Form No. GWS-11 1/2009 STATE OF COLORADO OFFICE OF THE STATE ENGINEER 818 Centennial Bldg., 1313 Sherman St., Denver CO 80203 Phone – Info: (303) 866-3587 Main: (303) 866-3581 Fax: (303) 866-3589 http://www.water.state.co.us CHANGE IN OWNERSHIP/ADDRESS CORRECTION OF THE WELL LOCATION	For Office Use Only					
Review instructions on the reverse side prior to completing the form.						
Name, address and phone of the person claiming ownership of the well permit						
NAME(S): Andrew Cooper						
Mailing Address: 1328 North Franklin Street						
City, St. Zip: Denver, CO. 80218						
Phone ()						
E-mail (optional):						
This form is filed by the named individual/entity claiming that they are the owner of filing is made pursuant to C.R.S. 37-90-143.						
WELL LOCATION: Well Permit Number: 3471-F Receipt Num	ber: Case Number:					
County Morgan Well Name of	or # (optional)					
9583 Highway 52, Wiggins, CO, 80654 (Address) (City)	(State) (Zip)					
SW 1/4 of the 1/4, Sec. 13 , Twp. 2 ☑ N. or ☐ S., Range 60	□ E. or ☑ W., <u>6th</u> P.M.					
Distance from Section Lines: Ft. From \square N. or \square S.,	Ft. From 🗆 E. or 🗖 W. Line.					
Subdivision Name Lot	, Block, Filing/Unit					
The above listed owner(s) say(s) that he, she (they) own the well described he the following reasons:						
☑ Change in name of owner ☑ Change in mailing address ☐ Correction of local 1972 and non-exempt wells permitted before May 17, 1965.						
Please see the reverse side for further information regarding correction of the	well location.					
I (we) claim and say that I (we) (are) the owner(s) of the well described about herein, and state that they are true to my (our) knowledge.						
Signature(s) of the new owner Please print the Signer's Nam						
Che Coope	2019-01-09					
It is the responsibility of the new owner of this well to complete and sign the form. Signatures of agents are acceptable if an original letter of agency signed by the owner is attached to the form upon its receipt.						
For Office Use Only	•					
	•					
State Engineer By	Date					

For Office Use Only Form STATE OF COLORADO No. OFFICE OF THE STATE ENGINEER **GWS-11** 818 Centennial Bldg., 1313 Sherman St., Denver CO 80203 1/2009 Phone - Info: (303) 866-3587 Main: (303) 866-3581 Fax: (303) 866-3589 http://www.water.state.co.us **CHANGE IN OWNERSHIP/ADDRESS** CORRECTION OF THE WELL LOCATION Review instructions on the reverse side prior to completing the form. Name, address and phone of the person claiming ownership of the well permit NAME(S): Andrew Cooper Mailing Address: 1328 North Franklin Street City, St. Zip: Denver, CO. 80218 Phone (_____)___-E-mail (optional): This form is filed by the named individual/entity claiming that they are the owner of the well permit as referenced above. This filing is made pursuant to C.R.S. 37-90-143. WELL LOCATION; Well Permit Number: 02942-F Receipt Number: _____ Case Number: _____ County Morgan Well Name or # (optional) 9583 Highway 52, Wiggins, CO. 80654 (State) (Zip) (Address) SW 1/4 of the ___ 1/4, Sec. <u>13</u>, Twp. <u>2</u> ☑ N. or □ S., Range <u>60</u> □ E. or ☑ W., <u>6th</u> P.M. <u>Distance from Section Lines:</u> Ft. From ☐ N. or ☐ S., _____ Ft. From ☐ E. or ☐ W. Line. Subdivision Name ______ Lot _____, Block _____, Filing/Unit _____ The above listed owner(s) say(s) that he, she (they) own the well described herein. The existing record is being amended for the following reasons: ☑ Change in name of owner ☑ Change in mailing address ☐ Correction of location for exempt wells permitted prior to May 8, 1972 and non-exempt wells permitted before May 17, 1965. Please see the reverse side for further information regarding correction of the well location. I (we) claim and say that I (we) (are) the owner(s) of the well described above, know the contents of the statements made herein, and state that they are true to my (our) knowledge. Signature(s) of the new owner Please print the Signer's Name & Title Date Andrew Coon 2019/01/09 It is the responsibility of the new owner of this well to complete and sign the form. Signatures of agents are acceptable if an original letter of agency signed by the owner is attached to the form upon its receipt. For Office Use Only

