## STATE OF COLORADO

#### DIVISION OF RECLAMATION, MINING AND SAFETY

Department of Natural Resources

1313 Sherman St., Room 215 Denver, Colorado 80203 Phone: (303) 866-3567 FAX: (303) 832-8106

March 1, 2013

Matt R. Cavnahan Oldcastle SW Group, Inc dba Four Corners Materials P.O. Box 1969 Bayfield, CO 81122-1969



John W. Hickenlooper Governor

Mike King Executive Director

Loretta E. Pineda

#### Triangle One Pit, Permit M-1980-228, Annual Fee Invoice and Report Request

# PLEASE READ CAREFULLY – ACTION REQUIRED Please attach your COMPLETED written Annual Report and Annual Report Map to this form

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.

The Annual Report and Fee requirement will be considered submitted when we have received the following components:

- 1. APPROPRIATE ANNUAL FEE
- 2. COMPLETED ANNUAL REPORT
- 3. ASSOCIATED MAP as required by rule

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 \$791.00 fee is due for the following:

Permit: M-1980-228 Operation Name: Triangle One Pit Anniversary Date: April 27, 2013

Total Fee Due: \$791.00 (Due on or before your Anniversary Date)

Return the enclosed <u>Annual Report FORM</u>, a <u>MAP</u>, and a <u>CHECK</u> or <u>MONEY ORDER</u> made payable to: Division of Reclamation, Mining and Safety, 1313 Sherman St., Room 215, Denver, CO 80203. If your records indicate these documents and fees have already been submitted, please notify the Division.

If you have additional comments and/or information that should be provided to the Division, please provide it below or attach it to this form along with your written report and map. Annual Report instructions are enclosed. If you have any questions, please feel free to contact Jim Dupler (303)866-3567 x8119 or Christine Brookshire (303)866-3567 x8132. Thank you for your cooperation in this matter.

IF THE ANNUAL FEE SUBMITTALS ARE NOT RECEIVED ON OR BEFORE YOUR ANNIVERSARY DATE, THE ENFORCEMENT PROCESS WILL AUTOMATICALLY BE INIATIED. ENFORCEMENT ACTIONS MAY RESULT IN CIVIL PENALTIES AND/OR REVOCATION OF YOUR PERMIT.

### 112c Annual Report

Permittee Name:	Oldcastle SW Group, Inc	Permit Number:	M-1980-228
	dba Four Corners Materials		
Operation Name:	Triangle One Pit	County:	Archuleta
Annual Fee Due:	\$791.00	Anniversary Date:	April 27, 2013
Permit Acreage:	18.00	Current Bond Amt:	\$19,504.00

According to C.R.S. 34-32.5-116 or 34-32-116, each year, on the anniversary date of the permit, an operator shall submit the Annual Fee, an Annual Report and Map showing the extent of current disturbances to affected land, required monitoring information, reclamation accomplished to date and during the preceding year, any new disturbance that is anticipated to occur during the upcoming year, any reclamation that will be performed during the upcoming year, the dates for the beginning of active operations, and the date active operations ceased for the year.

Information contained in this report 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.

	,			P	-FJ		r r						
1.	. Is the site identification sign posted in accordance with Rule 3.1.12(1).									YES	NO		
2.	2. Is the affected area boundary clearly marked in accordance with Rule 3.1.12(2).									YES	NO		
3.	3. Is the mine site in final reclamation (all material extraction and stockpile removal is complete) If "YES," please note time limits related to completion of reclamation, Rule 3.1.3.							lete)?	YES	NO			
4.	What was the date of last excavation, processing or hauling activity at the mine?												
5.	5. Does the mine operate more than 180 days per year? If "NO", please review Rule 1.13 to assure that your mine is in compliance.									YES	NO		
6.	6. Has this mine been granted: a) approval of TEMPORARY CESSATION Status? b) approval for INTERMITTENT OPERATION?									YES YES	NO NO		
7.	Number of acre	s currently	affected	(mining +	incor	nple	ete and or unrele	ased	reclama	ation).			
8.	Number of acre	s that were	e newly af	fected du	ring th	ie cu	ırrent report yea	r.					
9.	Number of acre	s that were	e reclaime	d during t	he cui	rent	t report year.						
10.	Estimated new a	acreage to	be affecte	d in the n	ext re	port	year.						
	Estimated acres <b>Total acres</b> in v							tiviti	es bega	ın:			
	Total acres		Total acr				Total acres			Total a	cres		
	backfilled: seeded w/ approved mix:						w/topsoil			mulche			
				*			ed mulch:						
	Total acres		Total acr				Topsoil				application	n	
	graded:					replacement rate (tons/ac							
	apvd fertilizer:			depth (in.):		(12							
f	Seed	<u> </u>	•	Fertilize	r			]	Mulch				
	application			applicati					applicat	tion			
	method: method: method:												

	Is weed control being conducted in accordance with an approved Weed Control Plan? If "YES", indicate the weed species, control area, control type, application rate and treatr					
14. Is adequate topsoil If "NO", please exp	YES	NO	N/A			
15. Is the reserved tops If "NO" please exp	YES	NO	N/A			
16. If mining has expo Engineer (Well Per	lan and Offi YES	ice of th NO	ne State N/A			
17. Are all hazardous r	YES	NO	N/A			
18. Is your financial wa	YES	NO	N/A			
19. Is your basis for leg	YES	NO				
20. Does your permit r If "Yes", please att	YES	NO	N/A			
boundary and locat	e, attach a map to this report that accion of the acreages specified in itente the following permittee contact information:	ns 7- 12 and 14. UPDATED MAP	ATTACH	ED: _		
Permittee Contact:	Matt R. Cavnahan					
Permittee Company:	Oldcastle SW Group, Inc dba Four Corners Materials					
Address:	P.O. Box 1969  Bayfield, CO 81122-1969					
Phone Number:	(970) 247-2172					
Fax Number:	(970) 259-3631					
Email Address:	CF.PR.email					
	by state that the information provide ordance with the Division approved		e, and that	site ope	erations are	
Signature of <u>Permitte</u>	e, Corporate Officer, Owner, or I	<b>Documented Designee</b>	Date			