

## DRMS ePermitting Change of Contact



**COLORADO**

Division of Reclamation,  
Mining and Safety

Department of Natural Resources

### General Information

#### Submittal Date

5/15/2025

The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information.

### Administrator Information

#### Administrator First Name

Art

#### Administrator Last Name

Etter

#### Administrator Email

AEtter@wolverinefuels.com

#### Select a Permit Number \*

C1996083

#### Select Contact Type \*

Select all that apply

☒ Permittee Contact ☒ Permitting Contact ☒ Inspection Contact ☒ Additional Annual Fee  
Contact(s)

### Permittee Contact Information

#### Permittee Company Name

Bowie Resources, LLC

Name change requires succession of operator application

#### Salutation

Mr

#### First Name

Art

#### Middle Initial

#### Last Name

Etter

#### Address 1

P.O. Box 1488

#### Address 2

#### City

Paonia

#### State

CO

#### Zip Code

814280000

#### Telephone #

9709298001

Digits only, no separators

#### Extension

#### Fax #

Digits only, no separators

**Email Address**

aetter@Wolverinefuels.com

**Permitting Contact Information****Permitting Company Name**

Bowie Resources, LLC

**Salutation****First Name****Middle Initial****Last Name**

Mr

**Address 1****Address 2****City****State****Zip Code****Telephone #****Extension****Fax #**

Digits only, no separators

Digits only, no separators

**Email Address****Inspection Contact Information****Inspection Company Name**

Bowie Resources, LLC

**Salutation****First Name****Middle Initial****Last Name**

Mr

Art

Etter

**Address 1****Address 2**

P.O. Box 1488

**City****State****Zip Code**

Paonia

CO

814280000

**Telephone #****Extension****Fax #**

9709298001

Digits only, no separators

Digits only, no separators

**Email Address**

aetter@wolverinefuels.com

**Annual Fee Notice to Copy**

Additional people you would like to receive notices of upcoming annual fee/report due dates

**Remove Existing Contact?**

☐ Remove

**Salutation**

**First Name \***

Tamme

**Middle Initial**

**Last Name \***

Bishop

**Annual Fee Notice Company Name**

**Address 1**

**Address 2**

**City**

**State**

**Zip Code**

00000000

**Telephone #**

Digits only, no separators

**Extension**

**Fax #**

Digits only, no separators

**Email Address**

**Confirmation**

**Have you reviewed all the information provided on this form? \***



Yes