Date

State Engineer

By

Form No. GWS-11 1/2009	STATE OF COLORADO OFFICE OF THE STATE ENGINEER 818 Centennial Bldg., 1313 Sherman St., Denver CO Phone – Info: (303) 866-3587 Main: (303) 866-3 Fax: (303) 866-3589 http://www.water.	581 I	For Office Use O	nly		
	CHANGE IN OWNERSHIP/ADDRES					
Revie	w instructions on the reverse side prior to completing	the form.				
Name, addr	ess and phone of the person claiming ownership of the we	II permit				
NAME(S):	Andrew Cooper					
Mailing Ad	dress:1328 North Franklin Street					
City, St. Zij	o: Denver, CO. 80218					
Phone (_						
	ional):					
filing is mad	filed by the named individual/entity claiming that they a le pursuant to C.R.S. 37-90-143.					
WELL LOC	ATION: Well Permit Number: 8233	_ Receipt Number	r: Case Number	·		
	organ		t (optional)			
	hway 52, Wiggins, CO. 80654 (Address)	(City)	(State)			
SW1/4	of the 1/4, Sec13, Twp2_ ☑ N. or □ 5	S., Range <u>60</u> D]E. or ☑ W., <u>6th</u>	P.M.		
Distance fr	om Section Lines: Ft. From 🛘 N	. or 🏻 S.,	Ft. From 🛮 E. or 🗖	W. Line.		
Subdivision	Name	_ Lot, Bl	lock, Filing/Unit			
the following						
1972 and n	in name of owner ☑ Change in mailing address ☐ con-exempt wells permitted before May 17, 1965.			d prior to May 8,		
Please see	the reverse side for further information regarding co	rrection of the well	I location.			
I (we) clair	n and say that I (we) (are) the owner(s) of the well I state that they are true to my (our) knowledge.	described above,	know the contents of the s	tatements made		
		e Signer's Name &	& Title	Date		
	en (Andre	J Coor		Polaloiloa		
It is the responsibility of the new owner of this well to complete and sign the form. Signatures of agents are acceptable if an original letter of agency signed by the owner is attached to the form upon its receipt.						
	For Office	Use Only				
St	ate Engineer By		Date			

Form No. GWS-11

STATE OF COLORADO OFFICE OF THE STATE ENGINEER 818 Centennial Bidg., 1313 Sherman St., Denver CO 80203

For Office Use Only

1/2009	Phone – Info: (303) 866-3587 Fax: (303) 866-3589	Main: (303) 866-35 http://www.water.s	i81 tate.co.us			
	CHANGE IN OWNERS		=			
Revie	w instructions on the reverse side	prior to completing t	he form.			
Name, addr	ress and phone of the person claimin	g ownership of the well	permit			
NAME(S):	Andrew Cooper					
Mailing Ad	dress: 1328 North Franklin St	reet				
City, St. Zij	p: <u>Denver, CO. 80218</u>					
Phone (_)					
E-mail (opt	ional):			-		
	filed by the named individual/entit le pursuant to C.R.S. 37-90-143.	y claiming that they are	e the owner of	the well per	rmit as referenced	d above. This
WELL LOC	ATION: Well Permit Number: _	8232	Receipt Num	ıber:	Case Nun	nber:
County M	organ		Well Name	or#(optiona	al)	
9583 Hig	hway 52, Wiggins, CO. 80654 (Address)		(City)		(State)	(Zin)
SW 1/4	of the 1/4, Sec13, Twp	2 MN or □S				
	om Section Lines:		=			
	Name					
The above the followin	listed owner(s) say(s) that he, sh g reasons:	e (they) own the well	I described he	erein. The	existing record is	being amended for
	in name of owner ☑ Change in r on-exempt wells permitted before		orrection of loc	cation for ex	kempt wells perm	nitted prior to May 8,
Please see	the reverse side for further inform	nation regarding corre	ection of the v	well location	1.	
l (we) claim herein, and	n and say that I (we) (are) the or state that they are true to my (ou	wner(s) of the well dear	escribed abov	ve, know th	e contents of th	e statements made
Signature(s) of the new owner Please print the Signer's Name & Title				Date		
E	ulu	Andrew	Coop			2019-01-09
	consibility of the new owner of the one of the owner of the owner of agency signed by the owner				tures of agents a	are acceptable if an
		For Office Us	· · · · · · · · · · · · · · · · · · ·			
					•	
Sta	ite Engineer By				Date	

For Office Use Only Form STATE OF COLORADO No. OFFICE OF THE STATE ENGINEER **GWS-11** 818 Centennial Bldg., 1313 Sherman St., Denver CO 80203 1/2009 Phone - Info: (303) 866-3587 Main: (303) 866-3581 http://www.water.state.co.us Fax: (303) 866-3589 CHANGE IN OWNERSHIP/ADDRESS CORRECTION OF THE WELL LOCATION Review instructions on the reverse side prior to completing the form. Name, address and phone of the person claiming ownership of the well permit NAME(S): Andrew Cooper Mailing Address: 1328 North Franklin Street City, St. Zip: Denver, CO. 80218 Phone (____)___-__ E-mail (optional): This form is filed by the named individual/entity claiming that they are the owner of the well permit as referenced above. This filing is made pursuant to C.R.S. 37-90-143. WELL LOCATION: Well Permit Number: 8231 RF-554) Receipt Number: Case Number: Well Name or # (optional) 9583 Highway 52, Wiggins, CO. 80654 (State) (Zip) (Address) _<u>SW__</u>1/4 of the ____1/4, Sec. <u>__13__</u>, Twp. <u>__2</u> ☑ N. or □ S., Range <u>__60</u> □ E. or ☑ W., <u>__6th</u> _____P.M. Distance from Section Lines: _____ Ft. From ☐ N. or ☐ S., _____ Ft. From ☐ E. or ☐ W. Line. Subdivision Name ______ Lot ____, Block ____, Filing/Unit ____ The above listed owner(s) say(s) that he, she (they) own the well described herein. The existing record is being amended for the following reasons: ☑ Change in name of owner ☑ Change in mailing address ☐ Correction of location for exempt wells permitted prior to May 8, 1972 and non-exempt wells permitted before May 17, 1965. Please see the reverse side for further information regarding correction of the well location. I (we) claim and say that I (we) (are) the owner(s) of the well described above, know the contents of the statements made herein, and state that they are true to my (our) knowledge. Date Signature(s) of the new owner Please print the Signer's Name & Title 2019/01/09 Andrew Coon It is the responsibility of the new owner of this well to complete and sign the form. Signatures of agents are acceptable if an original letter of agency signed by the owner is attached to the form upon its receipt. For Office Use Only Date State Engineer

STATE OF COLORADO For Office Use Only Form No. OFFICE OF THE STATE ENGINEER **GWS-11** 818 Centennial Bldg., 1313 Sherman St., Denver CO 80203 1/2009 Phone - Info: (303) 866-3587 Main: (303) 866-3581 Fax: (303) 866-3589 http://www.water.state.co.us CHANGE IN OWNERSHIP/ADDRESS CORRECTION OF THE WELL LOCATION Review instructions on the reverse side prior to completing the form. Name, address and phone of the person claiming ownership of the well permit NAME(S): Andrew Cooper Mailing Address: 1328 North Franklin Street City, St. Zip: Denver, CO. 80218 Phone (_____)___-E-mail (optional): This form is filed by the named individual/entity claiming that they are the owner of the well permit as referenced above. This filing is made pursuant to C.R.S. 37-90-143. WELL LOCATION: Well Permit Number: 8230 Receipt Number: Case Number: _____ ______ Well Name or # (optional) _____ County Morgan 9583 Highway 52, Wiggins, CO. 80654 (Citv) (State) (Zip) (Address) _<u>SW__</u>1/4 of the ____1/4, Sec. <u>__13__</u>, Twp. <u>__2</u> ☑ N. or □_ S., Range <u>__60</u> □ E. or ☑ W., <u>__6th</u> _____P.M. <u>Distance from Section Lines</u>: _____ Ft. From □ N. or □ S., ____ Ft. From □ E. or □ W. Line.
 Subdivision Name
 ______, Filing/Unit ______
 The above listed owner(s) say(s) that he, she (they) own the well described herein. The existing record is being amended for the following reasons: ☑ Change in name of owner ☑ Change in mailing address ☐ Correction of location for exempt wells permitted prior to May 8, 1972 and non-exempt wells permitted before May 17, 1965. Please see the reverse side for further information regarding correction of the well location. I (we) claim and say that I (we) (are) the owner(s) of the well described above, know the contents of the statements made herein, and state that they are true to my (our) knowledge. Signature(s) of the new owner Please print the Signer's Name & Title Date 2019/01/09 Andrew Cooper It is the responsibility of the new owner of this well to complete and sign the form. Signatures of agents are acceptable if an original letter of agency signed by the owner is attached to the form upon its receipt. For Office Use Only State Engineer By Date