S0250015
Task ID #6565
cc: Lynn

FORM MR-TRS
Revised 03/31/2009

**STATE OF UTAH**
**DEPARTMENT OF NATURAL RESOURCES**
**DIVISION of OIL, GAS and MINING**
1594 West North Temple, Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801
(801) 538-5291

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# APPLICATION FOR TRANSFER OF NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

Application is hereby made to transfer the permit to commence small mining operations for the Big Dry Valley project, permit # S/025/0015, currently operated by Alpine Gems & Minerals (transferor) to Alpine Gems LLC (transferee).

As used herein, TRANSFEROR refers to the *current operator*; TRANSFEREE refers to the *proposed new operator*; NOI refers to the Notice of Intention to Commence Small Mining Operations; PERMIT refers to the approved (or accepted) NOI, including the reclamation contract and reclamation surety.

Upon approval of the Application for Transfer:

1. The Transferor agrees to transfer all rights and obligations to operate under the terms of the NOI to the Transferee, The Transferor will not retain any rights to conduct small mining operations within the area covered by the approved NOI.

2. Both parties understand the transfer of the ***NOI is not complete until all the applicable requirements are met,*** including the submittal and Division approval of an appropriate reclamation surety and a reclamation contract.

3. The transferee has read and has a copy of the current NOI.

4. The Transferee has inspected the site and is fully aware of all existing conditions and responsible for compliance with the conditions of the permit and the obligations regardless of the nature of the conditions at the site.

5. Transferee shall conduct large mining operations on lands included in the NOI in accordance with the Utah Mined Land Reclamation Act, (ACT) Sections 40-8-1 et seq., Utah Code Annotated, (2005, as amended), and the rules promulgated under the ACT (R647- et seq., and the approved NOI.

6. The Transferee shall provide a surety in a form and amount approved by the Division to assure reclamation of the lands affected by the mining operations.

The **Transferor** will remain liable for compliance at the mine site until this transfer application is approved.

The signatory below represents that he/she has authority to execute this transfer on behalf of the Transferor, if not a natural person. Statements made in the application are true and correct to the best of my knowledge and belief.

TRANSFEROR:

Alpine Gems & Minerals
Operator/Transferor Name

By ArJean Lamoreaux
Name of Authorized Officer (Typed or Printed)

Owner
Title of Authorized Officer

ArJean M Lamoreaux 3/28/15
Officer's Signature Date

STATE OF Utah )
) ss:
COUNTY OF Iron )

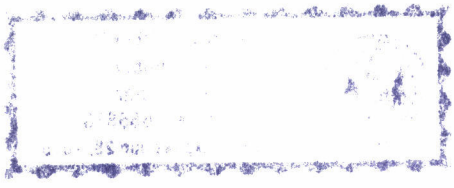
On the 28 day of March, 20 15, ArJean Lamoreaux personally appeared before me, who being by me duly sworn did say that he/she is an Owner (owner, officer, director, partner, agent or other (specify)) of the Operator Alpine Gems LLC and duly acknowledged that said instrument was signed on behalf of said Operator by authority of its bylaws, a resolution of its board of directors, or as may otherwise be required to execute the same with full authority and to be bound hereby.

Notary Public

Cedar City, Utah
Residing at

6-28-16
My Commission Expires:

BRENDA FORSYTH
Notary Public
State of Utah
Comm. No. 656878
My Comm. Expires Jun 28, 2016



The signatory below represents that he/she has authority to execute this transfer on behalf of the Operator/Transferee, if not a natural person; and the operator/transferee is a properly organized entity in good standing under the laws of Utah and the United States, is registered as an entity authorized to do business in the State of Utah. Statements made in the application are true and correct to the best of my knowledge and belief.

TRANSFEREE:

Alpine Gems LLC
Operator/Transferee Name

By Ben Lamoreaux
Name of Authorized Officer (Typed or Printed)

LLC Member Manager
Title of Authorized Officer

Officer's Signature — Date: 3/28/2015

STATE OF Utah )
) ss:
COUNTY OF Iron )

On the 28 day of March, 20 15, Ben Clark Lamoreaux personally appeared before me, who being by me duly sworn did say that he/she is an owner (owner, officer, director, partner, agent or other (specify)) of the Operator Alpine Gems LLC and duly acknowledged that said instrument was signed on behalf of said Operator by authority of its bylaws, a resolution of its board of directors, or as may otherwise be required to execute the same with full authority and to be bound hereby.

