

State of Alaska
Application for Permits to Mine in Alaska
Amendment

Date: 12-30-2025

Amendment # _____

APMA: 3046

Please describe your proposed amendment and attach all required forms from the APMA application.

We are adding Equipment for testing and mining operations, as well as four more claims on to our APMA.

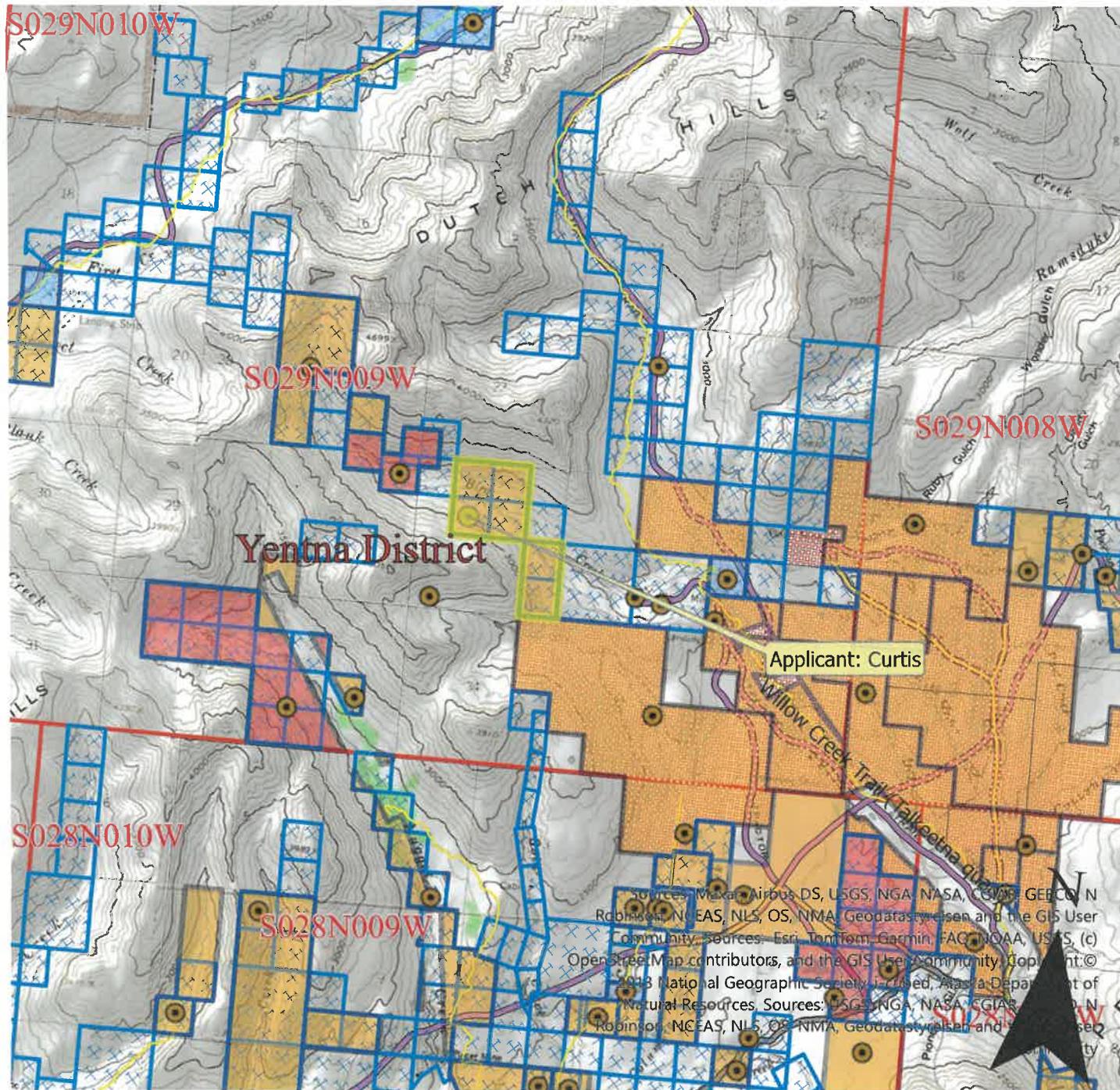
This includes new testing/mining locations and a new landing for winter storage.

Original plan of operation will remain virtually the same. We will be staging our equipment across from camp and will be expanding our working area by camp.

