

1313 Sherman Street, Room 215 Denver, CO 80203

MINERAL PROSPECTING DRILL HOLE PERMANENT ABANDONMENT FINAL REPORT

Pursuant to the terms of 34-32-113(5.5)(d) and (e) of the Act and Rule 5.7 of the Mineral Rules and Regulations of the Colorado Mined Land Reclamation Board for Hard Rock, Metal, and Designated Mining Operations, abandonment reports shall be submitted to the Division within 60 days of abandonment for any drill hole with artesian flow, or within 12 months of abandonment for any other drill hole.

| | | P | | | |
|--|-------------------------------|-----------------------------|---|---------|--|
| (PROSPECT SITE NAME) | | (PROSPECT NOI No.) | | | |
| | | | | | |
| I. <u>DRILL HOLE</u> : Dril | ll Hole I.D. No. KDB-22-00 | 2 | | | |
| For this Section I, please | attach completed drill hole l | ogs OR complete th | e following information | n: | |
| | | | | | |
| (Total Depth) (Depth of Unconsolidate | | red Material) (| Material) (Depth of Penetration into Bedrock) | | |
| (Total Depth) (Depth of Cheonsondated Material) (Depth of Telectration into Dedrock) | | | | | |
| Was water encountered: | No Yes | if so, at what depth(| (s): | | |
| Was water encountered in either Volcanic or Sedimentary Rock: No Yes | | | | | |
| Date Drilled: | | Date Permanently Abandoned: | | | |
| | | | | | |
| II. <u>OPERATOR</u> (PROSPECTOR) : <u>DRILLER</u> : | | | | | |
| | | | | | |
| (Name) | | (Name) | | | |
| | | | | | |
| (Address) | | (Address) | | | |
| | | | | | |
| (City) | (State) | ((| City) | (State) | |
| | | | | | |
| (Zip) | (Telephone No.) | (Zip) | (Telephon | e No.) | |



III.LOCATION: The following information is required for ALL prospecting drill holes: 1/4 of Section Township Range 1/4 of the Prime Meridian County If the area has not been surveyed, supply the Longitude West and Latitude North, or attach a location map, preferably a USGS Quad. The following additional information is required for artesian flowing holes: Feet North South from the South North section line feet east West from the west East section line In the case of closely spaced drill holes having similar geologic and hydrologic characteristics, the Operator may, with the approval of the Division, submit a single consolidated final report including the location of all drill holes and a description of abandonment technique. In such case, complete one abandonment final report form and attach a list of drill hole locations. If more space is needed to provide any of the information for this form, please attach separate sheets. IV. Complete Either Subsection A or B: **PERMANENT ABANDONMENT** (Check either box 1 or subsection 2 boxes as appropriate and provide the requested information) 1. Plugged dry hole, method of plugging: Depth at which concrete plug set: feet below ground surface. 2. Sealed Hole (when groundwater is encountered): 2a. Neat Cement Grout, top to bottom: grout mixture used: Intervals grouted (feet beneath ground surface, method and materials): 2b. Neat Cement Grout, interval grouting: grout mixture used: Intervals grouted (feet beneath ground surface, method and materials): 2c. Abandonment Fluid Mixture (Such as Sodium Bentonite with Polymer) Brand Name:

| Marsh Funnel viscosity of abandonment fluid: | sec. | | | | |
|---|----------------------------|--|--|--|--|
| Type of surface plugging used: | | | | | |
| Depth at which plug set: | feet below ground surface, | | | | |
| Method: | | | | | |
| 2d. Other method used with approval of the Division of Reclamation, Mining and Safety; describe in detail | | | | | |
| method and materials used on a separate attached sheet. | | | | | |
| B. CONVERSION TO A WATER WELL | | | | | |
| State Engineer's Permit No.: | (attach copy of permit) | | | | |
| County Where Well is Located: | | | | | |
| Water Well Use: | | | | | |
| V. METHOD OF RECLAIMING DRILL SITE SURFACE DISTURBANCE: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| The Operator who conducted the prospecting drill operation states that the information set forth | | | | | |
| hereupon is true to the best of their knowledge. | | | | | |
| | | | | | |
| (Name of Operator's Representative | e) (Title) | | | | |
| | | | | | |
| (Signature of Operator's Representati | ve) (Date) | | | | |