



Mined Land Reclamation Program
AMENDMENT OR CANCELLATION OF MINE SITES (County)

County _____ License Number _____

Street Address _____ Telephone _____

City _____ State _____ Zip _____ Fax _____

Purpose of Submittal (Please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Increase permitted area | <input type="checkbox"/> Reclamation Waiver |
| <input type="checkbox"/> Transfer/acquisition of site(s) | <input type="checkbox"/> Change in Reclamation Responsibility
(Attach signed letter of explanation) |
| <input type="checkbox"/> Cancel registration of mine sites*
*Cancellations must show that land has
been reclaimed or change in reclamation
responsibility. | <input type="checkbox"/> Change in Reclamation Plan |

SITE INFORMATION

I. Site No.	II. Site Name	III. Reclamation Responsibility	IV. County	V. Legal Description				VI. Acres Reclaimed
				Q	S	T	R	

I, _____ as a representative of the above named county, certify that the above information is correct to the best of my knowledge and that the above named county has the authority to amend or cancel a mine on the sites listed above and that the county has complied with all local, state and federal requirements pursuant to K.S.A. 49-609(7).

Name _____ Title _____

Signature _____ Date _____

Submit this form to:

DIVISION OF CONSERVATION, KDA, 1320 RESEARCH PARK DRIVE, MANHATTAN, KANSAS 66502
PHONE: 785-564-6620 FAX 785-564-6778