revised Total**

535.65

This value must equal the total of all Surface and Mineral Acreage changes

### Affected Area

**Current Value**

561.68

**Proposed Change Value \*** (?)

0.00

**Calculated Revised Total**

561.68

### Disturbed Area

**Current Value**

463.06

**Proposed Change Value \*** (?)

0.00

**Calculated Revised Total**

463.06

## Attachments & Maps

### Proposed Public Notice Attachment

Do you have attachments? \*

☒ Yes ☐ No

### Attachments

Attachment Type \*

Document

Confidential \*

No

Attachment Upload \*

TR-97 Adequacy Response.pdf

166.8KB

Document Name \*

TR-97 Adequacy Response

### Document / Map List

New or Revised Documents / Pages \*

If none exist, enter NONE in the comment box below.  
Please see attached change sheet.

New or Revised Maps \*

If none exist, enter NONE in the comment box below.  
Please see attached change sheet.

Deleted Documents / Pages \*

If none exist, enter NONE in the comment box below.  
Please see attached change sheet.

Deleted Maps \*

If none exist, enter NONE in the comment box below.  
Please see attached change sheet.

### Signature

Date

03/26/20

By checking this box you have thoroughly reviewed this Coal Revision form and are ready to submit this form to DRMS.

☒ I Agree