

**COLORADO** Division of Reclamation, Mining and Safety

### Department of Natural Resources

## **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.

M1977342

#### Select Anniversary Date \*

03-08-2021

#### 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 \*

I understand and agree to the terms

### **General Information**

#### **Permittee Name**

Climax Molybdenum Company

#### **Operation Name**

Henderson Mine

Permit Number	Fee Due	Permit Acreage
M1977342	1150.00	11877.50
County	Anniversary Date	Current Bond Amount

Proceed

# **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 Na	me			
Miguel Hamarat				
Permittee Company				
Climax Molybdenum Company				
Permittee Address 1				
P.O. Box 68				
Permittee Address 2				
Permittee City	Permittee State	Permittee Zip		
Empire	CO	804380000		
Permittee Phone #	Permittee Fa	ax #		
7209423255				
Permittee Contact Em	and Address			
mhamarat@fmi.com	Iall Address			
Permitting Co	ntact Info			
Permitting Contact Na	ame			
Stuart Teuscher				
Permitting Company				
Climax Molybdenum Com	npany			
Permitting Address 1				
P.O. Box 68				
Permitting Address 2				
Permitting City	Permitting State	Permitting Zip		
Empire	CO	804380000		
Emplie		00700000		
Permitting Phone #	Permitting F	ax #		

**Permitting Contact Email Address** 

Inspection Con	tact Info			
Inspection Contact Nar	ne			
Geoffrey Niggeler				
Inspection Company Climax Molybdenum Company				
19302 County Rd. #3				
Inspection Address 2				
Inspection City	Inspection State	Inspection Zip		
Parshall	CO	804680000		
Inspection Phone #	Inspection Fa	x #		
7209423631				
Inspection Contact Ema	ail Address			
gniggele@fmi.com				
		oove correct? If it is not correct your organization's		
Administrator will rece     If the second seco	ive an email notification	ı. <b>*</b>		
Previous Proceed				

# Annual Report Questions

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.
<ol> <li>Is the site identification sign posted in accordance with Rule 3.1.12(1).</li> <li>Yes No</li> </ol>
<ul> <li>2. Is the affected area boundary clearly marked in accordance with Rule 3.1.12(2). *</li> <li>Yes No</li> </ul>
<ul> <li>3. Is the mine site in final reclamation (all material extraction and stockpile removal is complete)? *</li> <li>If "YES," please note time limits related to completion of reclamation, Rule 3.1.3.</li> <li>Yes </li> <li>No</li> </ul>
4. Please enter the date of last activity at the mine (excavation, processing or hauling). Or, if activity has not yet begun, please indicate so. <sup>*</sup>
No activity yet <sup>(e)</sup> Yes, activity has begun 3/8/2021
<ul> <li>5. Does the mine operate more than 180 days per year? *</li> <li>If "NO", please review Rule 1.13 to assure that your mine is in compliance.</li> <li>Yes No</li> </ul>
6. Has this mine been granted approval of TEMPORARY CESSATION Status? *
7. Has this mine been granted approval for INTERMITTENT OPERATION? * (?) <ul> <li>Yes <ul> <li>No</li> </ul> </li> </ul>
For the following questions, please note that numeric values must include one decimal place, such as "0.0" for zero acres, or 10.2 instead of 10.23.
8. Number of acres currently affected (mining + incomplete and or unreleased reclamation). * (?) 4360.2
9. Number of acres that were newly affected during the current report year * $(?)$ 0.0
<b>10.</b> Number of acres that were reclaimed during the current report year. <b>*</b> (?) 0.0
<b>11. Estimated new acreage to be affected in the next report year. *</b> (?) 0.0
<ul> <li><b>12. Estimated acres to be reclaimed in the next report year.</b> * (?)</li> <li>0.0</li> </ul>
13. Total acres in various stages of reclamation, since permitted mining activities began:
Total acres backfilled * (?)

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Total acres graded * (?)
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
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Previous Proceed

# Annual Report Questions

14. Is weed control being conducted in accordance with an	approved Weed Control Plan? *
If "YES", indicate the weed species, control area, control type, application rat	e and treatment date on the report map.
○ Yes ○ No ● N/A	
15. Is adequate topsoil reserved for reclamation, based on	your approved permit? *
If "NO", please explain	
◉ <mark>Yes</mark> ◎ No ◎ N/A	
16. Is the reserved topsoil vegetated/stabilized in accordar	nce with Rule 3.1.9(1)? *
If "NO", please explain	
● <mark>Yes</mark> ○ No ○ N/A	
17. If mining has exposed groundwater, is the site in comp Office of the State Engineer (Well Permit, S.W.S.P., and/or	· · · · · ·
● <mark>Yes</mark> ○ No ○ N/A	
18. Are all hazardous materials stored within approved spil	l containment structures? *
● <mark>Yes</mark> ○ No ○ N/A	
19. Is your financial warranty value sufficient to cover the	cost to complete reclamation? *
● <mark>Yes</mark> ○ No ○ N/A	
20. Is your basis for legal right to enter still valid? $st$	
Yes O No	
21. Does your permit require you to submit monitoring info	rmation annually? *
◯ Yes ◯ No ◉ <mark>N/A</mark>	
22. As required by Colorado Mined Land Reclamation Act ar the Extraction of Construction Materials (C.R.S.34-32-116 of that accurately depicts the permit boundary, current affects acreages specified in items 8-12 and 15. *	r 34-32.5-116), attach a map to this report
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# Annual Fee Payment

## **Annual Fee Payment**

Payment Confirmation Number \* (?)

162269714

## 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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