CA MINE ID# 91-

MINE NAME

SMARA Lead Agency

☐ City ☐ County ☐ Other

1. Company Operating
   Street Address/P.O. Box No.
   Telephone
   ( ) Ext
   Site Contact Person
   City/State/ZIP Code/County
   Email Address

2. Designated Agent's Name (individual must reside in CA)
   Mailing Address
   Email Address
   City
   ZIP Code
   Telephone
   ( ) Ext

SOME ITEMS BELOW ARE PRECEDED BY A BOX LABELED "N.C." THIS BOX MAY BE CHECKED IF THERE ARE NO CHANGES IN THE INFORMATION FROM THE LAST REPORTING YEAR.
(NOTE: IF THIS IS THE FIRST TIME YOU HAVE FILED A REPORT, ALL SECTIONS MUST BE COMPLETED.)

☐ N.C. 3. Owner of Mining Operation
   Mailing Address
   Email Address
   City
   State/ZIP Code
   Country (if other than U.S.A.)

Was this operation purchased by you during reporting year? ☐ Yes: Date of purchase ______________. ☐ No. ☐ Yes: Date of sale ______________. ☐ No.

☐ N.C. 4. Landowner
   Mailing Address
   Telephone
   ( ) Ext
   City/State/ZIP Code
   Country (if other than U.S.A.)

   Assessor's Parcel No.(s)

5. Status of Mining Activities DURING THE REPORTING YEAR (See form instructions for definitions) [CHECK 1 ONLY]
   ☐ Newly Permitted; not yet in operation. Date Permitted: ______________
   ☐ Active.
   ☐ Idle. Complete the following:
     Date operation became idle: ______________
     ☐ Copy of Approved Interim Management Plan is attached.
     ☐ Interim Management Plan is pending Lead Agency. Submitted on ______________ (date).
     ☐ Closed with no intent to resume. Date mining ceased: ______________
     ☐ Closed—reclamation certified complete by Lead Agency. ______________ (date).

6. Status of Reclamation Activities DURING THE REPORTING YEAR [CHECK 1 ONLY]
   ☐ Reclamation not started.
   ☐ Reclamation in progress. (Attach updated reclamation plan map indicating progress.)
   ☐ Reclamation certified complete by Lead Agency. [ATTACH CERTIFICATION]
     Reclamation certified complete on ______________ (date).
     Financial Assurances released on ______________ (date).
7. Was an inspection completed by Lead Agency during the reporting year?
   □ Yes: (Attach the copy of Surface Mining Inspection Report (MRRC-1)) Date of Inspection: ____________
   □ No: Explain on page 4.

8. Reclamation Plan Status
   □ Reclamation Plan initially approved on ____________ (date).
   □ Date of currently approved Reclamation Plan if different from above: ____________.
   □ Amendment(s) to Reclamation Plan approved during the reporting year on ____________ (date).
   Number of acres subject to Reclamation Plan: ____________.
   □ No Reclamation Plan. Please explain by checking one of the two boxes below, as applies. Otherwise, explain on page 4.
   □ Approval Pending. Submitted to Lead Agency on ____________ (date).
   □ Lead Agency action on Initial or Amended Reclamation Plan on appeal with SMGB. Appeal submitted on ____________ (date). ATTACH COPY WITH CONDITIONS AND PROOF OF APPROVAL

9(a). Was there a new or updated Financial Assurance Cost Estimate approved by Lead Agency during the reporting year?
   □ Yes: Date of Approval: ____________
   □ No: Approval of Financial Assurance Cost Estimate pending with Lead Agency. Submitted on ____________ (date).
   □ No: Explain on page 4.

9(b). Was a new or updated Financial Assurance Mechanism(s) approved by Lead Agency and Department of Conservation during the reporting year?
   □ Yes ATTACH COPY AND PROOF OF APPROVAL
   □ No: Approval Pending Financial Assurance Mechanism(s) submitted to Lead Agency on ____________ (date).
   □ No: Lead Agency action on Financial Assurance Mechanism(s) is on appeal with SMGB. Appeal submitted on ____________ (date).
   □ No: Other. Explain on page 4.

9(c). Complete information below for Financial Assurance Mechanism(s):

<table>
<thead>
<tr>
<th>Type (Bond, CD, etc.)</th>
<th>Amount</th>
<th>Date Posted</th>
<th>Date of Annual Review by Lead Agency</th>
<th>Expiration Date or Renewal Date (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IF APPLICABLE, INFORMATION REQUIRED IN ITEMS 10 THROUGH 13 MUST BE PROVIDED FOR EACH SEPARATE PLOT

□ N.C.

