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January 30, 2013

Kate A. Pickford Environmental Protection Specialist Division of Reclamation, Mining and Safety 11313Sherman St. Room 215 Denver, Colorado 80203 Durango Field Office Division of Reclamation, Mining and Safety

RE: Letter Dated January 17, 2013 Inca Mine, Permit No. M-1986-076

Dear Kate:

Our Mining operation at this site during the summer of 2012 was to determine what material contained gold and silver in the rock at the site. The last extraction was in August of 2012 of less than 1 cubic yard. As you know the summer of 2012 was the first time under our ownership that we had an opportunity to mine. Any operations prior to that are unknown to us. Therefore it was difficult to address the question in the annual report. In the meeting I had with you in your office I stated that we were preparing a mining plan for the summer of 2013.

In the last few weeks I have transferred my interest to Mike Clements of California. I have attached the Quitclaim Deed with my signature for your records. In addition, I am sending him this letter and the documentation of your findings and required actions in the Inspection Report, along with information from the Treasurer Office. I am also, forwarding the "Application for Transfer of Ownership" to Mr. Clements so he can submit that for to your office for processing.

Thank you for the experience and assistance in the mining development process with the State of Colorado.

Sincerel

Paul F. Martin P.E. CFO

125 West Main Suite "A" Farmington New Mexico 87401 Designing for Your Future

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 23rd day of January, 2013

By first party, Grantor, Paul F. Martin

Whose address is: 125 West Main Farmington NM 87401

To second party, Grantee, Mike Clements

Whose address is 3035 Stockett Way San Diego CA 92117

Witnesses', That the said first party, for good consideration and for the sum of Ten Dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto second party forever, all the rights title, interest and claim which the said first party has in and to fallowing described parcel of land, and improvements and appurtenances therto in the County of La Plata, Sate of Colorado to wit:

Parcel #560121000060000P

To wit:

Mill and equipment at the Inca Mine aka D.M.G.C. as recorded in La Plata County

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Print Name of Witness

Signature of First Party

PAULFMA

Print Name of First Party

Signature of Witness

Signature of Second Party

Print Name of Second Party

Print Name of Witness Keith Williams

Appeared before me, Paul F. Martin personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed same in his authorized capacity.

Notary:

My Commission Expires April 18, 2014

OFFICIAL SEAL **Rishard D. Hallock** NOTANY PUBLIC STATE OF NEW ML My Commission Expires: 4

Appeared before me, Paul F. Martin personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed same in his authorized capacity.

Seal:

Notary:_____

My Commission Expires: Seal:

BILL OF SALE

This bill of sale for transfer of mineral lease and operating permits for Inca Mine in LaPlata Canyon. The mine site is permitted thru the Colorado Division of Minerals and Geology as Mine ID M86-076.

This bill of sale includes the following:

Mine operating permit from Colorado Division of Minerals and Geology identified as M86-076 as initially filed by Northern Minerals with any following amendments by DCMG and Paul F. Martin.

Storm water permit thru Colorado Department of Health.

Water use permit.

La Plata County Class II use permit.

This Sale will be completed upon signature of Paul F. Martin.

Paul F. Martin

In the State of New Mexico San Juan County, signed before me this 24, day if January, 2013 by Paul F. Martin Known to me

Seal:

Notary:

My Commission Expires: Aller 18. 2014

OFFICIAL SEAL Richard D. Hallock NOTATY PUBLIC STATE CFINEW MEXICO Hy Commission Expires: 4/19/2014

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



John W. Hickenlooper Governor

Mike King Executive Director

Loretta E. Piñeda Director

January 17, 2013

Mr. Paul Martin DGMC 125 W Main St Farmington, NM 87401

Re: Incas Mine, Permit No. M-1986-076, Annual Report and Inspection Minor Infraction, Incomplete ACTION REQUIRED

Dear Mr. Martin:

The Division of Reclamation, Mining, and Safety (Division) cited a problem on an inspection report of the Incas Mines on November 8, 2012; indicating that a request to put the site into Temporary Cessation or a proposal of how mining activities will be recommenced at the site in the upcoming mining season must be submitted to the Division by December 31, 2012. Neither of these was received by the Division. The Division received your annual fee and report for the above site on January 10, 2013. The question, "What was the date of last excavation, processing or hauling activity at the mine," was not adequately addressed in the report. The comment written on the report states, "Material was moved to determine Pay Streak in existing excavated area." This does not reflect when the last date of these activities occurred at the site and is not applicable to the type of mine contained within the permit area, as Pay Streaks are related to gold panning. Please respond to this question contained on the annual report, and complete the corrective actions related to the inspection report by January 31, 2013. Failure to comply with these issues may result in enforcement action.

If you have any questions, please contact me at (970) 259-5861.

