

STATE OF NEW MEXICO

Energy, Minerals and Natural Resources Department Mining and Minerals Division 1220 South St. Francis Drive Santa Fe, NM 87505 Telephone: (505) 476-3400 FAX No.: (505) 476-3402

FORM 2 CHANGE OF REGISTRATION

Each mine, mill and smelter operator in New Mexico shall notify the Mining and Minerals Division in writing prior to any reactivation of operations, or any changes to the original information contained in Form 1, Mine/Mill/Smelter Registration. In the event of a change of ownership or operating company, complete the reverse side of this form in addition to the information requested below.

Name of Company:			Telephone: ()	
Address:				
Name of Mine/Mill/Smelter:_				
Location: County	1/4-1/4 Sec	Section	Township	Range
Directions to Location if Uns	urveyed:			
Manager or Person in Charge	and Title (please print):			
Address:				
Effective Date of Change:				
Please describe any changes b	nelow:			
Trease desertee any enames of	, c.			
a. ,		Title:		
Signature		Addr	ress:	
Name (please print)		Date	signed:	



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FORM 2 CHANGE OF OWNERSHIP OR OPERATOR

I,	, of				
			(Company)		
do hereby acknowledge the t	transfer for the purpose of owne	ership and/or op	peration of the following mine, mil	l, or smelter	
to	(Company)				
whose principal place of bus	siness is:				
Mine, Mill or Smelter Name:			MSHA Number:		
.,					
Location: County	1/4-1/4 Sec	Section_	Township	Range	
D: .:	1				
Directions to Location if Uni	surveyea:				
I hereby swear or affirm th	at the information herein prov	ided is	I,		
true, complete and correct.			of		
			(Company)		
			have read the foregoing stateme the responsibility of ownership	and/or operation of said mine	
			mill or smelter.		
Signature		_	Signature		
Signature			Name (please print)		
Name (please print)		_	• •		
Title:		_	Title:		
Address:			Address:		
		_			
Telephone:()			Telephone:()		
Date signed:		_	Date signed:		
Date signed:					