

December 14, 2021

Richard Mittasch
Grand Island Resources LLC
P.O. Box 3395
4415 Caribou Rd
Nederland, CO 80466

RE: Cross Gold Mine, Permit No. M-1977-410, Notice of Citizen Complaints Received

Mr. Mittasch:

The Division of Reclamation, Mining and Safety (Division) has received the following complaints against the above referenced operation (complaints sent to you on November 22 and 30, 2021 and December 3, 7, and 10, 2021 are differentiated with gray text):

- 1) Complaint from Anonymous, received on November 21, 2021.
- 2) Complaint from Cody Newman, received on November 21, 2021.
- 3) Complaint from Julia German, received on November 25, 2021.
- 4) Complaint from Anonymous, received on November 28, 2021.
- 5) Complaint from Anonymous, received on November 28, 2021.
- 6) Complaint from Natalie Longhini, received on November 28, 2021.
- 7) Complaint from Anonymous, received on November 29, 2021.
- 8) Complaint from Lisa McCoy, received on November 29, 2021.
- 9) Complaint from Deborah Seigel, received on November 29, 2021.
- 10) Complaint from Anonymous, received on November 30, 2021.
- 11) Complaint from Amanda Kneer, received on December 1, 2021.
- 12) Complaint from Lauren Trojan, received on December 2, 2021.
- 13) Complaint from Anonymous, received on December 2, 2021.
- 14) Complaint from Anonymous, received on December 2, 2021.
- 15) Complaint from Carole Buhlman, received on December 4, 2021.
- 16) Complaint from Anonymous, received on December 5, 2021.
- 17) Complaint from Douglas DeVoto, received on December 5, 2021.
- 18) Complaint from Janet Davis, received on December 5, 2021.
- 19) Complaint from Whitney Yeldell, received on December 5, 2021.
- 20) Complaint from Anonymous, received on December 6, 2021.
- 21) Complaint from Anonymous, received on December 6, 2021.
- 22) Complaint from Anonymous, received on December 6, 2021.
- 23) Complaint from Anonymous, received on December 6, 2021.
- 24) Complaint from Anonymous, received on December 6, 2021.



- 25) Complaint from Anonymous, received on December 6, 2021.
- 26) Complaint from Anonymous, received on December 6, 2021.
- 27) Complaint from Anonymous, received on December 7, 2021.
- 28) Complaint from Anonymous, received on December 7, 2021.
- 29) Complaint from Anonymous, received on December 8, 2021.
- 30) Complaint from Anonymous, received on December 8, 2021.
- 31) Complaint from Diane MacDonald, received on December 8, 2021.
- 32) Complaint from Edward Harrison, received on December 8, 2021.
- 33) Complaint from Patricia Dowd, received on December 8, 2021.
- 34) Complaint from Sarah Rosenblum, received on December 8, 2021.
- 35) Complaint from Anonymous, received on December 9, 2021.
- 36) Complaint from Kristen Nielson, received on December 9, 2021.
- 37) Complaint from Anonymous, received on December 9, 2021.
- 38) Complaint from Anonymous, received on December 10, 2021.
- 39) Complaint from Anonymous, received on December 10, 2021.
- 40) Complaint from Anonymous, received on December 10, 2021.
- 41) Complaint from Jill Dreves, received on December 10, 2021.
- 42) Complaint from Anonymous, received on December 11, 2021.
- 43) Complaint from Nancy Bodnar, received on December 11, 2021.
- 44) Complaint from Anonymous, received on December 12, 2021.
- 45) Complaint from Anonymous, received on December 13, 2021.
- 46) Complaint from Anonymous, received on December 13, 2021.
- 47) Complaint from Guy Seebohm, received on December 13, 2021.
- 48) Complaint from Lori Abel, received on December 13, 2021.

Copies of the additional complaint letters received are enclosed for your records. Please respond to the issues raised in these letters no later than **December 22, 2021**. This response may be submitted via email.

The Division is reviewing the permit and will contact you if an inspection is warranted.