Sincerely,

Kate A. Pickford Environmental Protection Specialist

| STATE OF CC | DLORADO | For Agency Use Only |
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| Dedicated to protecting and improving the health and environment of the people of Colorado COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT Water Quality Control Division 4300 Cherry Creek Drive South B2 Permits Denver, Colorado 80246-1530 | Colorado Department of Public Health and Environment | Date Received/ Complete Paid Effective Date/ |
| APPLICATION FOR TRANSFER OF OWNERSHIP FOR ALL PERM PHOTO COPIES, FAXED COPIES, PDF COPIES OR EMAILS WIL TO BE COMPLETED BY NEW PERMITTEE: Permit or Certification I hereby apply for a transfer of ownership of this Colorado Discharge Per which was issued to (permittee listed in Part 2, page 2) | L NOT BE ACCEPTED. n or Authorization Numbe mit, Certification, or Auth | r orization listed above, |
| I have reviewed the terms and conditions of this permit and accept response Management Plan where applicable). If all information is correct, form is complete, and transfer approved, I rec I have ensured that all of the following requirements/have been met: | onsibilities, coverage and | liability (including Stormwater |
| There ensured that an of the following requirements have been met. | | |

- ۲ ۱.
- BOTH parties have completed and signed this form pages 1 and 2 ORIGINAL Form mailed to Division 80 Days Phor to the Transfer Effective Date (which may be the date 2. property exchanges hands.
 - Copies, PDF versions, and Faxes will NOT be accepted and will delay the issuance of the transfer. All existing invoices paid and verified by the Division. Payment MUST be received prior to transfer issuance
- □ 3.

PROJECT OR FACILITY INFORMATION

| Project or Facility Name: CACAS MENE |
|--|
| Facility Address (location) SW 1/4, NW 1/4 OF SEL ZZ, TEGA RILW |
| City: MAYDAY State: CG Zip: 31326 County: LA RATA |
| NEW PERMITTEE INFORMATION (fill out all appropriate contacts) |
| Company name: DEADWOOD GULCH MENERS QUPANY SAKURA ELERASERENG |
| Mailing Address: 125 WEST MAIN STREET |
| City: FARMENSTON State: NM Zip: 97401 Telephone No: 505.320-3336 |
| Legal Contact: will receive all future permit correspondences and is egally responsible for compliance with the permit |
| Name: TAUE F. MARTEN email address TO RABLOG SHAKURAEAG, COM |
| Title: OWNER |
| Local Contact: will be contacted for questions relating to the facility and the discharge authorized by the permit for the facility. |
| Name: TAUL F. MARPEL email address TOPATSLOP, SqKURMENG COM |
| Title: OWNER |
| Authorized Agent(s) - may sign reports (such as DMR's or Annual Reports) required by the permit. |
| Authorized Agent PAUL F. MARTEL email address TOPABLOD SAKURA ELSE, COM |
| Title: OWNER Telephone No: 535-320-3886 |
| Authorized Position OwnER Telephone No: |
| Currently held by: email address: |

Revised 2-2010

APPLICATION FOR TRANSFER OF OWNERSHIP FOR ALL PERMITS, CERTIFICATIONS, AND AUTHORIZATIONS

| Billing Contact Information - if billing address is diffe | rent than legal contact |
|---|---|
| Name: PAUL F. MARTEL | email address TOPATELO D. SAKURAENG, COM |
| Company Name BADWOON GULLY MENZIC | ComPANY SAKURA ENGENEERENG |
| Mailing Address: 125 WEST MAST STRE | BT |
| City: FIARMENGTON State: NM Z | ip: <u>8740/</u> Telephone No: 535-320-3886 |
| | |

REQUIRED SIGNATURE:

Signature of Applicant: The applicant must be either the owner and/or operator of the construction site. Refer to Part B of the instructions for additional information. The application <u>must be signed</u> by the applicant to be considered complete. <u>In all cases</u>, it shall be signed as follows:

- a) In the case of corporations, by a principal executive officer of at least the level of vice-president or his or her duly authorized representative, if such representative is responsible for the overall operation of the facility from which the discharge described in the application originates.
- b) In the case of a partnership, by a general partner.
- c) In the case of a sole proprietorship, by the proprietor.
- d) In the case of a municipal, state, or other public facility, by either a principal executive officer, ranking elected official, or other duly authorized employee if such representative is responsible for the overall operation of the facility from which the discharge described in the form originates.

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| Signature(Legally Responsible Party) | Date _//- 3 - // | |
|--------------------------------------|------------------|---|
| Name (printed) PAU/ E MAStin | Title Ownor | 1 |

PART 2 - TO BE COMPLETED BY PREVIOUS PERMITTEE

As previous owner, I hereby agree to the transfer of the above-referenced permit and all responsibilities thereof.

| Company Name: | | | | |
|--|--------|------|---------------|--|
| Mailing Address: | | | | |
| City: | State: | Zip: | Telephone No: | |
| ignature (Legally Responsible Party)Date | | Date | | |
| Name (printed) | | | Title | |
| Email address | | | | |

Revised 2-2010