STATE OF ALASKA
2025
Application for Permits to Mine in Alaska (APMA)

☐ Single Year ____ ☒ Multi-year Start: 2025 Finish: 2030 APMA Number (A/F/J,Year,****) 2226

(1) What type activity are you planning to perform? *REQUIRED

- ☐ Suction Dredging/Reclamation
- ☒ Placer Mining/ Reclamation
- ☐ Hardrock Exploration/ Reclamation
- ☐ Reclamation Only
- ☐ Access

(2) Surface estate of mineral properties: *REQUIRED

- ☒ State (General)
- ☐ Federal
- ☐ State (Mental Health)
- ☐ Private
- ☐ City or Borough

(3) Check All That Apply: ☒ Mineral Property Owner ☒ Lessee ☒ Operator *Required

Name: James Stansell
Address: Po Box 8, Eagle, AK 99738
Primary Phone Number: 907-505-3044
Secondary Phone Number:
Email: James4775@yahoo.com

Click here for the Department of Commerce Link

Alaska Business/Corporation Entity#____ Registered Agent (Corp./LLC/LP)____

(4) Check All That Apply: ☐ Mineral Property Owner ☐ Lessee ☒ Operator *Required

Name: Garrett Stansell
Address: 2839 winstead DR, Tittusville FL 32796 (↳ Winstead)
Primary Phone Number: 321-747-8482
Secondary Phone Number:
Email: GarrettStansell9700@gmail.com

Alaska Business/Corporation Entity#____ Registered Agent (Corp./LLC/LP)____

(5) Check All That Apply: ☒ Mineral Property Owner ☐ Lessee ☐ Operator *Required

Name: Robert Handley
Address: Box 900 Homer, AK 99603
Primary Phone Number: (907) 299-6117
Secondary Phone Number:
Email: bobbox n37@gmail.com

Alaska Business/Corporation Entity#____ Registered Agent (Corp./LLC/LP)____

(6) Check All That Apply: ☐ Mineral Property Owner ☐ Lessee ☐ Operator *Required

Name:
Address:
Primary Phone Number:
Secondary Phone Number:
Email:

Attach a separate sheet for additional contacts

Alaska Business/Corporation Entity#____ Registered Agent (Corp./LLC/LP)____

(7) Project Name If Applicable:

(8) Average Number of Workers: *REQUIRED
2

(9) Start-Up/Shut Down: (Month/Day)
April 1st to October 31st

(10) Mining District: *REQUIRED
Fourtymile

(11) Applicable USGS Map(s): *REQUIRED
Eagle A1

(12) On What Stream Is This Activity?
Warner creek

(13) 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
Copper River, 28N, 20E, 36

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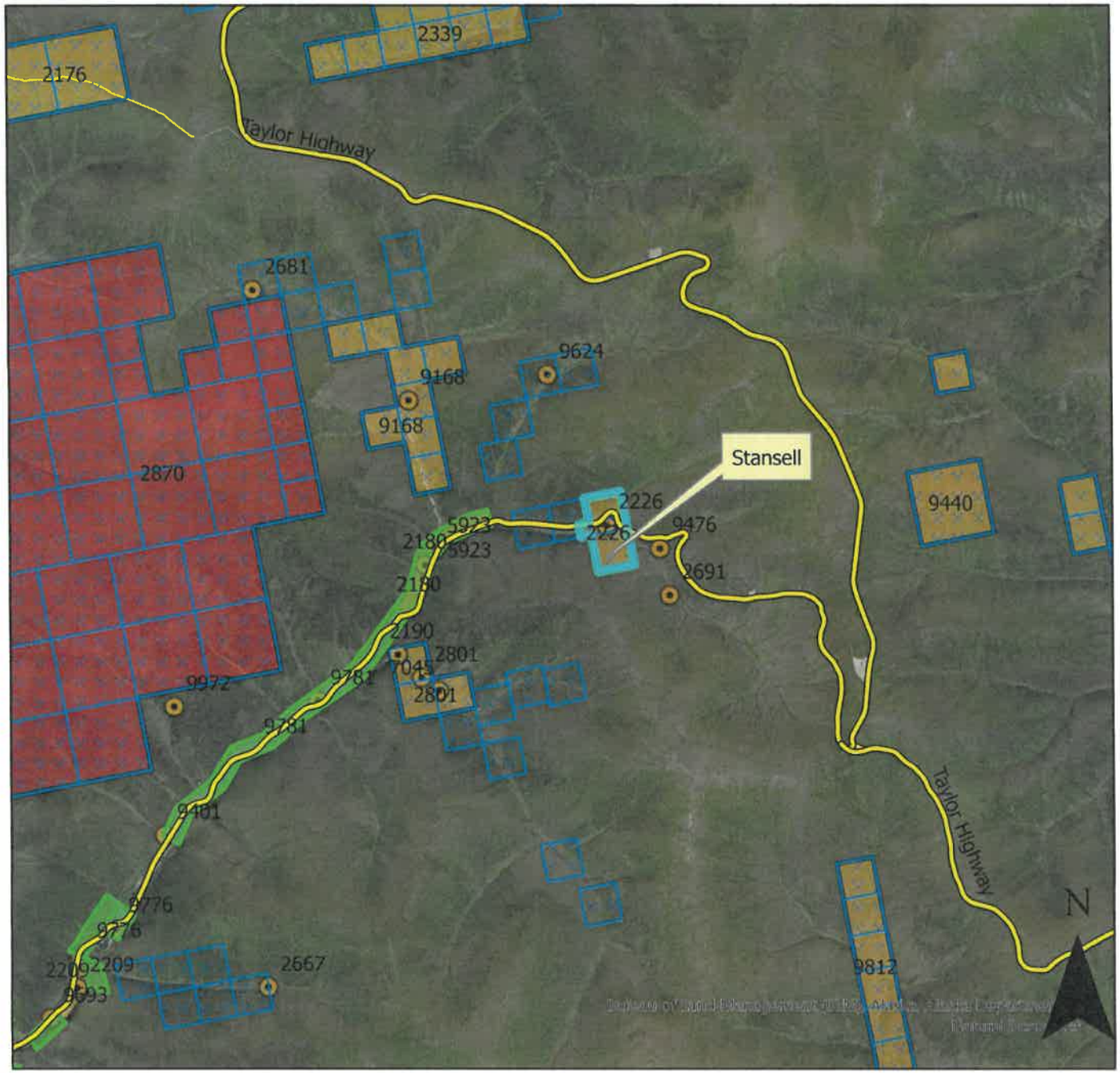
Nat... Resources