10. ATTACH NAMED U.S. GEOLOGICAL SURVEY MAP—7.5’ OR 15’ QUAD—SHOWING BOUNDARIES OF MINING OPERATION IF NOT PREVIOUSLY PROVIDED.

<table>
<thead>
<tr>
<th>Latitude (Decimal Degree)</th>
<th>Longitude (Decimal Degree)</th>
<th>Section—Township—Range—Base Meridian</th>
<th>Quad Name</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

□ N.C.

11. Type Code(s) of Mining Operation ________________ (if not previously provided) SEE EXHIBIT A FOR TYPE CODES

THIS REPORT MUST BE SENT TO: State (original) Lead Agency (copy)
12. DISTURBED ACREAGE COMPLETE ENTIRE SECTION

1. ____________ Approximate disturbed acreage on January 1, 2014. (This figure should match the figure from item 12, line 5 on your 2013 annual report. If it does not match, explain on page 4.)

2. ____________ Approximate acreage disturbed during 2014.

3. ____________ (ADD LINE 1 TO LINE 2)

4. ____________ Approximate disturbed acreage reclaimed during 2014.

5. ____________ (SUBTRACT LINE 4 FROM LINE 3) Approximate disturbed acreage remaining on December 31, 2014.

13. CHECK ALL THAT APPLY

☐ Acres Permitted: ____________ Permit #: ____________

☐ Acres Vested (acres disturbed prior to January 1, 1976): ____________

☐ Acres on Federal Lands: ____________ Permit/ID #: ____________

14. $__________ Current total assessed value of mining operation as established by County Assessor's Office.

15. COMMODITIES AND PRODUCTION* SEE EXHIBIT B

*PRODUCTION INFORMATION IS PROPRIETARY AND WILL BE KEPT CONFIDENTIAL PURSUANT TO PUBLIC RESOURCE CODE SECTION 2307(g)

List All Commodities (from Exhibit B)

<table>
<thead>
<tr>
<th>Category Number (from Exhibit B)</th>
<th>Check here if No Production for a Commodity</th>
<th>Amount of Production</th>
<th>Short Tons</th>
<th>Troy Ounces</th>
<th>Pounds</th>
</tr>
</thead>
</table>

PRODUCED MINERALS

A. PRIMARY COMMODITY

B. ALL OTHER COMMODITIES
   (include gold and silver produced if not primary commodity)

16. FEE SCHEDULE SEE EXHIBIT C

USING BOTH YOUR CATEGORY NUMBER AND TOTAL PRODUCTION FROM 15(A) ABOVE, REFER TO EXHIBIT C TO FIND YOUR CORRESPONDING PRODUCTION RANGE. ENTER YOUR CORRESPONDING PRODUCTION CODE IN 16(A) AND FEE IN 16(B) BELOW.

A. PRODUCTION CODE ____________________________

B. REPORTING FEE ____________________________ $________

GOLD AND SILVER FEE:

IF GOLD OR SILVER PRODUCTION IS REPORTED IN SECTION 15(A) OR 15(B), CONTINUE ON TO COMPLETE 16(C) AND (D), BELOW.

C. GOLD FEE ( _______ Ounce(s) of gold) X ($5.00 per ounce) = $________

D. SILVER FEE ( _______ Ounce(s) of silver) X ($0.10 per ounce) = $________

TOTAL FEES DUE SUM OF 16(B), (C) AND (D) .......... = $________ (Attach one check for total)

THIS REPORT MUST BE SENT TO: State (original) Lead Agency (copy)
17. SUBMITTED BY:

Your Name (Please print) ___________________________ Relationship to Operation: ___________________________

Your Mailing Address _____________________________________________________________

City/State/ZIP Code ___________________________ Your Telephone Number: (____) _______ Ext _______

I certify that the information submitted herein is complete and accurate (failure to submit complete and accurate requisite information may result in an administrative penalty as provided for in Public Resources Code Section 2774.1).

SIGNATURE OF SUBMITTER ___________________________ DATE ___________________________

TITLE OF SUBMITTER ___________________________ EMAIL ADDRESS ___________________________

Please mail annual report, reporting fee, gold and silver fee and ALL required attachments to:

ATTN: Reporting and Records Unit
Office of Mine Reclamation
Department of Conservation
801 K Street, MS 09-06
Sacramento, CA 95814-3529

Please use the space provided to complete any questions that required further explanation. Additional sheets may be attached if more space is needed.

THIS REPORT WAS SENT TO: □ State (original) □ Lead Agency (copy)