STATE OF ALASKA
2024
Application for Permits to Mine in Alaska (APMA)

<input type="checkbox"/> Single Year <input checked="" type="checkbox"/> Multi-year Start: 2024 Finish: 2028 APMA Number (AF/J/Year,****) <u>3046</u>			
What type activity are you planning to perform? *REQUIRED	(1) Surface estate of mineral properties: *REQUIRED		
<input checked="" type="checkbox"/> Suction Dredging/Reclamation <input type="checkbox"/> Reclamation Only <input checked="" type="checkbox"/> Placer Mining/ Reclamation <input checked="" type="checkbox"/> Access <input type="checkbox"/> Hardrock Exploration/ Reclamation	<input checked="" type="checkbox"/> State (General) <input type="checkbox"/> State (Mental Health) <input type="checkbox"/> Federal <input type="checkbox"/> Private <input type="checkbox"/> City or Borough		
Check All That Apply: <input checked="" type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input checked="" type="checkbox"/> Operator *Required			
Name: <u>McKenzie Curtis</u>	Primary Phone Number: <u>5032699502</u>		
Address: <u>P.O Box 521142</u> <u>Big Lake Ak 99652</u>	Secondary Phone Number: _____ Email: <u>miningalaska420@gmail.com</u>		
Click here for the Department of Commerce Link			
Alaska Business/Corporation Entity# _____	Registered Agent (Corp./LLC/LP) _____		
Check All That Apply: <input checked="" type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input checked="" type="checkbox"/> Operator *Required			
Name: <u>William Curtis</u>	Primary Phone Number: <u>541-279-4454</u>		
Address: <u>P.O Box 521142</u> <u>Big Lake AK 99652</u>	Secondary Phone Number: _____ Email: _____		
Alaska Business/Corporation Entity# _____	Registered Agent (Corp./LLC/LP) _____		
Check All That Apply: <input type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input checked="" type="checkbox"/> Operator *Required			
Name: <u>John Bvms</u>	Primary Phone Number: <u>907-414-0774</u>		
Address: <u>14164 Big Lake rd</u> <u>Big Lake AK 99652</u>	Secondary Phone Number: _____ Email: _____		
Alaska Business/Corporation Entity# _____	Registered Agent (Corp./LLC/LP) _____		
Check All That Apply: <input type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input checked="" type="checkbox"/> Operator *Required			
Name: <u>Mike Bvms</u>	Primary Phone Number: <u>907-203-8513</u>		
Address: <u>14164 Big Lake Rd</u> <u>Big Lake AK 99652</u>	Secondary Phone Number: _____ Email: _____		
Attach a separate sheet for additional contacts			
Alaska Business/Corporation Entity# _____	Registered Agent (Corp./LLC/LP) _____		
Project Name If Applicable: _____	(7) Average Number of Workers: *REQUIRED <u>6</u>	(8) Start-Up/Shut Down: (Month/Day) <u>June 15th</u> to <u>Oct 15th</u> .	(9)
Mining District: *REQUIRED <u>Yentna</u>	(10) Applicable USGS Map(s): *REQUIRED <u>Talkeetna C-2</u>	(11) On What Stream Is This Activity? <u>Bird Creek</u>	(12)
Legal Description of mineral properties to be worked (MTRS) *REQUIRED Example: Fairbanks Meridian Township 001N Range 003E Sections 15, 16, and 21 or F 001N 003E Sec. 15, 16, and 21 S 29n 9W 27		(13)	
Internal Use Only:		By  APR 26 2024	
Date Application Received Complete: Sec 3 CID: <u>6775</u>	Adjudicator: _____	LAS Entry: Sec 6 CID: _____	
Sec 4 CID: <u>67752</u>	Sec 5 CID: _____		

APMA 3046 Active Area



This map was created on 1/2/2026 by the Alaska Department of Natural resources as a courtesy to supplement the application received. This map displays a graphical illustration only. Source documents remain the official record.

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CASE_ID	CSTMNRNM	SPCLCDDSCR	CSSTTSDSCR	CLAIM_NAME	NTPSTD	RFRSHDT
ADL 739916	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 6	7/10/2023 12:41	1/2/2026 4:01
ADL 739961	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 8	8/24/2023 15:28	1/2/2026 4:01
ADL 742418	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 1	4/26/2025 15:31	1/2/2026 4:01
ADL 742419	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 2	4/26/2025 15:31	1/2/2026 4:01
ADL 742420	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 3	4/26/2025 15:31	1/2/2026 4:01
ADL 742421	CURTIS, MCKENZIE	MINING CLAIM (MC)	ACTIVE (35)	PERSERVERANCE 4	4/26/2025 15:31	1/2/2026 4:01

MINERAL PROPERTIES LIST

(14)