Internal Use Only:
Date Application Received Complete:____ Adjudicator:____ LAS Entry:____
Sec 3 CID: 58222 Sec 4 CID: 109618 Sec 5 CID:____ Sec 6 CID:____

APMA 2226 Active Area



This map was created on 6/17/2026 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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Scale: 1:63,360

Legend

- APMA_Type
- APMA_Project
- Mechanical Placer Mining
- Hardrock Exploration
- Suction Dredge / Dredging
- State Mining Claim Active
- BLM AK Federal Mining Claims (Active)
- Roads_AKDOT
- RS2477 Historic
- Access Route

0 0.75 1.5 Miles

Center: 141°23'44"W 64°9'50"N

State of Alaska

Application for Permits to Mine in Alaska

Amendment

Date: 06/04/2026

Amendment # 1

APMA: 2226

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

Add ADL 615100 to continue the exact same scope of work further down the valley. no change to operations at this time. added claim owner to new page 7

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MV_ST_MINING

Source: Alaska Department of Natural Resources, Information Resource Managment

Case ID	Case Status Description	Case Type Description	Claim Name	Customer Name	Notepost Date	Special Code Description	Total Acres
ADL 615100	Active (35)	Mining Claim (713)	LITTLE WARNER FRACTION	Handley Robert (Bob)	01-JUN-10	Mining Claim (MC)	3
ADL 627795	Active (35)	Mining Claim (713)	1	Stansell James	12-OCT-20	Mining Claim (MC)	40
ADL 627796	Active (35)	Mining Claim (713)	#2	Stansell James	12-OCT-20	Mining Claim (MC)	40

END OF REPORT

Report Information

Source ID	60
Source Name	MV_ST_MINING
Source Description	
Run Date and Time	06/17/2026 01:38:45 AKDT
Record Count	3

SQL Statement

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CASE_ID,CASE_STATUS,CASE_STATUS_DESCRIPTI
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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.	615100	Little warner Fraction	7.		
2.			8.		
3.			9.		
4.			10.		
5.			11.		
6.			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.

	Make, Model, Type, Size, Purpose of Equipment or Pump	Quantity of this type	Check One: Located on the claim block?	Check One: Transporting to claim block?
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

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:_____

☐ 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

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

Road(s) ☐ Helicopter Pad ☐ Airstrip ☐ No Improvments or Construction Proposed ☐

NOTICE OF OPERATOR AUTHORIZATION -- MINERAL LOCATIONS

All operators or lease holders submitting APMAs for operations on mineral locations must submit a "Notice of Authorization" from the owner of record. This notice of authorization must name the operator and leaseholder (if different), the mineral properties by their designation (*e.g.;* ADL, AKFF, USMS, MTRS) and the time frame (beginning and ending dates) for which the authorization remains in effect. The Division of Mining, Land & Water will only issue a mining authorization for private land, per 11 AAC 97.310.(7), after notarized receipt of this Notice. **Please include it with your APMA.**

OPERATOR AUTHORIZATION **APMA#** _____

I, Robert (Bob) Handley, OWNER of mineral property(s):

Check Type of Mineral Property(s)
- [X] State ADL
- [ ] Federal AKFF/AKAA
- [ ] USMS
- [ ] MTRS (Native Lands)

List all mineral properties by their casefile number (ADL/AKFF/USMS) or legal description (MTRS).

615100

(Attach additional sheet if necessary)

Have authorized James Stansell.

Address of Operator P.O. BOX 8 EAGLE, AK 99738.

to operate on these claims from 05/05/26 to 12/31/26

Owner's Signature Robert E Handley Date MAY 12, 2026

NOTARY

Subscribed and sworn to before me this 12TH day of MAY, 2026.

For (owner)

(Signature of Notary) _____.

My commission expires: 10 MAR 2030

SCOTT STEAD
My Commission Expires
NOTARY PUBLIC
Mar 10, 2030
STATE OF ALASKA

OR (If the LESSEE and OPERATOR are not the same, both sections must be completed)

I, _____, LESSEE of mineral property(s) :

Check Type of Mineral Property(s)
- [ ] State ADL
- [ ] Federal AKFF/AKAA
- [ ] USMS
- [ ] MTRS (Native Lands)

List all mineral properties by their casefile number (ADL/AKFF/USMS) or legal description (MTRS).

(Attach additional sheet if necessary)

have authorized _____ to operate on these claims from __/__/__ to __/__/__.

Lessee's Signature _____ Date _____

Lessee's Address _____.

NOTARY:

Subscribed and sworn to before me this _____ day of _____, 20 ___.

For (Lessee)

(Signature of Notary) _____.

My commission expires:

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