FORM NO. GWS-32 10/94

PUMP INSTALLATION AND TEST REPORT

STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use only
RECEIVED
MAY 24 1999
WATER RESOURCES STATE ENGINEER COLO.

1. **WELL PERMIT NUMBER** 051350-F

2. OWNER NAME(S) James B. and Judith D. Brooks
Mailing Address Box 565
City, St. Zip Poncha Springs, CO 81242
Phone ( )

3. WELL LOCATION AS DRILLED: NE 1/4 SE 1/4, Sec. 9 Twp. 50 N, Range 8 E
DISTANCES FROM SEC. LINES:
1400 ft. from S (north or south) Sec. line. and 1100 ft. from E (east or west) Sec. line.
SUBDIVISION: Brooks Tracts LOT C BLOCK FILING(UNIT)
STREET ADDRESS AT WELL LOCATION:

4. PUMP DATA: Type Submersible Installation Completed 4-9-99
Pump Manufacturer Myers Pump Model No. 3WPL52-B
Design GPM 8 at RPM 3450, HP ½, Volts 230, Full Load Amps 5
Pump Intake Depth 110 Feet, Drop/Column Pipe Size 1 Inches, Kind SCH80

ADDITIONAL INFORMATION FOR PUMPS GREATER THAT 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. Meter Serial No.
Meter Readout ☐ Gallons, ☐ Thousand Gallons, ☐ Acre feet, ☐ Beginning Reading

6. TEST DATA: ☐ Check box if Test data is submitted on Supplemental Form.

		Date	4-9-99	4-9-99		
Total Well Depth	120	Time	1100	1300		
Static Level	70	Rate (GPM)	10	8		
Date Measured	4-9-99	Pumping Lvl.	70	110		

7. DISINFECTION: Type Liquid Bleach Amt. Used ½ gal circulated

8. Water Quality analysis available. ☐ Yes XX ☐ 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)	Signature	Date
Bradford W. Dewberry/Pres.	Bradford Dewberry	5-20-99

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
1313 Sherman St., Rm 818, Denver, CO 80203

For Office Use only

RECEIVED

MAY 07 1999

WATER RESOURCES STATE ENGINEER COLO.

1. **WELL PERMIT NUMBER** 051350-F

2. OWNER NAME(S) James B. and Judith D. Brooks
Mailing Address Box 565
City, St. Zip Poncha Springs, CO 81242
Phone ( )

3. WELL LOCATION AS DRILLED: NE 1/4 SE 1/4, Sec. 9 Twp. 50 N, Range 8 E.
DISTANCES FROM SEC. LINES:
1400 ft. from S (north or south) Sec. line. and 1100 ft. from E (east or west) Sec. line. OR
SUBDIVISION: Brooks Tracts LOT C BLOCK ____ FILING(UNIT) ____
STREET ADDRESS AT WELL LOCATION:

4. GROUND SURFACE ELEVATION 6800 ft. DRILLING METHOD Air Percussion
DATE COMPLETED 3-35-99 TOTAL DEPTH 120 ft. DEPTH COMPLETED 120 ft.

5. GEOLOGIC LOG:

Depth	Description of Material (Type, Size, Color, Water Location)	
0-83	Brown sand and boulders	83
83-120	Brown sandy clay	

6. HOLE DIAM. (in.)

	From (ft)	To (ft)
8 5/8	0	20
6	20	120

7. PLAIN CASING

OD (in)	Kind	Wall Size	From(ft)	To(ft)
6 5/8	steel	188	+1	40
4	plastic	200	20	80

PERF. CASING: Screen Slot Size: 1/8

6 5/8	steel	250	40	80
4	plastic	200	80	120

8. FILTER PACK:
Material ____
Size ____
Interval ____

9. PACKER PLACEMENT:
Type ____
Depth ____

10. GROUTING RECORD:

Material	Amount	Density	Interval	Placement
Cement	20gal	4bags	7-20	poured

REMARKS: ____

11. DISINFECTION: Type Liquid Bleach Amt. Used 1 gal injected

12. WELL TEST DATA: ☐ Check box if Test Data is submitted on Form No. GWS 39 Supplemental Well Test.
TESTING METHOD Air Lift
Static Level 70 ft. Date/Time measured 3-25-99 1100, Production Rate 8 gpm.
Pumping level 120 ft. Date/Time measured 3-25-99 1300, Test length (hrs.) 2
Remarks ____

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

Name/Title (Please type or print)	Signature	Date
Bradford W. Dewberry/Pres.	Bradford Dewberry	5-4-99

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.

