tate of California IEPARTMENT OF CONSERVATION 017 MINING OPERATION ANNUAL REPORT IRRC-2 Page 1				(CA MINE ID#	<u>9</u> 1	1-	
			MINE NAME					
			S	MARA	Lead Agency		☐ City ☐ County	Other
1. Com	npany Operating	Mailing A	.ddress/P.O.	Box No.		Te	elephone	
Site Co	ontact Person	City/State	e/ZIP Code			Eı	mail Address	Ext.
2. Des	Ignated Agent's Name (individual must reside	in CA)	Mailing Ad	dress				
			Email Add	ress				
City			Zip Code				Telephone	
CHAN	EITEMS BELOW ARE PRECEDED BY A IGES IN THE INFORMATION FROM TH E: IF THIS IS THE FIRST TIME YOU HA	E LAST I	REPORTIN	G YEAR				ARE NO
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	g the 2017	reporting ye	ar?	Was this operation	sold by	you during the 2017 rep	orting year?
	Yes. Date of purchase:		🗆	No.	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. Stat	us of Mining Operation DURING THE 2017 RI	EPORTING	G YEAR (Se	e form ins	tructions for definition	ns) CH	ECK 1 ONLY	
	Newly permitted; date permitted:							
	Active.							
	ldle; date operation became idle:							
	If idle, complete the following:							
	Copy of approved Interim Managem	ent Plan is	s attached.					
	☐ Interim Management Plan is pendin	g with the	Lead Agency	y; date sub	omitted:			
	Closed with no intent to resume; date m	nining ceas	sed:					
	Closed - reclamation certified complete	by the Lea	ad Agency; d	ate of cert	ification:			
6. Stat	us of Reclamation Activities DURING THE 20	17 REPOF	RTING YEAR	CHEC	K 1 ONLY			
	Reclamation not started.							
	Reclamation in progress.							
	Reclamation certified complete by the L	ead Agen	су.					
	Date reclamation was certified complete	e:						

Date financial assurances were released: _

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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 Agence	y (must be within 12 months	of the most recently cond	ducted Annual Inspection):				
Date Requested:							
8(a). Does this site have an approved reclamation plan?							
IF THIS IS THE FIRST ANNUAL REPORT FILED FOR THIS OPE	RATION, ATTACH APPROV	ED RECLAMATION PLA	N.				
Number of acres subject to the reclamation plan:	<u></u>						
Yes: Approval date of the reclamation plan:	<u> </u>						
No: Please explain by checking one of the two boxes be	low, as applies. Otherwise,	explain on page 4.					
Approval pending. Date submitted to the Lead Age							
Lead Agency action on initial or amended reclamation Date appeal submitted:	on plan on appeal with the S	tate Mining and Geology	Board.				
8(b). Were there any amendments to the reclamation plan during the 2							
 IF ANY AMENDMENTS TO THE RECLAMATION PLAN WERE A		•					
No.	ed during the reporting 2017	year. Date approved					
9(a). Was a financial assurance cost estimate approved by the Lead Ag	gency during the 2017 report	ing year?					
Yes. Date of approval: No. Approval of financial assurance cost estimate pendir	og with the Lead Agency Da	ata submittad:					
	ig with the Lead Agency. Da	ate submitted.					
☐ No. Explain on page 4.							
9(b). Was a new or updated financial assurance mechanism(s) approve reporting year?	ed by the Lead Agency and t	he Department of Conser	vation during the 2017				
Yes. Date of approval:							
	. Date submitted to the Lead	d Agency:	_				
 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.							
O(a) Consolida information below for the coint account of the coint							
9(c). Complete information below for financial assurance mechanism(s): Type (Bond, CD, etc.) Amount Date Posted Date of Annual Review Expiration Date or Banker Date (financial)							
by the Lead Agency Renewal Date (if applicable)							
LI 10. ATTACH NAMED U.S. GEOLOGICAL SURVEY MAP—7.5' OR 15' QUAD—SHOWING BOUNDARIES OF MINING OPERATION. N.C.							
Latitude (Decimal Degree) Longitude (Decimal Degree) Section—Township—Range—Base Meridian Quad Name County							
	·	-					
	<u> </u>						

THIS REPORT MUST BE SENT TO:

DLFA	KINLINIC	CONSERVATI	ON	
2017	MINING	OPERATION	ANNUAL	REPORT

2017 MINING OPERATION)
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	11. Code type(s) of mining operation:	_		SEE EXHIBIT	A FOR COL	DE TYPE(S)
N.C.						
40. 0107						
12. DIS1	COMPLETE ENTIRE SECTION					
1	Approximate disturbed acreage on January 1, 2 your 2016 Annual Report. If it does not match,			om item 12, li	ne 5 on	
	Approximate acreage disturbed during 2017.	onpiam on page	.,			
3	(ADD LINE 1 TO LINE 2)					
4	Approximate disturbed acreage reclaimed duri	ng 2017.				
5	(SUBTRACT LINE 4 FROM LINE 3) Approxima	ate disturbed acre	age remaining on Decem	ber 31, 2017.		
	13. CHECK ALL THAT APPLY					
N.C.						
	Acres permitted:					
	Acres vested (acres disturbed prior to January 1, 197	6):	_			
	Acres on federal lands:					
N.C.	14. Current total assessed value of mining operation as estab	dished by County	Assassor's Office: \$			
	14. Outlette total assessed value of mining operation as estab	marica by County	Λοσοσσοί σ Omec. ψ			
15 COM	MODITIES AND PRODUCTION* SEE EXHIBIT B		*PRODUCTION INF	OPMATIONIS	DDODDIETA	DV AND
13. CON	INIODITIES AND PRODUCTION		WILL BE KEPT PUBLIC RESO	CONFIDENTIA	L PURSUAN	T TO
				RODUCTION		137
	List All Commodities (from Exhibit B)	Category			CHECK ON	IF
	,	Number (from	Amount of	Short	Troy	<u></u>
PRO	DUCED MINERALS	Exhibit B)	Production	Tons	Ounces	Pounds
A. <u>Pl</u>	RIMARY COMMODITY					
	II OTHER COMMODITIES					
	LL OTHER COMMODITIES clude gold and silver produced if not primary commodity)					
16. FEE	SCHEDULE SEE EXHIBIT C					
	BOTH YOUR CATEGORY NUMBER AND TOTAL PRODUCT SPONDING PRODUCTION RANGE. ENTER YOUR CORRE					DW.
	RODUCTION CODE		()		. ,	
	EPORTING FEE					
						
(fees ca	alculation continued on next page)					

Department of Conservation (original)

Lead Agency (copy)

State of California
DEPARTMENT OF CONSERVATION

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GOLD	VNID	CII	VED	
GOLD	AIND	JIL	. V E N	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 p	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)
17. SUBMITTED BY Name (Please print):	
Mailing Address:	
City/State/ZIP Code:	
	te (failure to submit complete and accurate requisite information may result in an
SIGNATURE OF SUBMITTER	DATE
TITLE OF SUBMITTER	EMAIL ADDRESS
Please mail annual report, reporting fee payment, gold and silve	er fee payment, and required attachments to:
Division of M 801 K Street, Sacramento,	of Conservation line Reclamation MS 09-06 CA 95814-3529 estions that required further explanation. Additional sheets

CA MINE ID#

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