



NON-COAL QUARTERLY REPORT

Quarter and Year Reporting **OCT, NOV, DEC 2017** Permit # _____

Operator's Company Name: _____

Mailing Address _____
Street OR Box No. City State Zip Code

Mine Name (if applicable) _____

Land Description: Section _____ Township _____ Range _____ County _____

Method of Mining: Auger Dredging Hydraulic Quarrying Stripping
Drag Line Loading & Hauling Room & Pillar

Mineral Produced _____

OCTOBER 2017	Tons _____	X (times) \$0.01 =	\$ _____
NOVEMBER 2017	Tons _____	X (times) \$0.0125 =	\$ _____
DECEMBER 2017	Tons _____	X (times) \$0.0125 =	\$ _____
Total Tonnage _____		Total Tonnage Fee	\$ _____

Round to the nearest whole number.

IF PAID THIRTY (30) DAYS AFTER QUARTER ENDS ADD 10% PENALTY.

10% Penalty Fee \$ _____ Total Due \$ _____

NUMBER OF INDIVIDUALS WORKING DURING EACH MONTH OCT _____ NOV _____ DEC _____

NUMBER OF DAYS THE MINE WORKED DURING EACH MONTH OCT _____ NOV _____ DEC _____

HAS AN ACCIDENT OCCURRED ON THE MINESITE DURING THIS QUARTER? YES NO

If yes, Departmental Rules require an accident report to be filed with the Department of Mines.

Contact the Oklahoma City Office IMMEDIATELY to complete an accident report, if it has not already been filed.

Name of Person filling out this report: _____ Phone # _____

Subscribed and sworn to me before this _____ day of _____ 20 _____

My commission expires _____

Commission No. _____ Notary Public _____