



Arizona State Land Department

MINERAL LEASES

1. A mineral lease application may only be applied for after the existence of a valuable mineral deposit has been determined under a valid mineral exploration permit held for the same location.
 2. A technical conference is recommended to discuss the application and the required Mineral Development Report (MDR).
 3. A non-refundable filing fee of **\$500.00** is required for each application.
 4. Applications must be typed or printed in ink. Applications that are incomplete or illegible will be returned.
 5. An environmental disclosure questionnaire must accompany each application.
 6. Mineral Leases do not have acreage limitations.
 7. The maximum term of a mineral lease is **twenty** (20) years. Most mineral leases may be renewed for an additional term or terms depending on the mine plan of operation.
 8. Mineral lease boundaries, access routes, mine workings, roads, water sources, residences, utilities, etc. must be plotted separately on a USGS Topographic Map.
 9. The application must be signed by the applicant(s) or an authorized agent. If an agent is filing for the applicant, a notarized Power of Attorney must be filled with the Department. The filing fee for a Power of Attorney is **\$50.00**.
 10. Approval or denial of a mineral lease requires a minimum of six (6) months.
 11. The application is reviewed by all ASLD divisions, other appropriate State of Arizona and Federal agencies, as well as interested parties or individuals.
 12. Applicant must also prepare and submit one (1) copy of a **DRAFT** MDR in a white 3-ring binder and an electronic copy in pdf format. Following a review by the Minerals Section, the applicant must submit one (1) copy of the **FINAL** MDR in a white 3-ring binder and an electronic copy in pdf format. All confidential information must be submitted separately in one (1) white 3-ring binder and an electronic copy in pdf format. The MDR must include the following but is not limited to:
 - a. geologic assessment
 - b. economic feasibility
 - c. environmental assessment
 - d. mining plan of operation
 - e. reclamation and closure plan
- An outline for a MDR may be downloaded from the Arizona State Land Department (ASLD) website at:
<https://land.az.gov/sites/default/files/documents/files/MINDEVTRPT.pdf>
13. Archaeological and biological surveys, as well as other applicable permits (required under the environmental assessment section of the MDR) must be submitted for review. Two (2) copies of the archaeological survey and one (1) copy of the plant survey and other applicable permits are requested along with electronic copies in pdf format).
 14. A surface and mineral appraisal (paid for by the applicant) is required to establish the surface *rent* and mineral *royalty* for the lease. As determined within the mineral appraisal, the royalty may either be based on:
 - a. a fixed rate subject to annual adjustment based on the U.S. Dept. of Labor Producer Price Index; or
 - b. a sliding-scale rate which is linked to the commodity price and the operation's break-even price. There is a statutory minimum royalty rate of 2% of gross value; however, most royalties are established at 5% to 6%.
 15. A bond is established based upon the mining plan of operation as required within the MDR.

Arizona State Land Department 1616 West Adams Phoenix, Arizona 85007 (602)542-2687 Filing Fee: \$500.00 (nonrefundable) N(34)	DEPARTMENTAL USE ONLY	
	Examiner: _____ Rolodex # _____	
	<u>Recommendation / Initial</u>	<u>Date</u>
	Approved _____	_____
	Denied _____	_____
	Rejected _____	_____
	Withdrawn _____	_____

APPLICATION TO OBTAIN MINERAL RESOURCES
APPLICATION # _____

I. APPLICANT

Principal _____

Address _____

City _____ State _____ Zip _____ Phone (____) _____

Contact _____ E-mail _____

Is this application being filed in conjunction with any other application(s)? Yes No

Is this application being filed to assist another applicant in procuring a lease or permit? Yes No

II. APPLICATION

Date/Time Stamp

<u>Application Type</u>	<u>KE</u>	Note: <i>If converting your current exploration permit to a mineral lease, enter the permit number below:</i> Permit No. _____
<input type="checkbox"/> Exploration Permit	(08)	
<input type="checkbox"/> Mineral Lease	(11)	
<input type="checkbox"/> Mineral Materials	(04)	
<input type="checkbox"/> Energy	(13)	
<input type="checkbox"/> Other _____		

III. LOCATION & ACCESS

Township _____ Range _____ Section _____ Acres _____ County _____

Legal Description _____

Access _____

Is access across other state lands required? Yes No

Nearest city _____ Distance from city _____ miles

A **USGS Topographic Map** showing **location boundaries** of and **access** to the exact area under this application *must* be included.