Properties that have previous mining disturbance requiring reclamation, active mining/exploration activities, surface improvements, location of a camp, or provides access through the claim block for mining activities. **DO NOT LIST CLAIMS UNLESS LISTED ACTIVITIES ARE ASSOCIATED WITH THEM.**

If requesting more than 12 claims, are additional sheets with ADL/BLM/USMS and legal descriptions attached? Yes No

Are any of these mineral properties an Upland or Offshore Mining Lease? Yes No

	ADL/BLM/USMS #	PROPERTY NAME		ADL/BLM/USMS #	PROPERTY NAME
1.	742418	Perseverance 1	7.		
2.	742419	Perseverance 2	8.		
3.	742420	Perseverance 3	9.		
4.	742421	Perseverance 4	10.		State of Alaska Natural Resources DEC 29 2025 Mining Section RECEIVED
5.	739916	Perservance 6	11.		
6.	739961	Perseverance 8	12.		

INVENTORY OF EQUIPMENT

(15)

List all mechanized equipment to be used (make, model, type, size, purpose, and number of each, including pumps). Attach additional sheets as necessary. If you are transporting on a trailer to the claim block, include the trailer size.

Check One:

	Make, Model, Type, Size, Purpose of Equipment or Pump	Quantity of this type	Located on the claim block?	Transporting to claim block?
1.	Backhoe	1		✓
2.	Wash plant / Trommel	3		✓
3.	Bull Dozer	2		✓
4.	Bus/RV	5		✓
5.	Excavator	2		✓
6.	Front Loader	1		✓
7.	Rock Truck	2		✓
8.	Dump Truck	1		✓

ACCESS TO THE CLAIM BLOCK

(16)

Access across surface estates not owned by the State requires approval of the managing agency. It is the responsibility of the applicant to contact the owners of private property to obtain authorization for access.

When are you going to be transporting equipment and/or traveling to and from the claim block? Winter Summer

Access to the claim block crosses what type of land(s)?

State City/Borough Federal Private

Indicate type(s) Existing Access to the claim block:

All season Road (These are public easements maintained by municipal, borough, private, or state funds for year round use). List road(s) to claim block: Petersville rd

Existing Route or a RST/ RS 2477 Easement with a mineral base surface.

If the RST/ RS 2477 Easement(s) has a State of Alaska number, please list: _____

Navigable Waterway

Aircraft Supported

Indicate type(s) of access to be constructed within the claim block for development of the mineral resource:

Road(s) Helicopter Pad Airstrip No Improvements or Construction Proposed

ACCESS TO THE CLAIM BLOCK, CONTINUED

(16)

Please describe your construction activities and include mitigation measures to protect water, fish and game resources. Include a time frame for final closure and a reclamation plan for access within the claim block. Attach additional pages if necessary:

Petersville rd

Access Roads within the Claim Block will be built off of existing roads for exploration and mine site activity. These roads will be reclaimed when testing or mining is complete.

A access map **MUST** be submitted with your application. Topographic maps at a scale of 1"=1 mile must clearly indicate the proposed access route from start to finish, location of proposed construction activities, and appropriate legal descriptions (township and range) on each map sheet. Paper size should be limited to 8 1/2" x 11". Do not tape maps together.

Name the individual(s) or business(es) who will be conducting the travel:

McKenzie Curtis, William Curtis, John Byrns, Mike Byrns.

List all equipment and vehicles conducting travel to/from the claim block, including vehicle weights and season of travel:

Polaris RZR, Honda Pioneer, Pickup, Service truck, Front Loader, 300 excavator, D8 Cat, Wash Plant, School bus/RV, Dump Truck, Rock Truck. (Excavators, 12,000pd, 20,000pd,) (Backhoe 18,000pd)(Bull Dozer 25,000pd) (Trommel 22,000pd) (Connex Box 5000pd)

State the average total miles traveled in one round trip: 38. State the number of trips proposed: 2.

State the start and end date(s) or period(s) of proposed travel: June 15th-Oct 15th.

Select the following terrain type(s) that best describes your route of travel: Wetlands Tundra

Uplands Rivers or Other Water Bodies Wooded Areas (6" Trees or larger at breast height)

Will water be needed to construct ramps/ ice bridges? Yes No

If Yes, estimated quantity of water will be used: _____ gallons/day Water Source: _____

Are you transporting fuel? Yes No

Maximum volume of fuel (in gallons) that is being transported by one vehicle and any trailers or sleds it is towing: 500

Are you transporting other hazardous substances? Yes No If "Yes" indicate type and amount (e.g. gallons, lbs, psi):

How are petroleum products contained? (i.e., drums, bladders, steel tanks, etc.) Indicate size of containers:

Tanks in truck or on trailer

How are petroleum products being transported? (i.e., skid-mounted tank, trailer, 55 gallon drums on skid, etc.)

