



SURETY BOND

Bond Number: _____ Issued pursuant to the Arkansas Open-Cut Land Reclamation Act

KNOW ALL PERSONS BY THESE PRESENTS, that _____, as Principal, Name of Principal

and _____, as Surety, are held and firmly bound Name of Surety

to the Arkansas Department of Energy & Environment (Department), as Obligee, in the penal sum of _____ Dollars (\$ _____), lawful money of the United States of America to be paid to the Obligee, for which payment we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally.

WHEREAS, the Principal has applied to the Department for a permit to engage in open-cut mining at the _____ mine as required by Name of Mine

the Arkansas Open-Cut Land Reclamation Act (the "Act"), and has filed with the Department a plan for reclamation of any lands affected;

NOW, THEREFORE, the condition of this obligation is such, that if the Principal shall faithfully perform all requirements of the Act and the Open-Cut Mining and Land Reclamation Rule (Rule) promulgated in accordance with the provisions of the Act and shall reclaim all affected lands in accordance with the Act and the Rule, then this Obligation shall be null and void, otherwise to remain in full force and effect.

The Surety shall on an annual basis from the date of bond issuance notify the Obligee and the Principal that the bond remains in effect.

The Surety may cancel this bond at any time by filing with the Department ninety (90) days prior to cancellation, a written notice of its desire to be relieved of liability provided, however, that this bond shall not be canceled and shall continue in full force and effect with respect to lands which have become affected lands under the provisions of the Act prior to the expiration of the ninety (90) day notice period unless replaced by another bond instrument by the Principal.

Date this _____ day of _____, _____

Principal: _____ Officer's Signature: _____ Officer's Name: _____ Officer's Title: _____ Date Signed: _____

Surety: _____ Official's Signature: _____ Official's Name: _____ Official's Title: _____ Street Address: _____ Phone Number: _____ Date Signed: _____