688 East Chad Ranch Road
Veyo, Utah 84782-4141
(435) 574-9300
USA 1-800-776-2206
FAX (435) 574-9333
fellerstone@fellerstone.com

S/053/046
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S/027/027
S/027/026
S/045/032
S/003/044

February 27, 2001

Mr. D. Wayne Hedberg
Permit Supervisor
State of Utah
Department of Natural resources
Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
P. O. Box 145801
Salt Lake City, Utah 84114-5801

RE: Annual Mining Reports for Year 2000

Dear Mr. Hedberg:

Enclosed you will find the Annual Report of Mining Operations for the various mines we are involved in. I apologize for the delay in getting them to you. A member of our staff, who had the computer knowledge to provide us the numbers we needed, passed away last year. We didn't realize that he was involved in this and it took some time for us to be able to gather the information. Now that we have been able to find his secret, we will be able to do it in a more timely fashion in the future.

Please call if you have any questions.

Sincerely,

P. J. Edwards
Manager, Office Operations
FELLER STONE, INC.

RECEIVED
MAR 02 2001
DIVISION OF
OIL, GAS AND MINING

FORM MR-AR
(Revised 3/98)

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DIVISION OF
OIL, GAS AND MINING

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

ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

I. *General Information*

1. Report Time Period: From (mo./yr.) JAN. 2000 To (mo./yr.) JAN. 2001
2. DOGM File Number (Mine No): S /530/023
3. Mine Name: COBOLE/ SANDSTONE : INACTIVE
4. Mineral(s) Mined (or permitted to mine): _____
5. Type of mine ☒ Surface Mine or ☐ Underground Mine
6. Legal Description (Location of Lands Affected):
   _____1/4, ____1/4, ____1/4, Section _____, Township _____, Range _____
   _____1/4, ____1/4, ____1/4, Section _____, Township _____, Range _____
   _____1/4, ____1/4, ____1/4, Section _____, Township _____, Range _____
7. Name of Operator or Company: FELLER HOLDING
8. Permanent Street Address: 688 E. CHAD RANCH ROAD
   City, State, Zip: VEYO, UTAH 84782-4141
   Phone: (435) 574-9300 Fax: (435) 574-9333
9. Company Representative (or designated operator):
   Name: RUSSELL C. FELLER
   Title: PRES.
   Business Address: 688 E. CHAD RANCH ROAD
   City, State, Zip: VEYO, UTAH 84782-4141
   Phone: (435) 574-9300 Fax: (435) 574-9333

☐ **Please check if any of the above information has changed since previous year.**

II. *Mining and Reclamation*

1. Was there any mine related activity during the past year? Yes ☐ No ☒
2. If no - what was the last year of activity? Q
3. If yes - how much ore or mineral was mined? Q

4. Briefly describe the type of work performed, volume of material moved, and any new or additional surface disturbances that occurred during the past year.

Ø

5. How much **additional acreage** was disturbed during the past year? Ø

6. How much acreage was **reclaimed** during the past year? Ø

7. Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.

Ø

8. What is the **total disturbed acreage of entire project** at years end? _____

9. Briefly summarize any mining and/or reclamation plans for the upcoming year.

INACTIVE; NO PLANS TO ACTIVATE

NOTE: Section III., "Additional Information" applies only to **large mining operations.**

III. *Additional Information*

1. An updated surface facilities map should be attached if there have been significant changes since the previous map was submitted.

2. Any monitoring results or other reports that are required under the terms of the approved notice of intention should also be attached.

IV. *Signature Requirement*

I hereby certify that the foregoing is true and correct.

Name (Typed or Print): FELLER STONE INC

Title of Operator: RUSSELL G. FELLER VP

Signature of Operator: [signature]

Date: 2-20-01

jb
a:\forms\MR-AR