If you have any questions, you may contact me by telephone at 303-866-3567, ext. 8129, or by email at amy.eschberger@state.co.us.

Sincerely,



Amy Eschberger
Environmental Protection Specialist

Encls: Complaint from Anonymous, received on December 9, 2021
Complaint from Anonymous, received on December 10, 2021
Complaint from Anonymous, received on December 10, 2021
Complaint from Anonymous, received on December 10, 2021
Complaint from Jill Dreves, received on December 10, 2021
Complaint from Anonymous, received on December 11, 2021

Complaint from Nancy Bodnar, received on December 11, 2021
Complaint from Anonymous, received on December 12, 2021
Complaint from Anonymous, received on December 13, 2021
Complaint from Anonymous, received on December 13, 2021
Complaint from Guy Seebohm, received on December 13, 2021
Complaint from Lori Abel, received on December 13, 2021

Cc: Daniel Pollock, Grand Island Resources LLC
Michael Cunningham, DRMS

DRMS Complaint Intake Tool

By Submitting this form you are requesting an investigation of compliance with DRMS rules.



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/09/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☐ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Boulder

Incident County *

Boulder County

Is this an ongoing issue(s)?

☐ Yes ☒ No

Nature of Complaint *

Select all that apply

- | | |
|--|--|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

The residents are being denied access to clean water which is a basic human right. Grand Island Resources LLC is violating our right by dumping heavy metals in the water reserves of the city of Boulder

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Grand Island Resources LLC

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

- ☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

By Submitting this form you are requesting an investigation of compliance with DRMS rules.



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/10/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☐ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Cross and Caribou Mines

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

Violation of discharge permit: dumping illegal amounts of heavy metals above barker reservoir.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Cross and Caribou Mines

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M2021069 M1977410 (verified with complainant)

Date of Complaint

12/10/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> Land Owner | <input type="checkbox"/> Mineral Owner |
| <input type="checkbox"/> Nearby Resident | <input type="checkbox"/> Observed Incident |
| <input checked="" type="checkbox"/> Other good friend owns land there | |

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

There is no excuse for this except greed and laziness.

Incident County *

Arapahoe County Boulder County (verified with complainant)

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

Dumping heavy metals into the water supply

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION



Are there supporting photos, maps, or documents you wish to upload? *

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/10/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☒ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☒ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Increased traffic on Caribou Rd. I live on the road and ride my bike up the road, the worker's trucks are constantly speeding up and down, and the large earth moving trucks kick up excessive dust. Caribou Rd is beginning to collapse above the mine entrance, they were spraying some sort of chemical around the entrance that was flying high up into the sky and coating the trees. I believe they are putting up No Trespassing signs on areas that are forest service land cutting off public access off of the 505. Just yesterday and semi jack knifed at the bottom of Caribou Rd, not having a designated route these trucks are trying to maneuver tight mountain roads and cannot make some of the turns and get stuck, cutting off entire neighborhoods. I'm sure you've already heard of the heavy metals and pollutants they are releasing into the water. Please make them stop. Thanks

Incident County *

Boulder County

Is this an ongoing issue(s)?

☐ Yes ☒ No

Nature of Complaint *

Select all that apply

- | | |
|--|---|
| <input type="checkbox"/> Illegal Mining | <input checked="" type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input checked="" type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input checked="" type="checkbox"/> Fish / Wildlife | <input checked="" type="checkbox"/> Erosion / Sedimentation |
| <input checked="" type="checkbox"/> Off-Site Damage | <input checked="" type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

See above

Have you contacted the operator or party conducting the operation? If yes, please provide details. *☐ Yes ☒ No**If known, please provide the name of the operator or party conducting the operation.**

Grand Island Resources

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *☐ Yes ☒ No**ADDITIONAL INFORMATION****Are there supporting photos, maps, or documents you wish to upload? ***☐ Yes ☒ No**What is your preferred method for DRMS to communicate with you throughout the investigation? ***

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

By Submitting this form you are requesting an investigation of compliance with DRMS rules.

