

RECEIVED
JUL 02 2018
MINERALS & MINING PROGRAM

REQUEST FOR DETERMINATION
SPECIAL, EXCEPTIONAL, CRITICAL,
OR UNIQUE LANDS AND NOTICE OF
INTENT TO OPERATE

Name of Operator Blake Harold Chanley
Office Address 514 Americas Way, Suite # 7045
Box Elder, SD 57719-76
Telephone 321-205-6706
Local Address as above
Telephone as above
Legal Description Rochford Quadrangle → T2N, R4E,
S33, SW¹/₄ NE¹/₄ SE¹/₄ and portions of NW¹/₄
SE¹/₄ SE¹/₄ and SE¹/₄ NW¹/₄ SE¹/₄ and NW¹/₄ NE¹/₄ SE¹/₄
County Pennington County
Name and Address of Surface Owner USFS
US Forest Service Mystic Ranger District
8221 South Highway 16 Rapid City, SD 57702
Name and Address of Mineral Owner Blake Harold Chanley
514 Americas Way, Suite # 7045
Box Elder, SD 57719-76

Name and Address of Surface Owners Within 500 Feet of the Proposed Mining Operation

none

I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Signature Blake Harold Chanley
Blake Harold Chanley
Title Operator Date 05-31-2018

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Department of Environment
and Natural Resources,
Minerals and Mining Program
523 East Capitol Avenue
Pierre, SD 57501-3181



9590 9402 2681 6351 1645 39

2. Article Number (Transfer from service label)

7017 3380 0000 8732 3248

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
CENTRAL MAIL SERVICES
X 1320 E SIOUX AVE
PIERRE SD 57501
 Agent
 Addressee

B. Received by (Printed Name)
C. Date of Delivery
JUN 04 2018

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lucas Lentsch
Department of Agriculture
Foss Building
523 East Capitol Avenue
Pierre, SD 57501-3185



9590 9402 2681 6351 4956 26

2. Article Number (Transfer from service label)

7017 3380 0000 8732 3224

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
CENTRAL MAIL SERVICES
X 1320 E SIOUX AVE
PIERRE SD 57501
 Agent
 Addressee

B. Received by (Printed Name)
C. Date of Delivery
JUN 04 2018

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mike Fosha
Department of Tourism
Archaeological Research
P.O. Box 1257 Center
Rapid City, SD 57709-1257



9590 9402 2681 6351 4956 02

2. Article Number (Transfer from service label)

7017 1070 0000 4625 5865

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mike P. Watts
 Agent
 Addressee

B. Received by (Printed Name)
C. Date of Delivery
Jane P. Watts 6/6/18

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

MINERALS & MINING PROGRAM

JUL 02 2018

RECEIVED

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jim Hagen
 Department of Tourism
 Office of Tourism
 Capitol Lake Plaza
 500 East Capitol Avenue
 Pierre, SD 57501



9590 9402 2681 6351 4932 26

2. Article Number (Transfer from service label)
7017 3380 0000 8732 3231

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **CENTRAL MAIL SERVICES** Agent
1320 E SIOUX AVE Addressee
PIERRE SD 57501
 B. Received by (Printed Name) **JUN 04 2018** C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pennington County
 Registrar of Deeds
 130 Kansas City Street
 Suite 210
 Rapid City, SD 57701



9590 9402 2681 6351 1645 46

2. Article Number (Transfer from service label)
7017 1070 0000 4625 5872

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **JUN 05 2018** Agent
X Addressee
 B. Received by (Printed Name) *Doug M. Johnson* C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

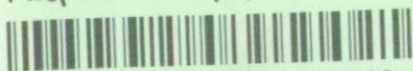
Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stan Michals
 Department of Game,
 Fish, and Parks
 4130 Adventure Trail
 Rapid City, SD 57702-4804



9590 9402 2681 6351 4955 96

2. Article Number (Transfer from service label)
7017 1070 0000 4625 5858

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **Summer Beck** Agent
X Summer Beck Addressee
 B. Received by (Printed Name) **Summer Beck** C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

Domestic Return Receipt

RECEIVED
 JUL 02 2018
 MINERALS & MINING PROGRAM

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jay Vogt
 Department of Tourism
 State Historical Society
 900 Governors Drive
 Pierre, SD 57501-2217



9590 9402 2681 6351 4955 89

2. Article Number (Transfer from service label)

7017 0190 0000 3319 3114

COMPLETE THIS SECTION ON DELIVERY

A. Signature **CENTRAL MAIL SERVICES**
 1320 E SIOUX AVE
 PIERRE SD 57501

- Agent
 Addressee

B. Received by (Printed Name)
JUN 04 2018

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

RECEIVED
JUL 02 2018
 MINERALS & MINING PROGRAM