

# ANNUAL STATUS AND PRODUCTION REPORT – NON-METALLICS

## Nevada Division of Minerals

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MSHA No. \_\_\_\_\_ Date Submitted \_\_\_\_\_

Report Year \_\_\_\_\_ Submitted by \_\_\_\_\_

Operation Name: \_\_\_\_\_  
(Name of mine, mill, quarry, gravel pit, etc.)

Operator Name: \_\_\_\_\_  
(Name of company, corporation, partnership, or individual)

Operation Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Operation Telephone No.: \_\_\_\_\_ Operation Fax No.: \_\_\_\_\_

Home Office Mailing Address: \_\_\_\_\_  
(if different from above) \_\_\_\_\_  
\_\_\_\_\_

Home Office Telephone No.: \_\_\_\_\_ Home Office Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Location of Operation: County: \_\_\_\_\_ Township: \_\_\_\_\_  
Range: \_\_\_\_\_ Section: \_\_\_\_\_

Current Mine Status: (Please check one. If in temporary or permanent shut down, please enter the date of occurrence.)

Development----- → Planned Commencement Date. \_\_\_\_\_

Production ----- → Commencement Date ..... \_\_\_\_\_

Temporary Shut Down - → Temporary Shut Down Date ..... \_\_\_\_\_

Permanent Shut Down - → Permanent Shut Down Date ..... \_\_\_\_\_

Mining Method: (Please check all that apply and indicate approximate annual percentages.)

Open Pit/Quarry \_\_\_\_%  Underground \_\_\_\_%  Placer \_\_\_\_%  Brine Pumping \_\_\_\_%

Other \_\_\_\_% (Please describe) \_\_\_\_\_

Type of Process: (Check all that apply.)

Crushing/Screening  Gravity/Flotation/Jig  Milling/Grinding  Drying/Kiln/Calcination  Solar Evaporation

Other (Please describe) \_\_\_\_\_

Is processing facility available for ore tolling? \_\_\_\_\_

	Commodity 1	Commodity 2	Commodity 3
Commodity Produced:			
Primary Use(s):			

	Commodity 1	Commodity 2	Commodity 3
Commodity Mined:			
Mined Amount:			
Mined Unit (tons, ozs, etc.):**			
Mined Remarks:			

	Commodity 1	Commodity 2	Commodity 3
Commodity Processed:			
Processed Amount:			
Processed Unit (tons, ozs, etc.):**			
Processed Remarks:			

	Commodity 1	Commodity 2	Commodity 3
Commodity Shipped:			
Shipped Amount:			
Shipped Unit (tons, ozs, etc.):**			
Shipped Remarks:			

**NOTE 1: Please enter the amount and whether it is in tons, ounces, pounds, cubic yards, etc.**

**NOTE 2: For aggregate producers, please list only one amount for all sand and gravel and one amount for crushed stone, regardless of size.**

**Administrative Staff Name(s):**

Operations Manager: \_\_\_\_\_

Mine Manager: \_\_\_\_\_

Mill Manager: \_\_\_\_\_

**Average Number Employed at the Facility:** \_\_\_\_\_ **Company** \_\_\_\_\_ **Contractor(s)** \_\_\_\_\_  
**Total Employed** \_\_\_\_\_