COMPLAINANT INFORMATION

Date of Complaint

12/10/2021

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☐ Yes ☒ No

Your First Name *

Jill

Your Last Name *

Dreves

Your Address *

697 west pine street

Your City *

Nederland

Your State

CO

Your Zip Code *

Maximum of 10 digits. (Example) 80202

89466

Email Address *

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

jilledreves@gmail.com

Your Phone Number *

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

303-588-0299

Alternate Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

Connection to Incident *

Select all that apply

☒ Land Owner

☒ Nearby Resident

☐ Other

☐ Mineral Owner

☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Name of Operator: Caribou and Cross Mines, Grand Island Resources, LLC

Permit Number: M1977410

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|---|---|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

There is an ongoing permit application that has been essentially modified since the public comment period closed. Violations have been reported since that time and the proposal itself has been fundamentally altered. Therefore we request that the application be reopened for public comment. The mine's discharge feeds into the drinking water for Boulder County residents, and flows through the property of hundreds of residents relying on well water for their homes. Several years of discharge reports have shown heavy metal discharge into the waterway. Daily sanctions have not been imposed, and should be, and further operations should be prohibited until it has been confirmed that ongoing discharge has ceased, and the risk to public health and safety abated. The expansion requests from this mine should not be considered or granted until such time as their current operations are lawful and the expansion is assured to pose no further risk.

Name of Operator: Caribou and Cross Mines, Grand Island Resources, LLC

Permit Number: M1977410

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Name of Operator: Caribou and Cross Mines, Grand Island Resources, LLC

If known, please provide the Permit or NOI Number (ie M1970111 or P1970111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

M1977410

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION

Are there supporting photos, maps, or documents you wish to upload? *

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/11/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

☐ Land Owner

☐ Nearby Resident

☒ Other volunteer with dog rescue that uses impacted land

☐ Mineral Owner

☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

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Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Caribou and Cross Mines, Nederland CO

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|--|---|
| <input checked="" type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input checked="" type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
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| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
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| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input checked="" type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

There is an ongoing permit application that has been essentially modified since the public comment period closed. Violations have been reported since that time and the proposal itself has been fundamentally altered. Therefore we request that the application be reopened for public comment.

The mine's discharge feeds into the drinking water for Boulder County residents, and flows through a community reliant on the water for drinking, agriculture and wildlife.

Discharge reports have shown heavy metal discharge into the waterway above legal limits set for in their NPDES discharge permit. Daily sanctions have not been imposed, and should be, and further operations should be prohibited until it has been confirmed that ongoing discharge has ceased, and the risk to public health and safety abated. The expansion requests from this mine should not be considered or granted until such time as their current operations are lawful and the expansion is assured to pose no further risk.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Caribou and Cross Mines, Grand Island Resources, LLC

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

M1977410

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

By Submitting this form you are requesting an investigation of compliance with DRMS rules.

COMPLAINANT INFORMATION

Date of Complaint

12/11/2021

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☐ Yes ☒ No

Your First Name *

Nancy

Your Last Name *

Bodnar

Your Address *

432 Beaver Creek Drive

Your City *

Nederland

Your State

CO

Your Zip Code *

Maximum of 10 digits. (Example) 80202

80466

Email Address *

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

mountainfolk@gmail.com

Your Phone Number *

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

303-641-6504

Alternate Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

Connection to Incident *

Select all that apply

☐ Land Owner

☒ Nearby Resident

☐ Other

☐ Mineral Owner

☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Caribou and Cross Mines
Nederland, CO 80466

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|--|---|
| <input checked="" type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input checked="" type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input checked="" type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

There is an ongoing permit application that has been essentially modified since the public comment period closed. Violations have been reported since that time and the proposal itself has been fundamentally altered. Therefore, we request that the application be reopened for public comment. The mine's discharge feeds into the drinking water for Boulder County residents and flows through the property of hundreds of residents relying on well water for their homes. Several years of discharge reports have shown heavy metal discharge into the waterway. Daily sanctions have not been imposed, and should be, and further operations should be prohibited until it has been confirmed that ongoing discharge had ceased and the risk to public health and safety be abated. This expansion requests from this mine should not be considered or granted until such time as their current operations are lawful and the expansion is assured to pose no further risk.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Caribou and Cross Mines, Grand Island Resources, LLC