Notary Public

Cedar City, Utah
Residing at

6-28-16
My Commission Expires:

BRENDA FORSYTH
Notary Public
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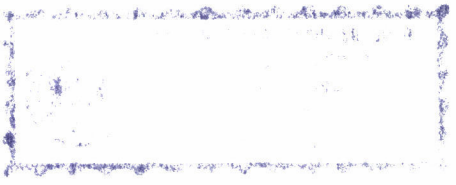

Form MR-SMO
(Revised July 25, 2012)

For Division Use Only
Assigned File Number S/_____/_____
DOGM Lead:_____

**STATE OF UTAH**
**DEPARTMENT OF NATURAL RESOURCES**
**DIVISION OF OIL, GAS AND MINING**
1594 West North Temple Suite 1210
Box 145801
Salt Lake City, Utah 84114-5801
Telephone: (801) 538-5291 Fax: (801) 359-3940

## NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

The information requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program (R647). The rules and Act are available online at http://www.rules.utah.gov/publicat/code/r647/r647.htm and http://le.utah.gov/~code/TITLE40/40_08.htm.

"Small Mining Operations" are operations which have a disturbed area of ten or fewer surface acres at any time in unincorporated areas, or five acres or fewer in incorporated areas.

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## I. GENERAL INFORMATION (Rule R647-3-104)

1. **Name of Mine**: Big Dry Valley

2.A. **Name of Entity Applying for a Permit**: Alpine Gems LLC
Contact (Authorized Officer): Ben Lamoreaux
Mailing Address: 2686 N. 775 W.
City, State, Zip: Cedar City, Utah 84721
Phone: 435-586-0174 Fax: 435-865-1848
E-mail Address: blamoreaux@laeng.com

Entity is a: ☐ Corporation ☑ LLC ☐ Sole Proprietorship (dba) ☐ Individual
☐ Partnership (☐ General or ☐ limited) ☐ Other (specify type) _____

**Business Entity (not individuals) must be registered (and maintain registration) with the State of Utah, Division of Corporations (DOC)** If not currently registered, contact www.commerce.utah.gov to renew or apply.

2.B. Are you currently registered to do business in the State of Utah? ☑ Yes ☐ No
Business Entity #: 7341684-0160
Local Business License #: 1100-BL (if required)
Issued by: County: _____ or City: Parowan

Registered Utah Agent (as identified with the Utah DOC) *(if individual leave blank)*:
Name: _____ Title: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail Address: _____

2.C. **Entity's Representative(s) (if different from #2A) authorized and designated to receive notices of violation, cessation orders, and all other notices to be given to the permittee or operator by the Division.**

Name: _____ Title: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
Emergency, Weekend, or Holiday Phone: _____
E-mail Address: _____

Name: _____ Title: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
Emergency, Weekend, or Holiday Phone: _____
E-mail Address: _____

3a.. **If Business is a Sole Proprietor (dba) or Individual:**
Name of Owner: _____ Title: _____
Business Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail Address: _____

**3b. If Business is a Corporation:**
Name of Officers: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____

Headquarters Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail Address: _____

3c. **If Business is a Limited Liability Company:** ☑ Member Managed ☐ Manager Managed
Name of 1st Member/Manager: Ben Lamoreaux Title: LLC Member Manager
Business Address: 2686 N 775 W.
City, State, Zip: Cedar City, Utah 84721
Phone: 435-586-0174 Fax: 435-865-1848
E-mail Address: blamoreaux@laeng.com

Name of 2nd Member/Manager: Laurie Perry Title: LLC Member Manager
Business Address: 2686 N 775 W
City, State, Zip: Cedar City, Utah 84721
Phone: 435-586-0174 Fax: 435-865-1848
E-mail Address: lightplanter@gmail.com

**3d. If Business is a Partnership:**
Names of First Partner: _____
Business Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail Address: _____

Names of Second Partner: _____
Business Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail Address: _____

## VII. SIGNATURE REQUIREMENT

### CERTIFICATION

I state under penalty of perjury under the laws of the state of Utah and the United States of America that:

a. I have read this form and declare the information, statements and/or documentation are true, correct and complete to the best of my knowledge and belief; AND

b. I commit to the reclamation of the aforementioned small mining project as required by the Utah Mined Land Reclamation Act (40-8) and the rules as specified by the Board of Oil, Gas and Mining.

c. **This certification must be signed by:** (1.) an executive officer if the applicant is a corporation; (2.) a partner if applicant is a partnership (general or limited); (3.) the owner if applicant is a sole proprietorship; **or** (4.) the member or manager if applicant is a limited liability company.

Signature: _____ Date: 3/28/15

Name (typed or printed): Ben Lamoreaux

Title/Position (if applicable): LLC Member Manager