1. Complete the **Well 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 where drilled. If the owner has more than one well serving this property, provide the identification (**Owner's Designation**) for this well. **DO NOT USE THE OWNER SUPPLIED LOCATION** unless a survey has been provided. For wells located in subdivisions the lot, block and subdivision information must also be provided.

4. Report the ground surface elevation in feet above sea level if available. This value may be obtained from a topographic map. Describe the drilling method used to construct the well and the date completed. Indicate the total depth drilled and the actual completed depth of the well.

5. Fully describe the materials encountered in drilling. Do not use formation names unless they are in conjunction with a description of materials.
   Examples of descriptive terms include;
   Grain size--Boulders, gravel, sand, silt, clay.
   Hardness--Loose, soft, tight, hard, very hard.
   Color--All materials. Most critical in sedimentary rock.
   Depth when water is encountered (if it can be determined).

6. Provide the diameters of the drilled bore hole.

7. The outside diameter, kind, wall thickness and interval of casing lengths must be indicated.

8. Indicate the type and size of filter (gravel) pack and the interval where placed.

9. Indicate the type and setting depth for any **packers installed.**

10. The density of the grout slurry must be reported and may be indicated as pounds per gallon, gallons of water per sack, total gallons of water and number of sacks used, etc. Specify the grout placement method, i.e. tremie pipe or positive displacement. The percentage of additives mixed with the grout should be reported under remarks.

11. Record the type and the amount of disinfection used, how placed and the length of time left in the hole.

12. Report well test data as required by Rule 10.7. 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.

13. Fill in **Company Name and Address of Contractor** who constructed the well. The report must be signed by the licensed contractor responsible for the construction of the well.

Form No. GWS-25

OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES

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

LIC

WELL PERMIT NUMBER 051350 - F -

DIV. 2 CNTY. 8 WD 11 DES. BASIN MD

APPLICANT

Lot: C Block: Filing: Subdiv: BROOKS TRACTS

APPROVED WELL LOCATION
CHAFFEE COUNTY

NE 1/4 SE 1/4 Section 9
Twp 50 N RANGE 8 E NM P.M.

DISTANCES FROM SECTION LINES
1400 Ft. from South Section Line
1100 Ft. from East Section Line

JAMES B & JUDITH D BROOKS
BOX 565
PONCHA SPRINGS CO 81242-

(719)539-2254

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 Upper Arkansas Water Conservancy District Augmentation Plan approved by the Division 2 Water Court in case no. 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) Approved for a well on a residential site of 7.05 acres described as lot C, Brooks Tracts Subdivision, Chaffee County.

5) The use of ground water from this well is limited to ordinary household purposes inside one single family dwelling and irrigation of not more than 1,400 square feet of home gardens and lawn.

6) The maximum pumping rate shall not exceed 15 GPM.

7) The annual amount of ground water to be withdrawn shall not exceed 0.392 acre-feet (127,724 gallons).

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: **The Augmentation Certificate Number is 0367 (1999).**

MPS 2/9/99

APPROVED
MPS

Hal D. Simpson
State Engineer

By

Receipt No. 0441051A

DATE ISSUED FEB 11 1999

EXPIRATION DATE FEB 11 2000

3X11

RECEIVED

FEB 04 1999

WATER RESOURCES

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

RESIDENTIAL * (Note: You may also use this form to apply for livestock watering) Water Well Permit Application

Review instructions prior to completing form — Must be completed in black ink or typed

1. APPLICANT INFORMATION

Name of applicant
JAMES B. BROOKS
JUDITH D. BROOKS

Mailing Address
PO BOX 565

City: PONCHA SPRINGS State: CO Zip code: 81242

Telephone Number (include area code)
719-539-2254

2. TYPE OF APPLICATION (check applicable box(es))

- ☒ Construct new well
- ☐ Use existing well
- ☐ Replace existing well
- ☐ Change / Increase Use
- ☐ Change (source) aquifer
- ☐ Reapplication (expired permit)
- ☐ Other:

3. REFER TO (if applicable):

Water court case #	Permit #
92CW84	
Verbal #	Monitoring hole acknowledgment #
-VE-	MH-

Well name or #
AUGMENTATION CERTIFICATE #0367

4. LOCATION OF WELL

County	Quarter/quarter	Quarter
CHAFFEE	NE ¼	SE ¼

Section	Township N or S	Range E or W	Principal Meridian
9	50 ☒ N ☐ S	8 ☒ E ☐ W	NM

Distance of well from section lines
1400 ft. from ☐ N ☒ S 1100 ft. from ☒ E ☐ W

Well location address, if different from applicant address (if applicable)

