GTAC
GOGEBIC TACONITE

June 24, 2014

Wisconsin Department of Natural Resources
ATTN: Mr. Larry Lynch – WA/5
101 South Webster Street
PO Box 7921
Madison, WI 53707-7921

Dear Mr. Lynch:

Re: Exploration License No. 41001
Wisconsin Statutes 295.44 (6)
GTAC Exploration No. 1
Renewal Application

Gogebic Taconite, LLC submits to your agency an Exploration License Renewal Application. Included within this application are the following:

- A Renewal License Fee of $150.00;
- Copy of the Surety Bond that Remains in effect;
- Copy of the Certificate of Insurance;
- Copy of the Recent Assets and Liabilities Statement;

Exploration 1 was completed on July 15, 2013 with hole 746-1. No changes are being proposed to the exploration plan and reclamation plan previously approved by the department.

Drillholes 726-1 & 746-1 have been completely grouted and abandoned. Completion records have been provided previously.

Six remaining exploration holes remain open for future use in the groundwater investigation. Remaining exploration hole numbers are:

- 148-R
- 608-2
- 646-3
- 674-2
- 706-1
- 706-2

Please advise if there are any questions concerning this matter.

Sincerely,

Timothy J Myers
Engineer

ATTACHMENT TO RESPONSE FOR s.295.44 (2)(f)

BALANCE SHEET

Balance Sheet
As of 12/31/2012 Gogebic Taconite, LLC (GTL)

ASSETS		
Local Imprest Fund		$45,579.34
Petty Cash		$915.57
Other Prepaid Expenses		$240,000.00
Machinery/Equip/Buildings		$13,064.46
Accumulated Depreciation		-$11,916.84
	TOTAL ASSETS	$287,642.53
LIABILITIES		
Accrued Payroll Taxes		$168.00
Long-Term Debt		$6,365,000.00
	TOTAL LIABILITIES	$6,365,168.00
EQUITY		
Member Equity		$1,175,000.00
Retained Earnings		-$7,252,525.47
	TOTAL EQUITY	-$6,077,525.47
	TOTAL LIABILITY AND EQUITY	$287,642.53

ATTACHMENT TO RESPONSE FOR s.295.44 (3)

SURETY BOND

COPY

State of Wisconsin
Department of Natural Resources

FERROUS METALLIC MINERAL EXPLORATION BOND

KNOW ALL PERSONS BY THESE PRESENTS, that GOGEBIC TACONITE, LLC (the Explorer)

of 402 SILVER STREET, HURLEY, WI 54534 (Address), as Principal, and

U.S. SPECIALTY INSURANCE COMPANY (Name of Surety Company), a surety company organized and existing under the laws of the State of TEXAS and duly authorized to do surety business in the State of Wisconsin, as Surety, are held and firmly bound unto the State of Wisconsin Department of Natural Resources, as Obligee, in the penal sum of FORTY-ONE THOUSAND FIVE HUNDRED THIRTY-FOUR AND 00/100 dollars

($ 41,534.00) for payment of which the Principal and the Surety bind themselves, their heirs, executors, administrators, successors and assigns jointly and severally.

WHEREAS, this bond is written to satisfy the requirements of section 295.44(3) Stats., to ensure compliance with the ferrous metallic mineral exploration licensing requirements, and shall inure to the benefit of the Obligee.

The insolvency or bankruptcy of the Principal shall not constitute a defense to the Surety with regard to any claim of liability on the obligation of this bond.

The Surety hereby waives notification of any failure on the part of the Principal or any successor in interest to faithfully comply with the requirements of s. 295 Stats. and lack of notice from the Obligee will not bar or limit recovery against the Surety.

This bond is effective on the 10TH day of APRIL, 2013, and shall continue in force until terminated as hereinafter provided. As long as any obligation of the Principal or any successor in interest for the ferrous metallic mineral exploration license exists, this bond shall not be cancelled by the Surety unless a replacement bond acceptable to the Obligee is provided to the Obligee. If the Surety proposes to cancel this bond, notice shall be provided to the Obligee and the Principal in writing by registered or certified mail not less than 90 days prior to the proposed cancellation date. Not less than 30 days prior to the expiration of the 90 day notice period, the Principal shall deliver to the Obligee a replacement bond. In the absence of the delivery of a replacement bond, all exploration shall cease.

