LR-7 (Rev. 10/16)

Kansas
Department of Agriculture
Division of Conservation

Mined Land Reclamation Program

CONCLUSION OF MINING OPERATIONS

(Separate requests must be made for each mine site)

This form is to notify the Division of Conservation that all mining operations have ceased and reclamation procedures are ready to begin. The company/county signature below certifies and acknowledges the reclamation requirements required by the *Surface Mining Land Conservation and Reclamation* Act and all required reclamation work as it applies to this site in accordance with the requirements of K.S.A. 49-611 through 614, the Kansas Administrative Rules and Regulations (K.A.R. 11-8-7) and the Reclamation Plan on file.

☐ **Please check here if you are a County**

Company/County Name _____ **License Number** _____

Street Address 1 _____ **Telephone** _____

Street Address 2 _____

City _____ **State** _____ **Zip** _____ **Fax** _____

SITE INFORMATION

Site No.	Site Name	County	Legal Description					East/ West	Materials Produced
			Q		S	T	R		

Date site was closed _____ **abandoned** _____

Beginning date of Reclamation _____

Expected date grading completed _____

(K.A.R. 11-8-7 requires grading to allowable slopes to be completed within six months from the date of this report.)

Expected date of seeding _____

(K.A.R. 11-8-7 requires seeding to be completed within one year of completion of earthwork.)

Seeding to be completed by: (check one)

☐ Landowner ☐ Mining Company ☐ Contractor ☐ Other

Tons produced since last annual report:_____ X .003 per ton =

Amount due to Division of Conservation: _____

Note: Counties are exempt from tonnage fee.

I, _____as a representative of the above-named company/county, certify that the above information is correct to the best of my knowledge and that the above-named company/county has the authority to operate a mine on the sites listed above, and that the above-named company/county has complied with all local, state and federal requirements pursuant to K.S.A. 49-607(7).

I understand my electronic signature is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same legal effect and meaning as my handwritten signature.

By checking this box and typing my name below, I am electronically signing my document. ☐

First Name _____ MI _____ Last Name _____

Title_____ Date_____

You will have the option to submit your online payment after completing the process **OR**
Please submit this form and a payment for fees to: **Division of Conservation, KDA, Mined Land Reclamation Program**
1320 Research Park Drive, Manhattan, Kansas, 66502. Make check payable to State of Kansas.
OFFICE 785-564-6620 FAX 785-564-6778

For Division of Conservation Use Only

Inspected and Approved by (print) _____ **Date of Inspection** _____

Signature _____ **Title** _____