

STATE OF ALASKA  
2026

Application for Permits to Mine in Alaska (APMA)

☐ Single Year ☒ Multi-year Start: 2023 Finish: 2027 APMA Number (A/F/J, Year, \*\*\*\*) 9783

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| What type activity are you planning to perform? *REQUIRED (1) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input type="checkbox"/> Suction Dredging/Reclamation<br/> <input checked="" type="checkbox"/> Placer Mining/ Reclamation<br/> <input type="checkbox"/> Hardrock Exploration/ Reclamation         </div> <div style="width: 45%;"> <input type="checkbox"/> Reclamation Only<br/> <input type="checkbox"/> Access         </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                               | Surface estate of mineral properties: *REQUIRED (2) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> State (General)<br/> <input type="checkbox"/> Federal         </div> <div style="width: 45%;"> <input type="checkbox"/> State (Mental Health)<br/> <input type="checkbox"/> Private<br/> <input type="checkbox"/> City or Borough         </div> </div> |  |
| Check All That Apply: <input checked="" type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Operator <input type="checkbox"/> Agent/Consultant *Required (3) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Name: <u>STEVEN GAUGRA</u><br/>           Address: <u>349 Well St</u><br/> <u>FBK AK 99701</u> </div> <div style="width: 45%;">           Primary Phone Number: <u>907-888-6223</u><br/>           Secondary Phone Number: _____<br/>           Email: <u>SRGAUGRA11@GMAIL.COM</u> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Click here for the Department of Commerce Link<br/>           Alaska Business/Corporation Entity# _____         </div> <div style="width: 45%;">           Is the Agent/Consultant the Primary Contact <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>           Registered Agent (Corp./LLC/LP) _____         </div> </div> |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Check All That Apply: <input type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Operator *Required (4) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Name: _____<br/>           Address: _____         </div> <div style="width: 45%;">           Primary Phone Number: _____<br/>           Secondary Phone Number: _____<br/>           Email: _____         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Alaska Business/Corporation Entity# _____         </div> <div style="width: 45%;">           Registered Agent (Corp./LLC/LP) _____         </div> </div>                                                                                                                                                                                                                                                                                                                 |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Check All That Apply: <input type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Operator *Required (5) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Name: _____<br/>           Address: _____         </div> <div style="width: 45%;">           Primary Phone Number: _____<br/>           Secondary Phone Number: _____<br/>           Email: _____         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Alaska Business/Corporation Entity# _____         </div> <div style="width: 45%;">           Registered Agent (Corp./LLC/LP) _____         </div> </div>                                                                                                                                                                                                                                                                                                                 |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Check All That Apply: <input type="checkbox"/> Mineral Property Owner <input type="checkbox"/> Lessee <input type="checkbox"/> Operator *Required (6) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Name: _____<br/>           Address: _____         </div> <div style="width: 45%;">           Primary Phone Number: _____<br/>           Secondary Phone Number: _____<br/>           Email: _____         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;">           Attach a separate sheet for additional contacts<br/>           Alaska Business/Corporation Entity# _____         </div> <div style="width: 45%;">           Registered Agent (Corp./LLC/LP) _____         </div> </div>                                                                                                                                                                                                                                                  |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Project Name If Applicable: (7)<br><u>ESTRELLA MINE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Average Number of Workers: *REQUIRED (8)<br><u>2/3</u>        | Start-Up/Shut Down: (Month/Day) (9)<br><u>MAY 1</u> to <u>SEPT 31</u>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Mining District: *REQUIRED (10)<br><u>FAIRBANKS</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Applicable USGS Map(s): *REQUIRED (11)<br><u>Livengood A1</u> | On What Stream Is This Activity? (12)<br><u>FAIRBANKS CR</u>                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Legal Description of mineral properties to be worked (MTRS) *REQUIRED (13)<br><small>Example: Fairbanks Meridian Township 001N Range 003E Sections 15, 16, and 21 or F 001N 003E Sec. 15, 16, and 21</small><br><u>003N 003E sec. 28 of FAIRBANKS Meridian</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                               | Internal Use Only:                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Internal Use Only:<br>Date Application Received Complete: _____ Adjudicator: _____ LAS Entry: _____<br>Sec 3 CID: _____ Sec 4 CID: _____ Sec 5 CID: _____ Sec 6 CID: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