Transfer Tank

ACCESS TO CLAIM BLOCK CONTINUED**(16)**

Does your travel include the staging or storage of equipment or structures off the claim block? Yes No
If Yes, describe the location and dimensions of the long term or short term parking and/or storage areas.

PETROLEUM PRODUCT STORAGE**(17)**

Do you have an Oil Discharge Prevention and Contingency Plan approved by the Alaska Department of Environmental Conservation? Yes No

Do you have either a trained spill response team or a contract with a spill response company? Yes No

Describe any measures you plan to take to minimize drips or spills from leaking equipment or vehicles:

Regular Maintenance and Service in designated parking areas. Spill kits on hand at Site.

Quantity Petroleum Products to be Stored on the Project Site?

0-1,320 gallons of total storage (Secondary Containment recommended, but not required)

1,321-10,000 gallons of total storage (count only containers with a capacity of 55 gallons or greater). A self-certified Spill Prevention, Control, and Countermeasure (SPCC) plan is required and applies to all products, such as diesel fuel, gasoline, lube oil, hydraulic oil and waste oil. The self certified SPCC form can be downloaded at: <https://www.sfdph.org/dph/files/EHSdocs/ehsHMUPAdocs/TIERIQFSPCCPlan.pdf>.

BLM Operators are encouraged to use the optional BLM-Spill contingency plan that can be downloaded at: https://www.blm.gov/sites/blm.gov/files/BLM-AK_spill-contingency-plan_APMA_worksheetSup.pdf

10,000+ gallons of total storage (count only containers with 55 gallons or greater storage capacity). An SPCC certified by a professional engineer is required and applies to all oil products, such as diesel fuel, gasoline, lube oil, hydraulic oil and waste oil.

Indicate Distance Stored From Flowing Waters: 500 Feet. (Minimum distance from naturally occurring water bodies required by DNR is 100 feet).

Is waste oil stored on the project site? Yes No If Yes, describe quantity and storage modality: _____.

Are fuel containment berms around storage containers? Yes No Is berm area lined? Yes No

TEMPORARY STRUCTURES/FACILITIES

(18)

Is a camp or placement of any temporary structure requested? Yes No

If "No", Please explain:

Describe all temporary improvements (including buildings, tent platforms, out-buildings, etc., including their quantity, dimensions and building type.

What type of property is the camp located on? State Federal Private (Patented) City or Borough MHTL

If camp is on private land, provide location:

Proposed perimeter dimensions of camp: 250 Length (feet) 100 Width (feet).

Request use of **existing** facilities, list ADL(s):

Year-Round Seasonal, from Approx. _____ to _____, annually.

Request to place **new** temporary structures, list ADL(s):

Year-Round Seasonal, from Approx. _____ to _____, annually.

	Temporary New Structures Quantity	Existing Structure Quantity	Use (Shop, office, etc.)	Dimensions (ft x ft)	Dimensions (ft x ft)	Dimensions (ft x ft)
Framed						
Tent	1		Kitchen, Living area	50	50	
Trailer						
Platforms	1		Landing	250	250	
Out-Buildings	2		Outhouse			
Other:	Bus/Rv/Connex		Living area / Storage			

* If Required, list any other structures on a separate sheet, include dimensions, use, and type.

Grey Water and Biological Waste - Describe storage and proposed method of disposal (e.g., leach line, septic, holding tank, or pit privy):

Outhouse's will all be pit based.

Solid Waste - Describe the types of waste that will be generated on-site including garbage, scrap metal, industrial; and describe its disposal method. **Note: For on-site disposal on state land, additional authorization is required by DEC and DNR outside of the APMA.** All waste such as Garbage, Scrap, Etc will be removed and disposed of off site.

What is the distance grey water, biological, and solid waste will be located from the ordinary high water mark of the nearest freshwater body (lake, stream, river, rivulet, etc.), or the mean high water mark of a saltwater body: 500ft

Will there be any use of animals (horses, dogs, goats/sheep, etc)? Yes No

Required: Dismantle and Removal for Structures: Provide a plan for dismantling and removing structures, equipment, and storage tanks. Include the method and timeline for restoration of all location areas. End of season Teardown, Storage and removal of . Reclamation to be done as operation goes.

MINING METHOD

(19)

 Mechanical Placer Mining (e.g., terrestrial open-cut operations with dozer or excavator, etc.)

