

Environment, Inc.

LARRY E. O'BRIAN
FOUNDER

STEVEN L. O'BRIAN
PRESIDENT

7985 VANCE DRIVE, SUITE 205A
ARVADA, COLORADO 80003
303-423-7297
FAX 303-423-7599

July 8, 2024

Mr. Brock Bowles - via e-mail
Division of Reclamation, Mining & Safety
1313 Sherman St., #215
Denver, CO 80215

Dear Brock;

RE: Zuege Mine, LLC
Zuege Mine, Permit # M-2024-028
Adequacy Response #1

On behalf of our client Zuege Mine LLC, I have responded to your July 3, 2024 - Adequacy Review #1 in the order and number format presented in that document. I have only included the sections of your letter that contain discussion that needs a response.

1.6.2(1)(e) - Adjacent Landowner Notification - Please also submit proof that adjacent landowners within 200 feet of the boundary of the affected lands have been served a copy of the notice required by Rule 1.6.2(1)(d).

Attached is a copy of the Adjoining Owner notice letter receipts showing it was delivered to all parties within 200 feet of the affected lands.

1.6.2(1)(g) - The comment period is currently open until ten (10) days after the last day of newspaper publication. The close of comment period be determined when the proof of publication is submitted to the Division. Any comments received in the meantime will be forwarded to you.

The notice was published in the Akron News-Reporter on June 26, 2024 and comment period ends at 4:00 PM on 7/8/24. A copy is attached for the file.

Proof that a copy of this response and attachments was placed with the Washington County Clerk will be provided under separate cover.

I understand that you will be reviewing the Reclamation Cost Estimate once you have completed the pre- operation inspection.

I hope these responses have addressed the adequacy items you had also thank you for all your help on this application. If you have any questions please call.



Sincerely,
Environment, Inc



Stevan L. O'Brian
President

cc Zuege Mine, LLC
Washington County Clerk
file

enclosures

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Add. see</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>												
<p>1. Article Addressed to:</p> <p>Daniel J. Sherwood, II 44503 County Road 54 Otis, CO 80743-9621</p>  <p>9590 9402 5695 9346 6379 44</p>	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input checked="" type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Return Receipt for Merchandise</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr></table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
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<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<p>2. Article Number (Transfer from service label)</p> <p>7019 2970 0000 8239 2827</p>	<p>Restricted Delivery</p>												

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7019 2970 0000 8239 2827

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee \$ 4.40

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.15
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ 0.00

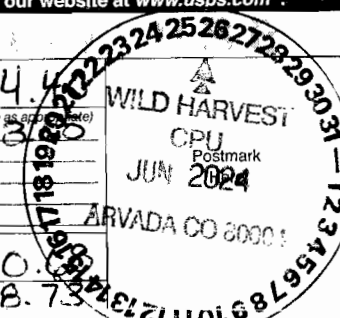
Total Postage and Fees \$ 8.73

Sent To Daniel J. Sherwood, II

Street and Apt. No. 44503 County Road 54

City, State, ZIP+4® Otis, CO 80743-9621

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

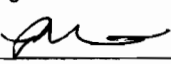



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<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature X <u>Denise Zuege</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>												
<p>1. Article Addressed to:</p> <p>Allen & Denise Zuege 23715 US Highway 34 Wray, CO 80758</p> <p>Barcode: 9590 9402 5695 9346 6379 20</p>	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input checked="" type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Return Receipt for Merchandise</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr></table> <p>1 Mail 1 Mail Restricted Delivery (500)</p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
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<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<p>2. Article Number (Transfer from service label)</p> <p>7019 2970 0000 8239 2803</p>													
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>													

7019 2970 0000 8239 2803

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
Certified Mail Fee	\$ 4.40
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.60
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.00
Total Postage and Fees	\$ 8.00
Sent To	Allen & Denise
Street and Apt. No.,	23715 US Highway 34
City, State, ZIP+4®	Wray, CO 80758
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark Here
JUL 1 2024
WY CO 80758