If known, please provide the Permit or NOI Number (ie M1970111 or P1970111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

M1977410

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION

Are there supporting photos, maps, or documents you wish to upload? *

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/12/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☐ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Caribou mine

Incident County *

Boulder County

Is this an ongoing issue(s)?

☐ Yes ☒ No

Nature of Complaint *

Select all that apply

- | | |
|--|--|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

Water contamination

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Grand island resources

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/13/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☐ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Boulder County

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

PLEASE send the owners of Cross and Caribou Mines a cease and desist—they were recently cited for violating their discharge permit and are continuing to contaminate our Boulder water supply. This is terrifying, illegal, and unhealthy. Continued violations from this mine are disastrous for our Boulder community.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.**If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).**

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool

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COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

DRMS Internal Information

Select Permit Type *

Minerals

Permit No List *

M1977410

Date of Complaint

12/13/2021

COMPLAINANT INFORMATION

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☒ Yes ☐ No

Connection to Incident *

Select all that apply

- ☒ Land Owner
☒ Nearby Resident
☐ Other

- ☐ Mineral Owner
☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

Cross and Caribou Mines at 4415 Caribou Road

Incident County *

Boulder County

Is this an ongoing issue(s)?

☐ Yes ☒ No

Nature of Complaint *

Select all that apply

- | | |
|--|--|
| <input checked="" type="checkbox"/> Illegal Mining | <input checked="" type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input checked="" type="checkbox"/> Acid or Toxic Materials/Spills |
| <input checked="" type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input checked="" type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input checked="" type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input checked="" type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input checked="" type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

There is an ongoing permit application that has been essentially modified since the public comment period closed. Violations have been reported since that time and the proposal itself has been fundamentally altered. Therefore we request that the application be reopened for public comment. The mine's discharge feeds into the drinking water for Boulder County residents, and flows through the property of hundreds of residents relying on well water for their homes. Several years of discharge reports have shown heavy metal discharge into the waterway. Daily sanctions have not been imposed, and should be, and further operations should be prohibited until it has been confirmed that ongoing discharge has ceased, and the risk to public health and safety abated. The expansion requests from this mine should not be considered or granted until such time as their current operations are lawful and the expansion is assured to pose no further risk.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Caribou and Cross Mines, Grand Island Resources, LLC

If known, please provide the Permit or NOI Number (ie M-1970-111 or P-1970-111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

M1977410

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION**Are there supporting photos, maps, or documents you wish to upload? ***

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail

DRMS Complaint Intake Tool



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

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COMPLAINANT INFORMATION

Date of Complaint

12/13/2021

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☐ Yes ☒ No

Your First Name *

Guy

Your Last Name *

Seebohm

Your Address *

2020 5th Street, Apt C

Your City *

Boulder

Your State

CO

Your Zip Code *

Maximum of 10 digits. (Example) 80202

80302

Email Address *

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

gseebohm@yahoo.com

Your Phone Number *

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

917-860-3112

Alternate Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

Connection to Incident *

Select all that apply

☐ Land Owner

☐ Mineral Owner

☒ Nearby Resident

☐ Observed Incident

☐ Other

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

2020 fifth St., boulder Colorado

Incident County *

Boulder County

Is this an ongoing issue(s)?