State of Alaska  
Application for Permits to Mine in Alaska  
Amendment

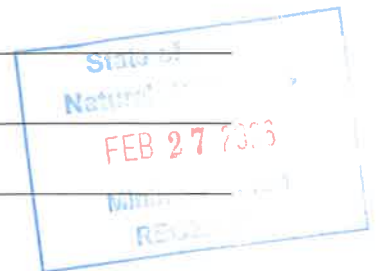
Date: 2/27/2026

Amendment # #1

APMA: ~~#1~~ 9783

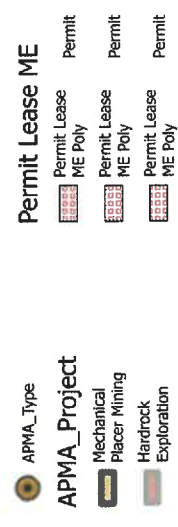
Please describe your proposed amendment and attach all required forms from the APMA application.

would like To Build A WATER ENTRAPMENT  
ON FAIRBANKS CREEK. BY EXCAVATING  
A PIT 20' X 20' IN THE CREEK BED TO TRAP  
WATER FOR PUMPING AND RUNNING A  
WASH PLANT.



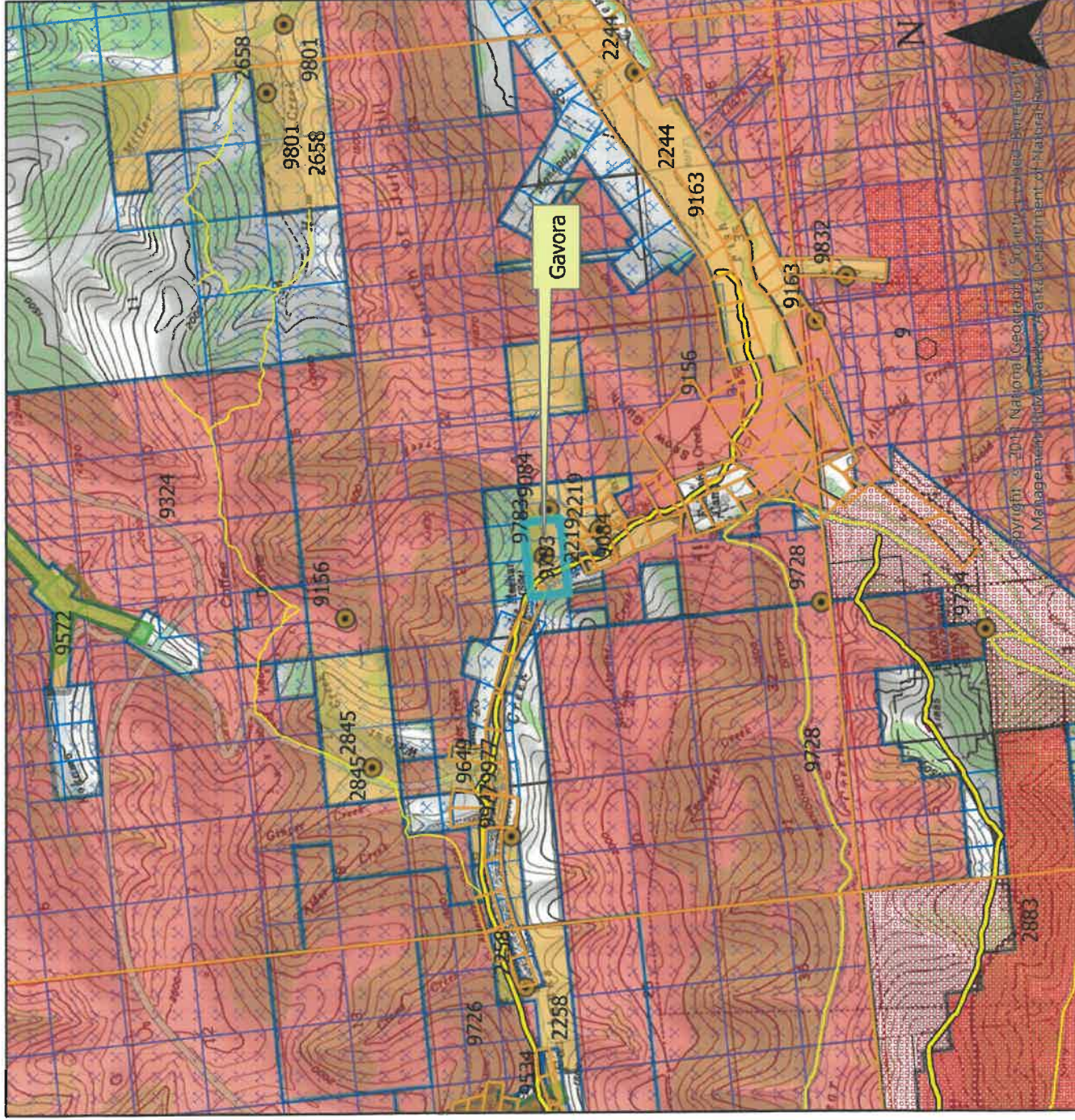
The State of Alaska makes no express or implied warranties (including warranties of merchantability and fitness) with respect to the character, function, or capabilities of electronic services or products or their appropriateness for any user's purposes. In no event will the State of Alaska be liable for any incidental, indirect, special, consequential or other damages suffered by the user or any other person or entity whether from the use of the electronic services or products, any failure thereof or otherwise, and in no event will the State of Alaska's liability to the requestor or anyone else exceed the fee paid for the electronic service or product.