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p>Marilyn J. Mustain 42454 County Road 55 Otis, CO 80743-9609</p>  <p>9590 9402 5695 9346 6379 37</p>	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input checked="" type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Return Receipt for Merchandise</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Registered Mail Restricted Delivery</td><td></td></tr><tr><td><input type="checkbox"/> Registered Mail Restricted Delivery (\$500)</td><td></td></tr></table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery		<input type="checkbox"/> Registered Mail Restricted Delivery (\$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
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<input type="checkbox"/> Registered Mail Restricted Delivery (\$500)																	
<p>2. Article Number (Transfer from service label)</p> <p>7019 2970 0000 8239 2810</p>																	

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7019 2970 0000 8239 2810

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
Certified Mail Fee	\$ 4.40
Extra Services & Fees (check box, add fee as appropriate)	\$ 3.40
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.00
Total Postage and Fees	\$ 8.75
Sent To	Marilyn J. Mustain
Street and	42454 County Road 55
City, State	Otis, CO 80743-9609
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

WILD HARVEST
Postmark Here
JUN 2024
ARVADA CO 80004

PUBLIC NOTICE

Zuege Mine, LLC, 23715 US Highway 34, Wray, CO 80758, (970) 630-2233 has filed an application for a Construction Materials Limited Impact (110) Reclamation Permit with the Colorado Mined Land Reclamation Board under provisions with the Colorado Mined Land Reclamation Act for extraction of construction materials. The proposed mine is known as the Zuege Mine, M-2024-028, is located at or near the N½N¼SE¼, Section 33, T-5-N, R-49-W, 6th P.M., Washington County, Colorado.

The proposed date of commencement is July 2024 and the proposed date of completion is 2035. The proposed future use of the land is rangeland.

Additional information and a tentative decision date may be obtained at the Division of Reclamation, Mining & Safety, 1313 Sherman Street, Rm 215, Denver, Colorado 80203, (303) 866-3567, or at the office of the Washington County Clerk and Recorder, 150 Ash St, Akron, Colorado 80720.

Written comments to the application must be received at the office of the Division of Reclamation, Mining & Safety no later than 4:00 p.m. on the 8th day of July, 2024.

Zuege Mine, LLC
Wray, CO

Please note that comments related to noise, truck traffic, hours of operation, visual impacts, effects on property values and other social or economic concerns are issues not subject to this Office's jurisdiction. These subjects and similar ones, are typically addressed by your local governments, rather than the Division of Reclamation, Mining & Safety or the Mined Land Reclamation Board.

Published in: the
Akron News Reporter
Publication Date:
Wednesday, June 26, 2024

PROOF OF PUBLICATION
of the
AKRON NEWS-REPORTER
Akron Colorado

I, Christa Vasquez, do solemnly swear that I am the Office Manager of THE AKRON NEWS-REPORTER, that the same is a weekly newspaper printed in whole or in part, and published in the County of Washington, State of Colorado, and has a general circulation therein that said newspaper has been published continuously and unintruptedly in said County of Washington for a period of more than fifty-two consecutive weeks next prior to the first publication of the annexed legal notice or advertisement that newspaper has been admitted to the United States mails as second-class matter under the provisions of the Act of March 3, 1879, or any amendments thereof, and that said newspaper is a weekly newspaper duly qualified for publishing legal notices and advertisement within the meaning of the laws of the State of Colorado.

That the annexed legal notice or advertisement was published in the regular and entire issue of every number of said weekly newspaper for the period of One

consecutive insertion(s); and that the first publication of said notice was in the issue of said newspaper dated _____

Wednesday, June 26, 2024 A D.

and that the last publication of said notice was in the issue of

said newspaper dated Wednesday, June 26, 2024
A D

IN WITNESS WHEREOF, I have hereunto set my hand
this 26th day of A D

June, 2024

Christa Vasquez

Christa Vasquez
Office Manager