Mined Land Reclamation Program

CHANGE IN RECLAMATION RESPONSIBILITY
(To be completed by company/county transferring reclamation responsibility)

Mine Site Transfer (Form LR-5) must be completed and submitted with this form.

This form is very important because it will identify who will be responsible for any reclamation to be completed. This can be a costly transfer if it is not negotiated in the contract. This form is to have signatures notarized for BOTH parties involved in the transfer to indicate reclamation responsibility.

Transferring Company/County Name____________________________________ License #__________________

(Company/county transferring reclamation responsibility)

Street Address 1__________________________________________________________________________

Street Address 2__________________________________________________________________________

City_________________________________ State____________________ Zip____________________

E-mail___________________________________________________________________________________

Telephone_________________________ Fax________________________________________

Please check the box to ensure that both the transferring and new company have notarized signatures:

☐ Transferring Company  ☐ New Company

SITE INFORMATION

<table>
<thead>
<tr>
<th>Site No.</th>
<th>Site Name</th>
<th>Affected Acres</th>
<th>County</th>
<th>Legal Description</th>
<th>East/West</th>
<th>Acres Bonded</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Transferred</td>
<td>Retained</td>
<td>Q</td>
<td>S</td>
<td>T</td>
</tr>
</tbody>
</table>
I, ____________________________________ as a representative of the above-named company/county, certify that the above information is correct to the best of my knowledge, that the above-named company/county has the authority to change the responsibility of reclaiming a mine on the site 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.

First Name ___________________________________ Last Name ______________________________
Title __________________________________________________________ Date ______________________
Signature __________________________________________________________________________

State of ___________________________
County of _________________________
This instrument was acknowledged before me on ___________________________ (date).
Signature of Notarial Office __________________________________________________________
Seal & Appointment Expiration: ______________________________________________________

ACCEPTANCE by company assuming reclamation responsibility. I accept reclamation responsibility on the site listed above. I also will assume the responsibility of registering this site, submitting a new Reclamation Plan, as well as assuring that the mine site will be properly bonded.

Name ___________________________ Last Name __________________________
First Company/County ____________________________ License # __________________
Street Address 1 ____________________________ Telephone _______________________
Street Address 2 ____________________________________________________________________
City ____________________________ State __________ Zip __________ Fax ________________
Signature __________________________________________________________________________
Date _____________________________________________________________________________

State of ___________________________
County of _________________________
This instrument was acknowledged before me on ___________________________ (date).
Signature of Notarial Office __________________________________________________________
Seal & Appointment Expiration: ______________________________________________________

Please submit this form to: Division of Conservation, KDA, Mined Land Reclamation Program
1320 Research Park Drive, Manhattan, Kansas, 66502.
OFFICE 785-564-6620 FAX 785-564-6778.

For Division of Conservation Use Only
Approved by (print) ___________________________ Date __________________________
Signature __________________________________________ Title _________________________