### Legend



A horizontal scale bar with tick marks at 0, 0.75, and 1.5 Miles.

Center: 147°9'4"W 65°3'50"N



Management: Dr. V. S. Rao, Zonal Department of Natural Resources

## MV\_ST\_MINING

Source: Alaska Department of Natural Resources, Information Resource Management

| Case ID    | Case Status Description | Case Type          | Description        | Claim Name           | Customer Name          | Notepost Date | Special Code Description | Total Acres |
|------------|-------------------------|--------------------|--------------------|----------------------|------------------------|---------------|--------------------------|-------------|
| ADL 502506 | Active (35)             | Mining Claim (713) | Mining Claim (713) | LEFT OVERTURE 2      | Gavora Steven R        | 05-SEP-84     | Mining Claim (MC)        | 40          |
| ADL 503119 | Active (35)             | Mining Claim (713) | Mining Claim (713) | LEFT OVERTURE 3      | Gavora Steven R        | 05-SEP-84     | Mining Claim (MC)        | 40          |
| ADL 600921 | Active (35)             | Mining Claim (713) | Mining Claim (713) | NO 8 BELOW DISCOVERY | Alder Creek Mines, Llc | 01-SEP-99     | Mining Claim (MC)        | 23          |
| ADL 600922 | Active (35)             | Mining Claim (713) | Mining Claim (713) | JAMES FRACTION       | Alder Creek Mines, Llc | 01-SEP-99     | Mining Claim (MC)        | 7           |
| ADL 604261 | Active (35)             | Mining Claim (713) | Mining Claim (713) | FGDC6                | Eagan Daniel Peter     | 04-JAN-01     | Mining Claim (MC)        | 20          |

\*\*\*END OF REPORT\*\*\*

### Report Information

|                    |                          |  |  |  |  |  |  |  |
|--------------------|--------------------------|--|--|--|--|--|--|--|
| Source ID          | 60                       |  |  |  |  |  |  |  |
| Source Name        | MV_ST_MINING             |  |  |  |  |  |  |  |
| Source Description |                          |  |  |  |  |  |  |  |
| Run Date and Time  | 09/23/2026 09:08:35 AKDT |  |  |  |  |  |  |  |
| Record Count       | 5                        |  |  |  |  |  |  |  |

### SQL Statement

|                                                         |  |  |  |  |  |  |  |  |
|---------------------------------------------------------|--|--|--|--|--|--|--|--|
| CASE_ID,CASE_STATUS,CASE_STATUS_DESCRIPTION,CS_LABEL,CA |  |  |  |  |  |  |  |  |
|---------------------------------------------------------|--|--|--|--|--|--|--|--|