IV. OPERATIONS

1. Commodities: Primary _____ Secondary _____

2. Estimated Annual Production _____ tons , cyds , lbs , oz , other _____

If no, state the Legal Corporate Name: _____

Address: _____

(Street or Box Number) (City) (State) (Zip)

4. LIMITED LIABILITY COMPANY:

(A) If an out-of-state limited liability company have you filed for a Certificate of Registration with the Arizona Corporation Commission?

Yes No

(B) If an Arizona limited liability company have you filed Articles of Organization with the Arizona Corporation Commission?

Yes No

(C) Are you authorized by the Arizona Corporation Commission to transact business in Arizona?

Yes No

5. PARTNERSHIP OR JOINT VENTURE: (Complete the following for each authorized partner or principal in the partnership or joint venture:)

NAME	BUSINESS ADDRESS	AGE	MARITAL STATUS
_____	_____	_____	_____
_____	_____	_____	_____

6. LIMITED PARTNERSHIP: Is this Limited Partnership on file with the Arizona Secretary of State?

Yes No

AUTHORIZED GENERAL PARTNER(S) NAME	BUSINESS ADDRESS
_____	_____
_____	_____

7. ESTATE: Complete the following and attach a copy of the court or estate document(s):

Name of the court-appointed administrator or personal representative _____

List the type and date of issuance of the court or Estate document

(Date issued) (Type of Document)

8. TRUST:

(A) Complete the following pursuant to A.R.S. § 33-404, for each beneficiary of the Trust

NAME	ADDRESS	AGE	MARITAL STATUS
_____	_____	_____	_____
_____	_____	_____	_____

or (B) Identify the Trust document by title, document number, and county where document is recorded _____

9. I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN, TOGETHER WITH ALL EXHIBITS AND ATTACHMENTS ARE TRUE, CORRECT AND COMPLETE AND THAT I/WE HAVE AUTHORITY TO SIGN THIS DOCUMENT.

SIGNATURE(S)

Name of Corporation, Partnership, Trust, etc. Date Signature of Applicant (Individual) Date

Signature Title Signature of Applicant (Individual) Date

ARIZONA STATE LAND DEPARTMENT ENVIRONMENTAL DISCLOSURE QUESTIONNAIRE
These two pages are part of the application - DO NOT DETACH.

The purpose of this questionnaire is to give the Department an opportunity to detect proposed land uses that may have potential environmental impacts and risks, and to consider these impacts and risks in the processing of the application.

If you have questions regarding this questionnaire, please contact the State Land Department, Environmental Section at (602) 542-2119. Other Federal, State, County and local agencies may also need to be contacted regarding environmental regulations.

PLEASE INDICATE BELOW THE TYPE(S) OF POTENTIAL ENVIRONMENTAL IMPACTS FROM YOUR CURRENT OR PROPOSED USE:

<u>YES</u>	<u>NO</u>	<u>WILL YOUR USE INVOLVE:</u>	<u>TYPE OF ENVIRONMENTAL IMPACT</u>
_____	_____	WASTE TIRES The collection of waste tires? If yes, explain: _____	
_____	_____	LEAD ACID BATTERIES The sale and disposal of lead acid batteries? If yes, explain: _____	
_____	_____	DISCHARGE IMPACTING GROUNDWATER Generating a discharge that may potentially impact groundwater? If yes, explain: _____	
_____	_____	PESTICIDES? If yes, explain use: _____	
_____	_____	DRY WELLS? If yes, ADEQ Registration #(s): _____	
_____	_____	POTABLE WATER (DRINKING WATER) SYSTEMS? If yes, explain: _____	
_____	_____	WASTEWATER COLLECTION AND TREATMENT SYSTEMS Wastewater collection and/or treatment? If yes, explain: _____	
_____	_____	AIR CONTAMINANTS/AIR POLLUTION CONTROL Air contaminant emissions? If yes, explain: _____	
_____	_____	SOLID WASTE – GENERAL Solid waste generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	
_____	_____	SOLID WASTE - MEDICAL WASTE Medical waste generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	
_____	_____	SOLID WASTE - SEWAGE SLUDGE/SEPTAGE (Septic Tank Waste) Sewage sludge/septage generation, transportation, treatment, storage, use or disposal? If yes, explain: _____	
_____	_____	USED OIL Used oil generation, transportation, storage, recycling, use, disposal, marketing or burning? If yes, explain: _____	
_____	_____	RECYCLING ACTIVITIES? If yes, explain: _____	
_____	_____	SPECIAL WASTE Special waste (asbestos, motor vehicle shredding waste) generation, transportation, treatment, recycling, storage or disposal? If yes, explain: _____	
_____	_____	HAZARDOUS WASTE GENERATOR Generating hazardous waste? If yes, explain: _____	
_____	_____	HAZARDOUS WASTE TREATMENT, STORAGE, OR DISPOSAL? If yes, explain: _____	

(OVER)

<u>YES</u>	<u>NO</u>	<u>WILL YOUR USE INVOLVE:</u>	<u>TYPE OF ENVIRONMENTAL IMPACT</u>
_____	_____	HAZARDOUS WASTE TRANSPORTATION? If yes, explain: _____	
_____	_____	UNDERGROUND STORAGE TANK (UST)? If yes, explain: _____	
_____	_____	ABOVEGROUND STORAGE TANK (AST)? If yes, explain: _____	
_____	_____	HAZARDOUS SUBSTANCES? If yes, explain: _____	
_____	_____	CURRENTLY UNCLASSIFIED WASTE Will your use involve currently unclassified waste containing the following? (A.R.S. §49-854). If yes, check appropriate waste category:	
		<input type="checkbox"/> Polychlorinated biphenyls (PCBs) <input type="checkbox"/> Oil and gas exploration drilling muds <input type="checkbox"/> Petroleum contaminated soil	
		<input type="checkbox"/> Incinerator ash <input type="checkbox"/> Categorical industrial pretreatment sludge <input type="checkbox"/> Commercial/industrial septage	
		<input type="checkbox"/> Petroleum refining waste <input type="checkbox"/> Radioactive waste <input type="checkbox"/> Used Antifreeze	
		<input type="checkbox"/> Slag and refractory material <input type="checkbox"/> Uranium ore tailings <input type="checkbox"/> Contaminated process equipment	
		<input type="checkbox"/> Precious metals recycling <input type="checkbox"/> Industrial catalysts <input type="checkbox"/> Industrial Sludges	
		<input type="checkbox"/> Aluminum dross <input type="checkbox"/> Industrial sands (excluding mining or mineral processing operation)	
		If checked, explain waste generation process: _____	
_____	_____	SUPERFUND SITES Is the State Trust land located in a National Priority List (NPL, Federal Superfund) area or in a Water Quality Assurance Revolving Fund (WQARF, State Superfund) study area? If yes, NP or WQARF area name: _____	
_____	_____	LAND DISTURBANCE If land disturbance will occur, will it be on previously undisturbed land? If yes, explain: _____	
_____	_____	WATER WELLS Are there open and/or abandoned water wells on the property? If yes, submit a site diagram showing location(s) and use(s): _____	
_____	_____	ADJACENT LAND USES To the best of your knowledge, are adjacent lands subject to any of the above-referenced environmental impacts? If yes, explain: _____	
_____	_____	ON-SITE INSPECTION/ENVIRONMENTAL ASSESSMENT To the best of your knowledge, has an on-site inspection and/or an environmental site assessment been performed at this location? If yes, explain: _____	
_____	_____	PREVIOUS ENVIRONMENTAL IMPACT To the best of your knowledge, has any environmental impact been reported previously to ADEQ? If yes, explain: _____	

ADDITIONAL COMMENTS: