

FORM NO.
GWS-10
03/92

STATE OF COLORADO
OFFICE OF THE STATE ENGINEER
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

For Office Use only

FOR INSTRUCTIONS, SEE REVERSE SIDE

STATEMENT OF BENEFICIAL USE

WELL PERMIT NUMBER 048854-F

RECEIVED

DEC 29 1997

WATER RESOURCES
STATE ENGINEER
COLORADO

1. WELL OWNER

NAME(S) Michael + Marsha Myers
Mailing Address 12450 CR 195
City, St. Zip Salida, Colorado 81201
Phone (719) 539-7048

2. WELL LOCATION: COUNTY Chaffee OWNER'S WELL DESIGNATION

12450 CR 195 Salida CO. 81201
(Address) (City) (State) (Zip)

NE 1/4 of the SW 1/4, Sec. 10 Twp. 50 ☒ N. or ☐ S., Range 8 ☒ E. or ☐ W. NM P.M.

Distances from Section Lines 2620 Ft. from ☐ N. or ☒ S. Line, 2340 Ft. from ☐ E. or ☒ W. Line.

3. The well is being used for the following purpose(s): Household in single family dwelling
+ irrigation of not more than 2,000 sq. ft. of garden

4. Water from the well was first used beneficially
under this permit number, for the above described purposes on Dec 5 1997
(Do not report a date which is before the issued date of this permit)

5. The pumping rate claimed is 15 gallons per minute.

6. The average annual amount of water diverted is 0.391 acre feet.

7. The land area irrigated (watered) by water from this well is: 2,000 ☐ Acres or ☒ Square feet,
(Number)

described as:

or as Cedar Gate (Legal Description) #9 Block Filing/Unit
Subdivision Lot(s)

8. Well drilled by: American Drilling Lic. No: 1280

Pump installed by: American Drilling Lic. No: 1280

9. Meter Mfg. by Badger meter model #40 Serial No.: 95678088 Date Installed: Dec. 5, 97

I (we) have read the statements made herein, know the contents thereof, and state that they are true to my (our) knowledge. [Pursuant to Section 24-4-104 (13)(a) C.R.S., the making of false statements herein constitutes perjury in the second degree and is punishable as a Class 1 misdemeanor.]

10. Name/Title (Please type or print)

Michael L. Myers

Signature

Michael L. Myers

Date

Dec 21, 1997

FOR OFFICE USE ONLY

Accepted that those conditions of approval as
stated on the permit are complied with,

Hal D. Simpson

State Engineer

Court Case No.

Div. 2

Co. 08

WD 11

Basin

MD

Date

Use

JAN 15 1998

CDR CDR

INSTRUCTIONS FOR THE COMPLETION OF STATEMENT OF BENEFICIAL USE

IF THE PERMIT WAS APPROVED PURSUANT TO C.R.S. 37-90-137(2), THE STATEMENT OF BENEFICIAL USE MUST BE RECEIVED BY THE STATE ENGINEER PRIOR TO THE EXPIRATION OF THE PERMIT.

IF THE PERMIT WAS APPROVED PURSUANT TO C.R.S. 37-90-107, THE STATEMENT OF BENEFICIAL USE MUST BE RECEIVED WITHIN THREE YEARS FROM THE DATE THE PERMIT WAS ISSUED.

STATEMENTS OF BENEFICIAL USE ARE NOT REQUIRED FOR PERMITS ISSUED UNDER C.R.S. 37-90-105 OR 37-92-602.

NOTE: IF THE PERMIT WAS APPROVED PURSUANT TO C.R.S. 37-90-137(4), THEN YOU MUST USE FORM NO. GWS-18 'NOTICE OF WELL COMPLETION' AND FORM NO. GWS-19 'NOTICE OF COMMENCEMENT OF BENEFICIAL USE'.

The Statement must be typewritten or printed in **BLACK INK**. Initial and date any changes you make on the form. **INCOMPLETE FORMS ARE NOT ACCEPTABLE AND WILL BE RETURNED. ATTACH ADDITIONAL SHEETS IF MORE SPACE IS NEEDED.**

NO FEE IS REQUIRED IF THE STATEMENT IS SUBMITTED TIMELY. IF NOT SUBMITTED TIMELY, THE PERMIT MAY EXPIRE, AN APPLICATION FOR A NEW PERMIT AND ADDITIONAL FEES MAY BE REQUIRED.

The Well Permit Number must be indicated in the space provided at the top of the form.

1. Print the well owner's name and include the mailing address and phone number.
2. If the well location is different than the mailing address of the owner, include the address where the well is located. If the owner has more than one well, provide well name or number as designated by the owner; i.e. North Well. The actual well location must include 1/4, 1/4, Range, Township, Section and distances from Section lines. Mark the appropriate boxes for North or South and East or West directions.
3. Describe the use(s) to which the water has actually been applied. Permitted uses are described in the conditions of approval of the permit.
4. Enter the date of first beneficial use UNDER THIS PERMIT. This is the date water from the well was first used beneficially for the purposes described in Item 3. The date claimed cannot predate the issuance of the permit. It is not the date the form is completed, nor is it the date the well was test pumped.
5. Enter the pumping rate claimed. The rate cannot exceed the permitted maximum rate or the actual pumping rate in gallons per minute reported on the pump installation and test report, whichever is less: 449 gallons per minute is equivalent to one cubic foot of water per second.
6. Enter the annual amount of water diverted in acre feet. The amount claimed cannot exceed the physical capacity of the well or the permitted amount as limited by any conditions of approval. One acre foot is equivalent to 325,900 gallons. An ordinary home with lawn and garden irrigation diverts an average of less than one acre foot. Average in house use which does not include lawn and garden irrigation (watering) diverts 1/3 acre foot.
7. Report the area irrigated either as acres or square feet by filling in the correct number and checking the appropriate box. You must describe the specific area irrigated using either the legal description of that land or by referencing a portion of the Subdivision, Lot, Block and Filing or Unit number. Lawn and garden watering is considered irrigation. If the well is not used for irrigation, place a zero in the acres/square feet irrigated blank. One acre is equivalent to 43,560 square feet. One acre foot is equivalent to 43,560 cubic feet of water.
8. Indicate the Well Construction and Pump Installation Contractors and their License Numbers. If you did the work yourself, so indicate. You must submit work reports if you constructed the well and/or installed the pump yourself.
9. If a totalizing flow meter is required as a condition of the permit, indicate the meter manufacturer name, its serial number and the date of installation.
10. The well owner must sign the Statement. Print or type your name in the first block if it is different from Item No. 1. If signing as a representative of a company who owns the well, then your title must also be included in the first block. Sign the second block and date the last block.

If you have questions, contact the Denver Office or the Division Office where your well is located.

DIVISION 1
800 8th Ave Rm 321
Greeley CO 80631
(303) 352-8712

DIVISION 5 Box 396
50633 US Hwy 6 & 24
Glenwood Spgs CO 81601
(303) 945-5665

DIVISION 2 Box 5728
219 W 5th Rm 223
Pueblo CO 81003
(719) 542-3368

DIVISION 6 Box 773450
625 So. Lincoln Ave
Stimbt Spgs CO 80477
(303) 879-0272

DIVISION 3 Box 269
422 4th St
Alamosa CO 81101
(719) 589-6683

DIVISION 7 Box 1880
1474 Main St
Durango CO 81302
(303) 247-1845

DIVISION 4 Box 456
1540 E Niagara
Montrose CO 81402
(303) 249-6622

DENVER OFFICE
Rm 821
1313 Sherman St
Denver CO 80203
(303) 866-3581

FORM NO.
GWS-32
10/84

PUMP INSTALLATION AND TEST REPORT

STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use only
RECEIVED

JAN 26 1998

WATER RESOURCES
STATE ENGINEER
COLO

1. WELL PERMIT NUMBER ~~0479177~~ 48854-F

2. OWNER NAME(S) Mike Myers
Mailing Address 1855 W. Penn Street
City, St. Zip Iowa City, IA 52240
Phone ()

48854-F

3. WELL LOCATION AS DRILLED: NE 1/4 SW 1/4, Sec. 10 Twp. 50 N, Range 8 E
DISTANCES FROM SEC. LINES:
2620 ft. from S Sec. line. and 2340 ft. from W Sec. line.
(north or south) (east or west)
SUBDIVISION: Cedar Gate LOT 9 BLOCK FILING(UNIT)
STREET ADDRESS AT WELL LOCATION:

4. PUMP DATA: Type Submersible Installation Completed 12-18-97
Pump Manufacturer Myers Pump Model No. 3ST102-12
Design GPM 12 at RPM 3450, HP 1, Volts 230, Full Load Amps 10
Pump Intake Depth 225 Feet, Drop/Column Pipe Size 1 Inches, Kind SCH80

ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 50 GPM:

TURBINE DRIVER TYPE: ☐ Electric ☐ Engine ☐ Other
Design Head feet, Number of Stages , Shaft size inches.

5. OTHER EQUIPMENT:

Airline Installed ☐ Yes ☐ No, Orifice Depth ft. , Monitor Tube Installed ☐ Yes ☐ No, Depth ft.
Flow Meter Mfg. Badger Meter Serial No. 97316310
Meter Readout ☐ Gallons, ☐ Thousand Gallons, ☐ Acre feet, ☒ Beginning Reading 0

6. TEST DATA: ☐ Check box if Test data is submitted on Supplemental Form.
Date 12-18-97 12-18-97
Total Well Depth 240 Time 0900 1100
Static Level 54 Rate (GPM) 12 12
Date Measured 12-18-97 Pumping Lvl. 54 58

7. DISINFECTION: Type Liquid Bleach Amt. Used 1 1/2 gal circulated

8. Water Quality analysis available. ☐ Yes ☒ No

9. Remarks

10. I have read the statements made herein and know the contents thereof, and that they are true to my knowledge.
[Pursuant to Section 24-4-104 (13)(a) C.R.S., the making of false statements herein constitutes perjury in the second degree and is punishable as a class 1 misdemeanor.]

CONTRACTOR American Drilling Service Phone (719) 942-3568 Lic. No. 1280
Mailing Address 9934 Hiway 50
Howard, CO 81233

Name/Title (Please type or print)
Bradford W. Dewberry/Pres.

Signature

Bradford Dewberry

Date

1-20-98

CDR CJR

INSTRUCTIONS FOR PUMP INSTALLATION REPORT

The report must be typed or printed in **BLACK INK**. All changes on the form must be initialed and dated. Attach additional sheets if more space is required. Each additional sheet must be identified at the top by the well owner's name, the permit number, form name/number and a sequential page number. Report depths in feet below ground surface.

This form may be reproduced by photocopy methods, or by computer generation with prior approval by the State Engineer. Photocopy reproductions must retain margins and print quality of the original form.

The original form must be submitted to the State Engineer's Office within 60 days after completing the well or 7 days after the permit expiration date, whichever is earlier.

A copy of the form must be provided to the well owner.

If this form is submitted in conjunction with the Well Completion and Test Report, form number GWS-31, **ONLY THE PERMIT NUMBER AND OWNER NAME NEED TO BE COMPLETED** in items 1 and 2.

1. Complete the **Permit Number** in full.
2. Fill in **Name and Mailing Address of Well Owner** where correspondence should be sent.
3. Complete the blocks for the **actual** location of the well. For wells located in subdivisions the lot, block and subdivision information must also be provided.
4. Indicate the type of pump installed and complete the requested information. When installing pumps greater than 50 gpm, complete the additional information in this area.
5. Provide the information on other equipment which may be installed in the well.
6. Report test data as required by Rule 13.9. Spaces are provided to report all measurements made during the test. The report should show that the test complied with the provisions of the rules. If a test was not performed explain when it will be done. If available, report clock time when measurements were taken.
7. Record the type and the amount of disinfection used, how placed and the length of time left in the hole.
8. Indicate if a water quality analysis was performed and submit a copy of the report if available.
9. Use the remarks area to note any additional information including additional equipment installed, water supply construction problems.
10. Fill in **Company Name and Address of Contractor** who installed pumping equipment. The report must be signed by the licensed contractor responsible for the installation of pumping equipment.

FORM NO. GWS-31 10/94		WELL CONSTRUCTION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER		For Office Use only	
1. WELL PERMIT NUMBER 047917-F 48854-F		RECEIVED MAY 27 1997 WATER RESOURCES STATE ENGINEER COLO.			
2. OWNER NAME(S) <u>Mike Myers</u> Mailing Address <u>1855 W. Penn Street</u> City, St. Zip <u>Iowa City, IA 52240</u> Phone (719) <u>626-6206</u>					
3. WELL LOCATION AS DRILLED: <u>NE 1/4 SW 1/4, Sec. 10 Twp. 50 N, Range 8 E</u> DISTANCES FROM SEC. LINES: <u>2620</u> ft. from <u>S</u> Sec. line. and <u>2340</u> ft. from <u>W</u> Sec. line. OR (north or south) (east or west) SUBDIVISION: <u>Cedar Gate</u> LOT <u>9</u> BLOCK <u> </u> FILING(UNIT) <u> </u> STREET ADDRESS AT WELL LOCATION: <u> </u>					
4. GROUND SURFACE ELEVATION <u>6600</u> ft. DRILLING METHOD <u>Air percussion</u> DATE COMPLETED <u>4-5-97</u> TOTAL DEPTH <u>240</u> ft. DEPTH COMPLETED <u>240</u> ft.					
5. GEOLOGIC LOG: Depth Description of Material (Type, Size, Color, Water Location) <u>0-68 Gray sand and boulders</u> <u>68-225 Brown clay</u> <u>225-231 Brown sand and boulders 225</u> <u>231-240 Brown clay</u>			6. HOLE DIAM. (in.) From (ft) To (ft) <u>8 5/8</u> <u>0</u> <u>20</u> <u>6</u> <u>20</u> <u>240</u>		
			7. PLAIN CASING OD (in) Kind Wall Size From(ft) To(ft) <u>6 5/8 steel 188 +1 60</u> <u>4 plastic 200 10 220</u>		
			PERF. CASING: Screen Slot Size: <u>1/8</u> <u>6 5/8 steel 250 60 185</u> <u>4 plastic 200 220 240</u>		
			8. FILTER PACK: Material <u> </u> Size <u> </u> Interval <u> </u>		9. PACKER PLACEMENT: Type <u> </u> Depth <u> </u>
REMARKS: <u>Numex Drilling System</u> <u>3.75 I.D. Driveshoe</u>			10. GROUTING RECORD: Material Amount Density Interval Placement <u>cement 20gal 4bags 7-20 60 85</u>		
11. DISINFECTION: Type <u>Liquid Bleach</u> Amt. Used <u>2 gal injected</u>					
12. WELL TEST DATA: <input type="checkbox"/> Check box if Test Data is submitted on Form No. GWS 39 Supplemental Well Test. TESTING METHOD <u>Air lift</u> Static Level <u>54</u> ft. Date/Time measured <u>4-5-97 1600</u> Production Rate <u>60</u> gpm. Pumping level <u>240</u> ft. Date/Time measured <u>4-5-97 1800</u> Test length (hrs.) <u>2</u> Remarks <u> </u>					
13. I have read the statements made herein and know the contents thereof, and that they are true to my knowledge. [Pursuant to Section 24-4-104 (13)(a) C.R.S., the making of false statements herein constitutes perjury in the second degree and is punishable as a class 1 misdemeanor.] CONTRACTOR <u>American Drilling Service</u> Phone <u>(719) 942-3568</u> Lic. No. <u>280</u> Mailing Address <u>9934 Hiway 50</u> Name/Title (Please type or print) <u>Howard, CO 81239</u> Signature <u>Bradford Dewberry</u> Date <u>5-21-97</u> <u>Bradford W. Dewberry/Pres.</u>					

OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES

818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

LIC

APPLICANT

WELL PERMIT NUMBER 048854 F
DIV. 2 CNTY. 8 WD 11 DES. BASIN MD

Lot: 9 Block: Filing: Subdiv: CEDAR GATE

MICHAEL & MARSHA MYERS
1855 W PENN ST
IOWA CITY IA 52240-

(319)626-6206

APPROVED WELL LOCATION
CHAFFEE COUNTY

NE 1/4 SW 1/4 Section 10
Twp 50 N RANGE 8 E NM P.M.

DISTANCES FROM SECTION LINES

2620 Ft. from South Section Line
2340 Ft. from West Section Line

CHANGE/EXPANSION OF USE

ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT

CONDITIONS OF APPROVAL

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of the permit does not assure the applicant that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-90-137(2) on the condition that the well be operated in accordance with the Cedar Gate, Inc. and the Upper Arkansas Water Conservancy District Augmentation Plan approved by the Division 2 Water Court in case nos. 83CW37 and 92CW84. If the well is not operated in accordance with the terms of said decree, it will be subject to administration including orders to cease diverting water.
- 4) The issuance of this permit cancels permit no. 47917-F.
- 5) Approved as the only well on a residential site of 3.701 acres described as lot 9, Cedar Gate Subdivision, Chaffee County.
- 6) The use of ground water from this well is limited to ordinary household purposes inside one single family dwelling and the irrigation of not more than 2,000 square feet of lawns and gardens.
- 7) The maximum pumping rate shall not exceed 15 GPM.
- 8) The annual amount of ground water to be withdrawn shall not exceed .43 acre-feet.
- 9) The return flow from the use of the well must be through an individual waste water disposal system of the non-evaporative type where the water is returned to the same stream system in which the well is located.
- 10) A totalizing flow meter must be installed on this well and maintained in good working order. Permanent records of all diversions must be maintained by the well owner (recorded at least annually) and submitted to the Division Engineer upon request.
- 11) This well shall be constructed not more than 200 feet from the location specified on this permit.

APPROVED
DWM

State Engineer

Receipt No. 0418703B

DATE ISSUED **SEP 18 1997**

By

EXPIRATION DATE **SEP 18 1998**

CDR CJR

COLORADO DIVISION OF WATER RESOURCES
DEPARTMENT OF NATURAL RESOURCES
1313 SHERMAN ST., RM. 818, DENVER CO 80203
phone - info: (303) 866-3587 main: (303) 866-3581

RECEIVED

JUL 21 1997

WATER RESOURCES
STATE ENGINEER

RESIDENTIAL * (Note: You may also use this form to apply for livestock watering)
Review instructions prior to completing form

Water Well Permit Application
Must be completed in black ink or typed

1. APPLICANT INFORMATION			6. USE OF WELL (check appropriate entry or entries)		
Name of applicant <u>MICHAEL MYERS</u> <u>MARSHA MYERS</u>			See instructions to determine use(s) for which you may qualify -- <input type="checkbox"/> A. Ordinary household use in one single-family dwelling (NO outside use) <input checked="" type="checkbox"/> B. Ordinary household use in 1 to 3 single-family dwellings: Number of dwellings: _____ <input checked="" type="checkbox"/> Home garden/lawn irrigation, not to exceed 1 acre: area irrigated <u>2,000</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> acre <input type="checkbox"/> Domestic animal watering -- (non-commercial) <input type="checkbox"/> C. Livestock watering (on farm/ranch/range/pasture)		
Mailing Address <u>1855 W. PENN ST</u>					
City <u>IOWA CITY</u>	State <u>IA</u>	Zip code <u>52240</u>			
Telephone Number (include area code) <u>319-626-6206</u>					
2. TYPE OF APPLICATION (check applicable box(es))			7. WELL DATA		
<input type="checkbox"/> Construct new well <input type="checkbox"/> Replace existing well <input type="checkbox"/> Change (source) aquifer <input type="checkbox"/> Other:			<input type="checkbox"/> Use existing well -- <input checked="" type="checkbox"/> Change / Increase Use <input type="checkbox"/> Reapplication (expired permit)		
3. REFER TO (if applicable):			Maximum pumping rate <u>15</u> gpm		
Water court case # <u>92CW84 + 83CW37</u>		Permit # <u>047917-F</u>	Annual amount to be withdrawn <u>118</u> acre-feet		
Verbal # <u>-VE-</u>		Monitoring hole acknowledgment # <u>MH-</u>	Total depth feet		
Well name or #			Aquifer		
4. LOCATION OF WELL			8. TYPE OF RESIDENTIAL SEWAGE SYSTEM		
County <u>CHAFFEE</u>	Quarter/quarter <u>NE 1/4</u>	Quarter <u>SW 1/4</u>	<input checked="" type="checkbox"/> Septic tank / absorption leach field <input type="checkbox"/> Central system District name: _____ <input type="checkbox"/> Vault Location sewage to be hauled to: _____ <input type="checkbox"/> Other (attach copy of engineering design)		
Section <u>10</u>	Township N or S <u>S0</u> <input checked="" type="checkbox"/> <input type="checkbox"/>	Range E or W <u>8</u> <input checked="" type="checkbox"/> <input type="checkbox"/>	9. PROPOSED WELL DRILLER (optional)		
Principal Meridian <u>NMPM</u>			Name <u>LICENSED</u>		
Distance of well from section lines <u>2620</u> ft. from <input type="checkbox"/> N <input checked="" type="checkbox"/> S <u>2340</u> ft. from <input type="checkbox"/> E <input checked="" type="checkbox"/> W			License number		
Well location address, if different from applicant address (if applicable) <u>12450 Co. Rd #195, SALIDA, CO 81201</u>			10. SIGNATURE of applicant(s) or authorized agent		
For replacement wells only - distance and direction from old well to new well feet direction			The making of false statements herein constitutes perjury in the second degree, which is punishable as a class 1 misdemeanor pursuant to C.R.S. 24-4-104(13)(a). I have read the statements herein, know the contents thereof and state that they are true to my knowledge. <u>Michael Myers</u> <u>Marsha Myers</u> Date <u>May 16, 97</u>		
5. TRACT ON WHICH WELL WILL BE LOCATED			OPTIONAL INFORMATION		
A. You must check one of the following - see instructions <input checked="" type="checkbox"/> Subdivision: Name <u>CEDAR GATE</u> Lot no. <u>9</u> Block no. _____ Filing/Unit _____ <input type="checkbox"/> County exemption (attach copy of county approval & survey) Name/no. _____ Tract no. _____ <input type="checkbox"/> Mining claim (attach copy of deed or survey) Name/no. _____ <input type="checkbox"/> Other (attach legal description to application)			USGS map name <u>CHECKS</u> DWR map no. <u>8</u> <u>TRN418703 072197</u> Surface elev. <u>720.00</u>		
B. STATE PARCEL ID# (optional): _____			Office Use Only <u>47917F-CA</u> <u>312</u> <u>118</u> <u>430</u> USE _____		
C. # acres in tract <u>3.701</u>	D. Are you the owner of this property? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if no - see detailed inst.)		DIV <u>2</u> CO <u>08</u> WD <u>08</u> BA _____ MD _____		
E. Will this be the only well on this tract? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if other wells are on this tract - see detailed inst.)					

RESIDENTIAL APPLICATIONS - GENERAL INSTRUCTIONS

There are a variety of uses for ground water in Colorado. This form (GWS-44) can be used when applying for a permit for a new well or replacement of an existing well for the following types of uses:

ORDINARY HOUSEHOLD USE inside one single family residence (NO outside water use allowed)
OTHER RESIDENTIAL USE (sometimes referred to as "domestic" use) which may include use in up to three single-family residences, watering of up to one acre of home gardens and lawns, and watering of domestic animals
LIVESTOCK WATERING on a farm, ranch, range, or pasture

If you are applying for a NEW household use only well, or for a NEW 35+ acre residential well outside the Denver Basin or Designated Basins of eastern Colorado, please use simplified forms GWS-49 or GWS-50. DO NOT use this form for registration of an existing unpermitted well (Use Form GWS-12), monitoring/observation wells (Use Form GWS-46), gravel pit wells (Use Form GWS-27), or for other uses not listed above, including - commercial, industrial, crop irrigation, municipal, etcetera (Use GENERAL PURPOSE Form GWS-45).

FEES Applications must be submitted with the appropriate required non-refundable filing fees. The required filing fee for most well permit applications is \$60. The filing fees for replacement or deepening well permit applications for most previously permitted residential and livestock water wells is \$20. Checks should be payable to the COLORADO DIVISION OF WATER RESOURCES.

Applications are evaluated in chronological order. Please allow approximately six weeks for processing.

APPLICATIONS must be completed clearly, and legibly, in BLACK INK or typed. ALL ITEMS in the application must be completed. Incomplete applications may be returned to the applicant for more information. Do not change or alter the application in any way.

THE LOCATION of the well in item 4 must be correctly and accurately described. The county, quarter/quarter, section, township, range, principal meridian, and distance from section lines must be provided.

NOTE: Distances are not necessarily the same distances as the distances from (your) property lines.

For additional assistance in describing the location of your well, review the publication entitled "How to Determine Well Location" which was provided with your packet, or can be requested from any Colorado Division of Water Resource office.

A LEGAL DESCRIPTION of your lot or parcel of land is required in item 5. For tracts of less than 35 acres approval may depend upon whether the tract was created by a division of land after June 1, 1972. If your lot is less than 35 acres in size, it would be prudent to have a deed or legal description that shows your tract was divided from a larger tract prior to June 1, 1972. This may be accomplished by obtaining a copy of a deed for the tract issued prior to June 1, 1972.

An ORIGINAL signature must be on each application. The applicant's authorized agent may sign the application, if a letter signed by the applicant is submitted with the application authorizing them to act as agent for the purpose of obtaining a well permit.

IF YOU HAVE ANY QUESTIONS regarding any item on the application form, please call the Division of Water Resources Ground Water Information Desk (303-866-3587), or the nearest Division of Water Resources Field Office located in Greeley (970-352-8712), Pueblo (719-542-3368), Alamosa (719-589-6683), Montrose (970-249-6622), Glenwood Springs (970-945-5665), Steamboat Springs (970-879-0272), or Durango (970-247-1845).

DETAILED INSTRUCTIONS ARE AVAILABLE UPON REQUEST

COLORADO DIVISION OF WATER RESOURCES, 1313 SHERMAN STREET, ROOM 821, DENVER, CO 80203
PHONE 303-866-3587 (Information), 303-866-3581 (Main), 303-866-3447 (Well & Water Rights Records), 303-866-3589 (Fax)

CDR CJR

AUGMENTATION CERTIFICATE

Number 0355 (1997)

KNOW ALL MEN BY THESE PRESENTS that:

MICHAEL MYERS & MARSHA MYERS

RECEIVED

JUL 21 1997

WATER RESOURCES
STATE ENGINEER
COLO.

whose address is: 1855 W. Penn St., Iowa City, Iowa 52240

have applied for and paid for the following water rights pursuant to the terms and conditions of Judgment and Decree entered February 18, 1994 in Case No. 92CW84, Water Division No. 2, Colorado:

Well Location: NE 1/4 of the SW 1/4, Section 10, Township 50 North, Range 8 East,
N.M.P.M., at distances of 2620 ft. from the South section line, and 2340 ft. from the
West section line
Lot 9, Cedar Gate Subdivision
Property Address: 12450 Co. Rd. #195, Salida, Chaffee County, Colorado 81201

Use for which augmentation is granted: Domestic - 2,000 square feet of lawn, ZONE B
*(Augments Case #83CW37 - Single Family Home)

Amount of water granted: .100 acre foot

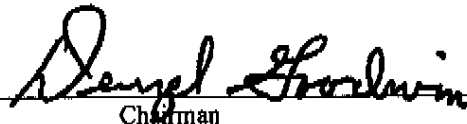
Pursuant to the aforesaid Judgment and Decree and administrative rules and regulations of Upper Arkansas Water Conservancy District (UAWCD) the water right applied for is hereby granted and conveyed to the Applicant on the following terms and conditions:

1. The Applicant shall install a totalizing flow meter to measure the quantity of water flowing from Applicant's water structure (well) and to measure water flowing into Applicant's water structure (pond). A written confirmation of such water flow shall be furnished to UAWCD not less frequently than annually at UAWCD office, 122 West 2nd Street, Salida, Colorado.
2. Applicant shall pay to UAWCD at its office in Salida, Colorado, annually, an amount of \$100.00 as the annual administrative fee. Such fee is due and shall be paid on or before March 15th of each year. UAWCD has the right and authority to increase or decrease such annual administrative fee upon ninety (90) days prior written notice to Applicant at Applicant's address herein, or such other address as Applicant may advise UAWCD in writing. Failure to pay the annual fee shall subject the Applicant to forthwith rescission of this Augmentation Certificate and immediate notice to the State Engineer, Division of Water Resources, that the certificate is no longer valid.
3. Applicant, upon transfer of the real property to which the water right is beneficially applied, shall, within 60 days of such transfer, notify UAWCD in writing of the ownership transfer. Applicant will record this certificate in the office of the clerk and recorder of the county in which the Applicant's real property is situated. This agreement is binding upon the heirs, legal representatives and assigns of the Applicant.

Issued this 13th day of May, 1997.

UPPER ARKANSAS WATER CONSERVANCY DISTRICT

By


Chairman

ATTEST:


Secretary

[SEAL]

CDR CJR

Upper Arkansas Water Conservancy District Augmentation Application 92CW84, 94CW5 and 94CW41

Name MICHAEL MYERS + MARSHA MYERS RECEIVED
Address 1855 W. PENN ST. IOWA CITY, IA 52240 JUL 21 1997
City, State, Zip

Well or Reservoir Site Address: 12450 Co Rd #195, SALIDA, CO 81201 Subdivision Name CEDAR GATE WATER RESOURCES ENGINEER 9
Application Number 0355 Well Permit No. 047917 F Additional Augmentation Case No. 830037

Circle if application for: well, or reservoir
Location: NE 1/4, of the SW 1/4, Section 10, Township 50, N (N,S), Range 8, E (E,W), NM P.M. Located by distances from section lines: 2620 ft. from SOUTH (north or south) sec. line, 2340 ft. from WEST (east or west) sec. line.

Area A: Between confluence with S. Fork of Ark. and N. boundary Chaffee Cty.

Area B: Between confluence with S. Fork of Arkansas and E. boundary of Upper Ark. Water District

Area C: S. Fork of Ark. River and tributaries

Area 94CW5: Defined as Cottonwood Creek Drainage

Area 94CW41: Defined as Chalk Creek

Irrigation Replacement Areas (circle): (A, B, C, 94CW5 OR 94CW41)
WATERTYPES AVAILABLE:

RESERVIOR	Twin Lakes	White Ditch	North Fork Native	Thompson Ditch	Fryingpan-Ark
Twin Lakes	(A) CHALK	-	-	-	A B CHALK
North Fork	B C	B C	B C	-	-
Cottonwood	-	-	-	94CW5	-

Reservoir Evaporation:

Reservoir Elevation ft.

Factors: Elev. over 10,000 = 1.74, Elev. 7,000 to 10,000 = 2.42, Elev. under 7,000 = 2.69

Evaporation Factor (Ft.) X Surface Area (Acres) = Depletion (A.F.)

$$\boxed{} \times \boxed{} = \boxed{}$$

Well:

Type	Quantity	Units	Mult. Factor	Depletion (A.F.)	Mult. Factor	Appropriation (A.F.)
In House/Septic		Each	0.031		10	
In House/Central		Each	0.016		20	
Livestock		Head	0.010		1	
Irrigation (lawns, etc.) Zone A		Acres	2.62		1.18	
Irrigation (lawns, etc.) Zone B	.0465	Acres	2.15	.100	1.18	0.118
Irrigation (lawns, etc.) Zone C		Acres	1.90		1.18	
R.V. Central N.B.		Space	0.0056		20	
R.V. Septic N.B.		Space	0.0112		10	
Bath Laundry Central		RV Space	0.0017		20	
Bath Laundry Septic		RV Space	0.0034		10	
Motel Septic		People/Day	1.53 x 10 ⁻¹		10	
Motel Central		People/Day	7.65 x 10 ⁻⁴		20	
Office Septic		People/Day	4.60 x 10 ⁻⁴		10	
Office Central		People/Day	2.3 x 10 ⁻⁴		20	
Other						
			Total	.100		0.118

UAWCD:

Initials: MB

Date: 4/15/97

Division Eng. Official: Initial: _____ Date: _____

- ☐ Denied: Reason: ☐ Outside of Augmentation Area ☐ Rejected for Lack of Exchange Decrease
☐ Recommend Exchange Decree on this Tributary ☐ Improper Calculations ☐ Improper Augmentation Source
☐ Improper Water Augmentation Type Other: _____

Division Eng. Official: Initial: JK Date: 5/2/97
☒ Approval

JUL 21 1997

1280

APPLICANT

WELL PERMIT NUMBER **047917**
DIV. 2 CNTY. 8 WD 11 DES. BASIN MD

WATER RESOURCES
STATE ENGINEER
COLORADO

Lot: 9 Block: Filing: Subdiv: CEDAR GATE

APPROVED WELL LOCATION
CHAFFEE COUNTY

NE 1/4 SW 1/4 Section 10
Twp 50 N RANGE 8 E NM P.M.

DISTANCES FROM SECTION LINES

2620 Ft. from South Section Line
2340 Ft. from West Section Line

MIKE MYERS
1855 W PENN ST
IOWA CITY IA 52240-

(319)626-6206

PERMIT TO CONSTRUCT A WELL

ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT
CONDITIONS OF APPROVAL

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of the permit does not assure the applicant that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-90-137(2) on the condition that the well be operated in accordance with the Cedar Gate, Inc. Augmentation Plan approved by the Division 2 Water Court in case no. 83CW37. If the well is not operated in accordance with the terms of said decree, it will be subject to administration including orders to cease diverting water.
- 4) Approved as the only well on a residential site of 3.701 acres described as lot 9, Cedar Gate Subdivision, Chaffee County.
- 5) The use of ground water from this well is limited to ordinary household purposes inside one single family dwelling and shall not be used outside the house for any purpose.
- 6) The maximum pumping rate shall not exceed 15 GPM.
- 7) The annual amount of ground water to be withdrawn shall not exceed .312 acre-feet.
- 8) The return flow from the use of the well must be through an individual waste water disposal system of the non-evaporative type where the water is returned to the same stream system in which the well is located.
- 9) A totalizing flow meter must be installed on this well and maintained in good working order. Permanent records of all diversions must be maintained by the well owner (recorded at least annually) and submitted to the Division Engineer upon request.
- 10) This well shall be constructed not more than 200 feet from the location specified on this permit.

NOTE: This permit has been approved after limiting the uses to household use only inside a single family dwelling per the augmentation plan and the verbal approval of the applicant to the information desk. You are hereby notified that you have the right to appeal the issuance of this permit, by filing a written request with this office within sixty (60) days of the date of issuance, pursuant to the State Administrative Procedures Act. (See Section 24-4-104 through 106, C.R.S.).

APPROVED
DWM

State Engineer

Receipt No. 0411153

DATE ISSUED FEB 27 1997

By

EXPIRATION DATE FEB 27 1998

CDR CTR