Gavora's claims have seniority

# 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 being stored? ☒ Above ground ☐ Below ground level ☒ Both

If above ground, what is the Length 20' ft Height 6-8' ft Width at crest 20' ft Width at base 10' ft of the berm(s)

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

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? \_\_\_\_\_

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 \_\_\_\_\_ 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:

EXCAVATOR + ASIDE PUMP

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

|    | Stream Name/<br>Water Source | NAD 83 Datum (approximate) Coordinates can<br>be obtained using Alaska Mapper<br><a href="http://dnr.alaska.gov/mapper/controller">http://dnr.alaska.gov/mapper/controller</a> |                        | MTRSC ¼ ¼<br>Ex: F001S001N01 SWSW | Check boxes to indicate<br>type(s) of activity |                          |                                     |
|----|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------|------------------------------------------------|--------------------------|-------------------------------------|
|    |                              | Latitude<br>ddd.mmmm                                                                                                                                                           | Longitude<br>-ddd.mmmm |                                   | Crossing                                       | Dredging                 | Water<br>Intake                     |
| 1. | <u>FAIRBANKS CR.</u>         | <u>65.0628 N</u>                                                                                                                                                               | <u>147.1559 W</u>      | <u>F.003N 003W</u>                | <input type="checkbox"/>                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. |                              |                                                                                                                                                                                |                        |                                   | <input type="checkbox"/>                       | <input type="checkbox"/> | <input type="checkbox"/>            |
| 3. |                              |                                                                                                                                                                                |                        |                                   | <input type="checkbox"/>                       | <input type="checkbox"/> | <input type="checkbox"/>            |
| 4. |                              |                                                                                                                                                                                |                        |                                   | <input type="checkbox"/>                       | <input type="checkbox"/> | <input type="checkbox"/>            |
| 5. |                              |                                                                                                                                                                                |                        |                                   | <input type="checkbox"/>                       | <input type="checkbox"/> | <input type="checkbox"/>            |

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

## WATER USE AUTHORIZATIONS

If water is impounded, withdrawn, or diverted, the ADNR Water Resources Section needs to review the water sources and water uses to determine if a water use authorization is needed. Water usage (including from 100% recycle pond systems) may require approval by issuing a Temporary Water Use Authorization (TWUA) or a Water Right. Information provided below will be used to determine the quantity of water that you may be authorized to use for your mining operation. When estimating water quantities, please estimate withdrawal amounts typical of a dry summer and provide the maximum quantity that you may withdraw from a particular source (e.g., stream, pond, groundwater, etc.) in a season. A TWUA application may be initiated from this APMA, unless a Water Right is requested. Please contact the ADNR, Water Resources Section at telephone number (907) 451-2790 for more information.

- Is there a current Water Right within the proposed mineral property boundary? Yes ☒ No ☐
- If yes, provide the LAS or ADL Water Right Case File number: TWUA F2023-031
- What are the months of water use needed (for example May 1<sup>st</sup> through October 31<sup>st</sup>)? May 1 - Oct. 1

### Name & Location of Water Source(s):

- If water is required to fill or to maintain water in the recycle/settling pond system check the applicable box (table below in part A) for each water source used. Please note that a recycle/settling pond system is a water source (5 sources per TWUA). Stormwater from rainfall or snowmelt do not require water use authorizations.
- Identify each water source and its geographic location using MTRS. Include Lat/Long coordinates if available.

Example: Finger Lake: Fairbanks Meridian, Township 3 North, Range 3 West, Section 20.  
MTRS: F3N3W 20