☒ Yes ☐ No

Nature of Complaint *

Select all that apply

- | | |
|---|---|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input checked="" type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

The public should have access to the hearing on the cease and desist order for Grand island resources LLC mine number 1977-410. The mining operation should cease all operations until Boulder's water supply is assured to be unaffected

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

Grand island resources LLC

If known, please provide the Permit or NOI Number (ie M1970111 or P1970111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

M1977410

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION

Are there supporting photos, maps, or documents you wish to upload? *

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☒ US Mail

DRMS Complaint Intake Tool



COLORADO
Division of Reclamation,
Mining and Safety
Department of Natural Resources

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COMPLAINANT INFORMATION

Date of Complaint

12/13/2021

*** Indicates a Required Field**

Do you wish to remain anonymous? *

☐ Yes ☒ No

Your First Name *

Lori

Your Last Name *

Abel

Your Address *

6495 Kalua Rd Apt 104

Your City *

Boulder

Your State

CO

Your Zip Code *

Maximum of 10 digits. (Example) 80202

80301

Email Address *

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

loriabel@gmail.com

Your Phone Number *

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

720-795-8528

Alternate Phone Number

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

720-795-8528

Connection to Incident *

Select all that apply

☐ Land Owner

☒ Nearby Resident

☐ Other

☐ Mineral Owner

☐ Observed Incident

DESCRIPTION OF COMPLAINT

(Please be as specific as possible)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, DRMS will not be able to process or investigate the complaint and, therefore, DRMS will have no choice but to discard the complaint.

Location of Concern *

Please provide as much detail as possible. It is important to narrow down the location. If available, please include Township, Range and Section, physical address, or GPS location. You may also upload a pdf map below.

I have been drinking Boulder water at my workplace Elements Massage in the Pearl Street Mall next to Whole Foods Market. I frequently touch the water in the Boulder Creek near the Boulder Library, which is fed by the Barker Reservoir.

Incident County *

Boulder County

Is this an ongoing issue(s)?

☐ Yes ☒ No

Nature of Complaint *

Select all that apply

- | | |
|---|---|
| <input type="checkbox"/> Illegal Mining | <input type="checkbox"/> Dust |
| <input checked="" type="checkbox"/> Ground Water / Water Well Impact | <input type="checkbox"/> Acid or Toxic Materials/Spills |
| <input type="checkbox"/> Surface Water Impact / Stormwater Management | <input type="checkbox"/> Property Damage |
| <input type="checkbox"/> Mine Plan Compliance | <input type="checkbox"/> Waste Management / Dumping |
| <input type="checkbox"/> Signs and Markers | <input type="checkbox"/> Overburden / Development Waste |
| <input type="checkbox"/> Financial Warranty | <input type="checkbox"/> Backfilling and Grading |
| <input type="checkbox"/> Processing Waste / Tailings | <input type="checkbox"/> Processing Facilities |
| <input type="checkbox"/> Fish / Wildlife | <input type="checkbox"/> Erosion / Sedimentation |
| <input type="checkbox"/> Off-Site Damage | <input type="checkbox"/> Roads |
| <input type="checkbox"/> Explosives / Blasting | <input type="checkbox"/> Topsoil |
| <input type="checkbox"/> Revegetation | <input type="checkbox"/> Weeds |
| <input type="checkbox"/> Reclamation Plan Compliance | <input type="checkbox"/> Other <input type="text"/> |

Detailed description of the issue(s) * (?)

Please provide as much detail as possible. It is important to narrow down the issue(s).

The issue is that the water that is contaminated by the waste from the mine, ends up in our local drinking water. Therefore I am impacted. I touch water near Boulder Library, and drink Boulder City water.

Have you contacted the operator or party conducting the operation? If yes, please provide details. *

☐ Yes ☒ No

If known, please provide the name of the operator or party conducting the operation.

If known, please provide the Permit or NOI Number (ie M1970111 or P1970111).

Must be entered in the following format: M1970111 or P1970111 (No dashes allowed)

Have you contacted any other agencies or local governments related to this issue or issues? If so, please provide details. *

☐ Yes ☒ No

ADDITIONAL INFORMATION

Are there supporting photos, maps, or documents you wish to upload? *

☐ Yes ☒ No

What is your preferred method for DRMS to communicate with you throughout the investigation? *

Select all that apply

☐ Phone ☒ E-mail ☐ US Mail