Estimated cubic yards processed annually: 4.5 acre

 Suction Dredge Mechanical Dredge (e.g., excavator or clam-shell)

List all suction and mechanical dredges. If information is not applicable, write "N/A." Attach extra sheet if necessary.

	Dredge 1		Dredge 2		Dredge 3	
Vessel ID (Name or Number)						
Vessel Dimensions						
Suction Dredge Intake Nozzle Diameter / Pump Size	Inches:	HP:	Inches:	HP:	Inches:	HP:
Mechanical Dredge Bucket Volume	Cubic Yards:		Cubic Yards:		Cubic Yards:	
Processing Rate	Yds. ³ /Hr.:		Yds. ³ /Hr.:		Yds. ³ /Hr.:	
Wastewater Discharge Rate	GPM:		GPM:		GPM:	
Maximum Water Depth	Feet:		Feet:		Feet:	
Average Daily Operating Hours						
Operation on Sea Ice (Yes/No)	Yes <input type="checkbox"/> / No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> / No <input type="checkbox"/>	
Vessel Registration # / State	#:	State:	#:	State:	#:	State:

Location: Offshore / Salt Water Pond connected to stream
 Stream Pond isolated from stream
 Mine cut isolated from stream

PLACER EXPLORATION DRILLING AND TEST PITS

(20)

Please provide topographic maps showing drilling and/or test pit locations that corresponds with the table below. Maps should (at minimum) have labeled Mineral Properties and labeled locations of proposed activities.

Methodology and reclamation of exploration activities must be described in the placer narrative.

Test Pits: Yes No

How long will the test pit be open if not converted into an active mine cut? by end of season.

Estimated number of pits to be excavated: 10

Average Size: Length: 25 Ft. Width: 25 Ft. Depth: 20 Ft.

Placer Drilling: Yes No

Total number of holes to be drilled:

Type of drill(s) used: Hand Augers/Core Drill

Drilling and Test Pit Identification and Mineral Property Information

Trench/Hole ID on Map	ADL/BLM/USMS NUMBER
62.5775n 150.9402w	739916
62.5768N 150.9458W	739916
62.5760N 150.9403W	739916
62° 34' 45"N 150° 56' 34"W	742418
62° 34' 22"N 150° 56' 04"W	742719
62° 55' 37"N 150° 55' 37"W	742420
62° 34, 16" N 150° 55, 30"W	742420

If more than 8 Pits/drill sites, please provide data in tabular format

EXPLOSIVES

(21)

Will explosives be used? Yes No If "Yes", Indicate: Type: _____ Amount: _____

Explosive Handler's Certification/ATF Permit Numbers: _____

Describe your blast design, blast schedule, and explosives handling plan in the project narrative.

WATER ENTRAPMENT

(22)

Will you be capturing water for use in mining operations? Yes No The entrapment is: Existing To be constructed

Where does the water have a potential to be stored? Above ground Below ground level Both

If above ground, what is the Length 40 ft Height 10 ft Width at crest 20 ft Width at base 15 ft of the berm(s)

What is the purpose of the water use? Makeup water pond Settling/recycle pond Stream diversion Other _____

How long do you expect for the entrapment to be in place Permanent 1-3 years 3-5 years 5 or more

If above ground, how many acre-feet is the maximum capacity of water stored from ground level to crest of the berm? 5

Total volume in acre-feet = surface area (acres) x average depth (feet) (1 acre = 43,560 square feet)

Where is the topographic location of the water storage area? Valley bottom Hillside

If on a hillside, Approximately how many feet is the water storage above the valley floor 50 ft

IN-STREAM ACTIVITIES and STREAM CROSSINGS

(23)

List any equipment (refer to Box 15 if necessary) that will be crossing streams (including low-water crossings along established trails/roads) or used in any natural waterbody or used in-stream:

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List all stream crossings, suction dredge or pump locations, including unnamed streams.

	Stream Name/ Water Source	NAD 83 Datum (approximate) Coordinates can be obtained using Alaska Mapper http://dnr.alaska.gov/mapper/controller		MTRSC ¼ ¼ Ex: F001S001N01 SWSW	Check boxes to indicate type(s) of activity		
		Latitude ddd.mmmm	Longitude -ddd.mmmm		Crossing	Dredging	Water Intake
1.	Upper Cache	62.5628N	150.8892w	S 29N 9W 36	<input checked="" type="checkbox"/>		
2.							
3.							
4.							
5.							

If in-stream activities and/or stream crossings are requested at more than 5 locations, please provide tabular data format.