Lat/Long: 65° 4' 15" N; 148° 12' 43" W

**A. Name & Location of Water Source(s).** No more than 5 water sources per TWUA. Attach list of additional sources if needed. A \$450 fee is associated with each TWUA. The APMA paperwork is all that is needed to apply for TWUAs. For example, if there are 20 sources listed in the APMA, 4 TWUA case files will be generated. **When submitting an APMA, a separate Application for Temporary use of Water form is not needed.**

| Provide the geographic name or locally know name of water Source. (Recycle/settling ponds, creek, stream, well, etc.)<br><br>If requesting a stream reach, clearly identify the entire stream reach on a legible map. | Meridian                  | Township    | Range       | Section(s)                   | Start-Up Water and/or Make-Up Water? Check each applicable box. |                                     |         |                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------|-------------|------------------------------|-----------------------------------------------------------------|-------------------------------------|---------|-------------------------------------|
| <u>Example:</u><br>Unnamed Creek                                                                                                                                                                                      | F                         | 3N          | 3W          | 20                           | Start-Up                                                        | <input checked="" type="checkbox"/> | Make-Up | <input checked="" type="checkbox"/> |
| 1.<br><br><u>FAIRBANKS Creek</u>                                                                                                                                                                                      | <u>FBK</u>                | <u>003N</u> | <u>003W</u> | <u>28</u>                    | Start-Up                                                        | <input checked="" type="checkbox"/> | Make-Up | <input checked="" type="checkbox"/> |
|                                                                                                                                                                                                                       | Latitude: <u>65.0628N</u> |             |             | Longitude: <u>147.1559 W</u> |                                                                 |                                     |         |                                     |
| 2.                                                                                                                                                                                                                    |                           |             |             |                              | Start-Up                                                        | <input type="checkbox"/>            | Make-Up | <input type="checkbox"/>            |
|                                                                                                                                                                                                                       | Latitude:                 |             |             | Longitude:                   |                                                                 |                                     |         |                                     |
| 3.                                                                                                                                                                                                                    |                           |             |             |                              | Start-Up                                                        | <input type="checkbox"/>            | Make-Up | <input type="checkbox"/>            |
|                                                                                                                                                                                                                       | Latitude:                 |             |             | Longitude:                   |                                                                 |                                     |         |                                     |
| 4.                                                                                                                                                                                                                    |                           |             |             |                              | Start-Up                                                        | <input type="checkbox"/>            | Make-Up | <input type="checkbox"/>            |
|                                                                                                                                                                                                                       | Latitude:                 |             |             | Longitude:                   |                                                                 |                                     |         |                                     |
| 5.                                                                                                                                                                                                                    |                           |             |             |                              | Start-Up                                                        | <input type="checkbox"/>            | Make-Up | <input type="checkbox"/>            |
|                                                                                                                                                                                                                       | Latitude:                 |             |             | Longitude:                   |                                                                 |                                     |         |                                     |

# **WATER USE AUTHORIZATIONS CONT.**

(24)

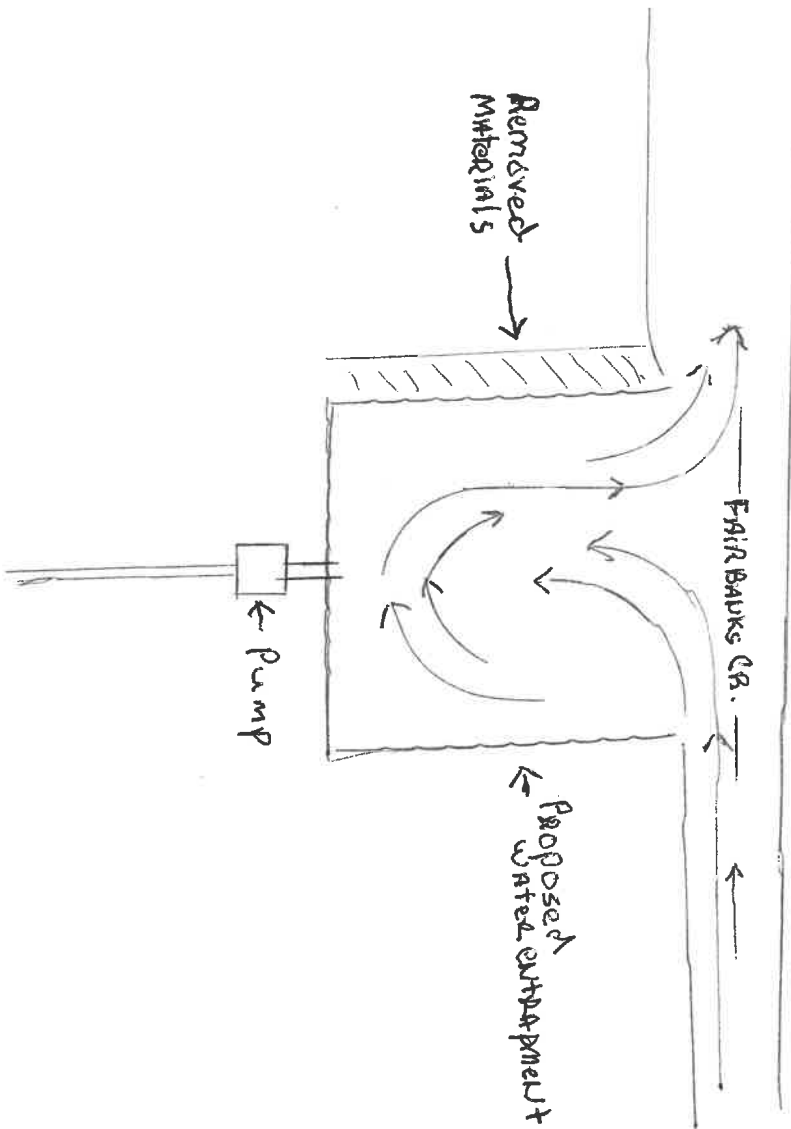
**B. Water Use Activities.** Complete applicable information for each source. For recycle/settling pond system complete part C. **Recycle/Settling Pond System.** For stream diversions also complete Section 29.

| Geographic Name of Water Source<br>(Same as sources Above).<br><br>Describe the water use information for each source. For recycle/settling pond system complete Section C. | Diversion<br>(gpm/cfs) | Withdrawal<br>Rate<br>(gpm/pump) | Number of<br>Pumps | Hours per Day | Days per Month |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------|--------------------|---------------|----------------|
| 1.<br>Water Intake                                                                                                                                                          |                        | 2500 GPM                         | 1                  | 8-10          | 20             |
| 2.<br>Cut Dewatering                                                                                                                                                        |                        | 500 GPM                          | 1                  | 8-10          | 20             |
| 3.                                                                                                                                                                          |                        |                                  |                    |               |                |
| 4.                                                                                                                                                                          |                        |                                  |                    |               |                |
| 5.                                                                                                                                                                          |                        |                                  |                    |               |                |

| C. Recycle/Settling Pond System                                                                                                                                                                                                                                                                              | Withdrawal Rate<br>(gpm/pump)           | Number of<br>Pumps | Hours per<br>Day | Days per<br>Month                       | Additional Notes: |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------|------------------|-----------------------------------------|-------------------|
| This system will also need to be listed as a water source in Section A. This entire pond system counts towards the 5 sources allowed per TWUA. Provide Length (L), Width (W), and Depth (D), of each pond. Beaver ponds or similar nature made impoundments will not be permitted for use as settling ponds. |                                         |                    |                  |                                         |                   |
|                                                                                                                                                                                                                                                                                                              | Pond # 1: L: ___ ft W: ___ ft D: ___ ft |                    |                  | Pond # 2: L: ___ ft W: ___ ft D: ___ ft |                   |
|                                                                                                                                                                                                                                                                                                              | Pond # 3: L: ___ ft W: ___ ft D: ___ ft |                    |                  | Pond # 4: L: ___ ft W: ___ ft D: ___ ft |                   |

| D. Camp Water Uses                                                                                                                                         | Maximum<br># of People<br>in Camp | Withdrawal<br>Rate<br>(gpm/pump) | Number<br>of<br>Pumps | Hours per<br>Day | Days per<br>Month | Source(s) of Water<br><br>Well, Haul, Stream, Spring, Lake<br><br>Source(s) will count towards the 5 sources identified in Section A. |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------|-----------------------|------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Provide information on camp water uses. If an ADEC public drinking water system is used, please attach certificate to operate and/or associated documents. |                                   |                                  |                       |                  |                   |                                                                                                                                       |
|                                                                                                                                                            | Additional Notes:                 |                                  |                       |                  |                   |                                                                                                                                       |

VICINITY MAP



APMA #

ADLs:

(Attach additional sheets, along with detailed explanations as necessary)