Signed, sealed and dated this 10TH day of APRIL, 2013.

GOGEBIC TACONITE, LLC

William Williams

Principal

CORPORATE SEAL

U.S. SPECIALTY INSURANCE COMPANY

Surety

Janice Fennell

Attorney in Fact JANICE FENNELL

Bond Number 1000904050

Copy

POWER OF ATTORNEY

AMERICAN CONTRACTORS INDEMNITY COMPANY U.S. SPECIALTY INSURANCE COMPANY

KNOW ALL MEN BY THESE PRESENTS: That American Contractors Indemnity Company, a California corporation, and U.S. Specialty Insurance Company, a Texas corporation (collectively, the "Companies"), do by these presents make, constitute and appoint:

Jeremy C. Rose, Richard C. Rose, Janice Fennell or Tara W. Mealer of Knoxville, Tennessee

its true and lawful Attorney(s)-in-fact, each in their separate capacity if more than one is named above, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver **any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include riders, amendments, and consents of surety, providing the bond penalty does not exceed** *******Seventy Five Million******* **Dollars ($** **75,000,000.00****).

This Power of Attorney shall expire without further action on March 18, 2015. This Power of Attorney is granted under and by authority of the following resolutions adopted by the Boards of Directors of the Companies:

Be it Resolved, that the President, any Vice-President, any Assistant Vice-President, any Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements or indemnity and other conditional or obligatory undertakings, including any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts, and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be binding upon the Company as if signed by the President and sealed end effected by the Corporate Secretary.

Be it Resolved, that the signature of any authorized officer and seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signature or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached.

IN WITNESS WHEREOF, The Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this 3rd day of October, 2011.

AMERICAN CONTRACTORS INDEMNITY COMPANY U.S. SPECIALTY INSURANCE COMPANY

Corporate Seals

By: Daniel P. Aguilar, Vice President

State of California

County of Los Angeles SS:

On this 3rd day of October, 2011, before me, Deborah Reese, a notary public, personally appeared Daniel P. Aguilar, Vice President of American Contractors Indemnity Company and U.S. Specialty Insurance Company who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

Signature Deborah Reese (Seal)

DEBORAH REESE
Commission # 1926048
Notary Public - California
Los Angeles County
My Comm. Expires Mar 18, 2015

I, Jeannie Lee, Assistant Secretary of American Contractors Indemnity Company and U.S. Specialty Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Los Angeles, California this 10TH day of APRIL, 2013.

Corporate Seals

Jeannie Lee, Assistant Secretary

Bond No. 1000904050
Agency No. 16425

To inquire about this bond, please write to us at surety-bond-inquiry@hcc.com

ATTACHMENT TO RESPONSE FOR s.295.44 (2)(e)

CERTICATE OF LIABILITY INSURANCE

210173

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/9/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Cheryl Vandermosten	
Commercial Lines - (304) 252-6375	PHONE (A/C, No, Ext): 865-450-1910	FAX (A/C, No): 877-870-2914
Wells Fargo Insurance Services of West Virginia Inc.	E-MAIL ADDRESS: cheryl.vandermosten@wellsfargo.com	
41 Eagles Road	INSURER(S) AFFORDING COVERAGE	NAIC #
Beckley, WV 25801-3643	INSURER A : Federal Insurance Company	20281
INSURED	INSURER B :	
Gogebic Taconite, LLC	INSURER C :	
402 Silver Street	INSURER D :	
	INSURER E :	
Hurley, WI 54534	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 7165686 **REVISION NUMBER:** See below

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			37114535	12/31/2013	12/31/2014	EACH OCCURRENCE	$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$ 2,000,000
	X POLICY PRO-JECT LOC							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Evidence of insurance with respect to any and all permits held by the Named Insured.

CERTIFICATE HOLDER

Wisconsin Department of Natural Resources
101 S Webster Street
PO Box 7921
Madison, WI 53707

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Jeanne Brandon

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(This certificate replaces certificate# 7125930 issued on 12/31/2013)