State of California
DEPARTMENT OF CONSERVATION

MINING OPERATION ANNUAL REPORT FOR CALENDAR YEAR 20__

MRRC-2 Page 1

CA MINE ID# 91-

MINE NAME

SMARA Lead Agency

☐ City ☐ County ☐ Other

1. Company Operating	Mailing Address/P.O. Box No.	Telephone Ext.
Site Contact Person	City/State/ZIP Code	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 ONLY 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		Telephone Ext.
	Mailing Address	Email Address	
	City	State/ZIP Code	Country (If other than U.S.A.)
	Was this operation purchased by you during the Calendar Year? ☐ Yes. Date of purchase: _____ ☐ No.	Was this operation sold by you during the Calendar Year? ☐ Yes. Date of sale: _____ ☐ No.	

☐ N.C.	4. Landowner	Assessor's Parcel No.(s)
	Mailing Address	Telephone Ext.
	City/State/ZIP Code	Country (If other than U.S.A.)

5. Status of Mining Operation DURING THE CALENDAR YEAR (See form instructions for definitions) **CHECK 1 ONLY**

☐ Newly permitted; date permitted: _____

☐ Active.

☐ Idle; date operation became idle: _____

If idle, complete the following:

☐ Copy of approved Interim Management Plan is attached.

☐ Interim Management Plan is pending with the Lead Agency; date submitted: _____

☐ Closed with no intent to resume; date mining ceased: _____

☐ Closed - reclamation certified complete by the Lead Agency; date of certification: _____

6. Status of Reclamation Activities DURING THE CALENDAR YEAR **CHECK 1 ONLY**

☐ Reclamation not started.

☐ Reclamation in progress.

☐ Reclamation certified complete by the Lead Agency.

Date reclamation was certified complete: _____

Date financial assurances were released: _____

THIS REPORT MUST BE SENT TO: **Department of Conservation** (original) **Lead Agency** (copy)

CA MINE ID# 91-

7. Inspections

(a) Date of the most recent inspection: _____

(b) Did you receive a copy of the most recent inspection report form (as noted in 7(a) above)? Yes No;
If Yes, attach a copy as required by Public Resources Code 2207(a)(8). If No, explain on page 4.

(c) Requested date for the next Annual Inspection by the Lead Agency (must be within 12 months of the most recently conducted Annual Inspection):

Date Requested: _____

8(a). Does this site have an approved reclamation plan?

- IF THIS IS THE FIRST ANNUAL REPORT FILED FOR THIS OPERATION, ATTACH APPROVED RECLAMATION PLAN.

Number of acres subject to the reclamation plan: _____

Yes: Approval date of the reclamation plan: _____

No: Please explain by checking one of the two boxes below, as applies. Otherwise, explain on page 4.

Approval pending. Date submitted to the Lead Agency: _____

Lead Agency action on initial or amended reclamation plan on appeal with the State Mining and Geology Board.
Date appeal submitted: _____

8(b). Were there any amendments to the reclamation plan during the Calendar Year?

- IF ANY AMENDMENTS TO THE RECLAMATION PLAN WERE APPROVED DURING THE CALENDAR YEAR, ATTACH A COPY.

Yes: Amendment(s) to the reclamation plan were approved during the Calendar Year. Date approved: _____

No.

9(a). Was a financial assurance cost estimate approved by the Lead Agency during the Calendar Year?

Yes. Date of approval: _____

No. Approval of financial assurance cost estimate pending with the Lead Agency. Date submitted: _____

No. Explain on page 4.

9(b). Was a new or updated financial assurance mechanism(s) approved by the Lead Agency and the Department of Conservation during the Calendar Year?

Yes. Date of approval: _____

No. Approval pending financial assurance mechanism(s). Date submitted to the Lead Agency: _____

No. Lead Agency action on financial assurance mechanism(s) is on appeal with the State Mining and Geology Board.
Date appeal submitted: _____

No. Other, explain on page 4.

9(c). Complete information below for financial assurance mechanism(s):

Type (Bond, CD, etc.)	Amount	Date Posted	Date of Annual Review by the Lead Agency	Expiration Date or Renewal Date (if applicable)

N.C.

10. ATTACH NAMED U.S. GEOLOGICAL SURVEY MAP—7.5' OR 15' QUAD—SHOWING BOUNDARIES OF MINING OPERATION.

Latitude (Decimal Degree)	Longitude (Decimal Degree)	Section—Township—Range—Base Meridian	Quad Name	County

THIS REPORT MUST BE SENT TO: **Department of Conservation** (original) **Lead Agency** (copy)

State of California
DEPARTMENT OF CONSERVATION
MINING OPERATION ANNUAL REPORT
FOR CALENDAR YEAR 20
MRRC-2 Page 3

CA MINE ID# 91-

☐ N.C.

11. Code type(s) of mining operation: _____

SEE EXHIBIT A FOR CODE TYPE(S)

12. DISTURBED ACREAGE **COMPLETE ENTIRE SECTION**

1. _____ Approximate disturbed acreage on the **Previous Calendar Year**. (This figure should match the figure from item 12, line 5 on your previous Annual Report. If it does not match, explain on page 4.)
2. _____ Approximate acreage disturbed during the **Calendar Year**.
3. 0.00 **(ADD LINE 1 TO LINE 2)**
4. _____ Approximate disturbed acreage **reclaimed** during the **Calendar Year**.
5. 0.00 **(SUBTRACT LINE 4 FROM LINE 3)** Approximate **disturbed** acreage remaining on December 31 of the **Calendar Year**.

☐ N.C.

13. **CHECK ALL THAT APPLY**

☐ Acres permitted: _____

☐ Acres vested (acres disturbed prior to January 1, 1976): _____

☐ Acres on federal lands: _____

☐ N.C.

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 2207(g)

List All Commodities (from Exhibit B) **PRODUCED MINERALS**	Category Number (from Exhibit B)	TOTAL PRODUCTION Amount of Production	CHECK ONE Short Tons	Troy Ounces	Pounds
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 ..... **$** _____

(fees calculation continued on next page)

THIS REPORT MUST BE SENT TO: **Department of Conservation** (original) **Lead Agency** (copy)

CA MINE ID# 91-_____

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 ($5.00 per ounce) =** **$** 0.00

D. SILVER FEE (_____ **Ounce(s) of silver) X ($0.10 per ounce) =** **$** 0.00

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

---

17. **SUBMITTED BY**

Name (Please print): _____

Mailing Address: _____

City/State/ZIP Code: _____ Telephone Number: _____

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 payment, gold and silver fee payment, and required attachments to:

ATTN: Reporting Unit
Department of Conservation
Division of Mine Reclamation
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.