For replacement wells only - distance and direction from old well to new well
feet direction

5. TRACT ON WHICH WELL WILL BE LOCATED

A. You must check *one* of the following - see instructions

☒ Subdivision: Name BROOKS TRACTS
Lot no. C Block no. ____ Filing/Unit ____

☐ County exemption (attach copy of county approval & survey)
Name/no. ____ Tract no. ____

☐ Mining claim (attach copy of deed or survey)
Name/no. ____

☐ Other (attach legal description to application)

B. STATE PARCEL ID# (optional):

C. # acres in tract: 7.05

D. Are you the owner of this property? ☒ YES ☐ NO (if no - see detailed inst.)

E. Will this be the only well on this tract?
☒ YES ☐ NO (if other wells are on this tract - see detailed inst.)

6. USE OF WELL (check appropriate entry or entries)

See instructions to determine use(s) for which you may qualify --

- ☐ A. Ordinary household use in one single-family dwelling (NO *outside use*)
- ☒ B. Ordinary household use in 1 to 3 single-family dwellings:
  Number of dwellings: 1
  - ☒ Home garden/lawn irrigation, not to exceed 1 acre: area irrigated 1400 ☒ sq. ft. ☐ acre
  - ☐ Domestic animal watering -- (non-commercial)
- ☐ C. Livestock watering (on farm/ranch/range/pasture)

7. WELL DATA

Maximum pumping rate	Annual amount to be withdrawn
15 gpm	.592 acre-feet
Total depth	**Aquifer**
feet	

8. TYPE OF RESIDENTIAL SEWAGE SYSTEM

- ☒ Septic tank / absorption leach field
- ☐ Central system
  District name: ____
- ☐ Vault
  Location sewage to be hauled to: ____
- ☐ Other (attach copy of engineering design)

9. PROPOSED WELL DRILLER (optional)

Name	License number
LICENSED	

10. SIGNATURE of applicant(s) or authorized agent

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.

Must be original signature: James B. Brooks Judith D. Brooks

Title ____ Date ____

OPTIONAL INFORMATION

USGS map name	DWR map no.	Surface elev.

Office Use Only
#44105I-A 2/4/99 $180.00 CK.
WL ✓

DIV 2
CO 8 ✓
WD 11 ✓
BA ____
USE ____ MD ____

Form GWS-44 (11/95)

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)

RECEIVED

FEB 04 1999

WATER RESOURCES
STATE ENGINEER
COLO

AUGMENTATION CERTIFICATE

Number 0367 (1999)

KNOW ALL MEN BY THESE PRESENTS that:

JAMES B. BROOKS & JUDITH D. BROOKS

whose address is: PO Box 565, Poncha Springs, CO 81242
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 ¼ of the SE ¼, Section 9, Township 50 North, Range 8 East, N.M.P.M.,
at distances of 1400 ft. from the South section line, and 1100 ft. from the East section line.
Lot C, Brooks Tracts Subdivision
Property Address: Chaffee County, Salida, Colorado 81201

Use for which augmentation is granted: Domestic: Single Family Home, 1400 square feet of lawn, ZONE B

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 2nd day of February, 1999.

UPPER ARKANSAS WATER CONSERVANCY DISTRICT

By _____
Chairman

ATTEST:

_____
Secretary

[SEAL]

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

RECEIVED

Name JAMES B. BROOKS & JUDITH D. BROOKS

Address PO BOX 565 City, State, Zip PONCHA SPRINGS CO FEB 08 1999

Well or Reservoir Site Address: Subdivision Name BROOKS TRACTS Lot Number 6

WATER RESOURCES STATE ENGINEER COLO

Application Number 0367 Well Permit No. APPLIED FOR Additional Augmentation Case No.

Circle if application for: well, or reservoir

Location: NE ¼, of the SE ¼, Section 9, Township 50, N (N,S), Range 8, E (E,W), NM P.M. Located by distances from section lines: 1400 ft. from SOUTH (north or south) sec. line, 1100 ft. from EAST (east or west) sec. line.

RECEIVED

DEC 30 1998

DIVISION 2
PUEBLO CO

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

Watertypes Available for Irrigation Replacement Areas (circle): (A, B, C, 94CW5 OR 94CW41)

RESERVIOR	Twin Lakes	White Ditch	North Fork Native	Thompson Ditch	Fryingpan-Ark
Twin Lakes	(A) B 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.)

[ ] X [ ] = [ ]

Well: Signature of applicant if this application is augmentation use compliance only and not an expansion of use of current permit _____

Type	Quanity	Units	Mult. Factor	Depletion (A.F.)	Mult. Factor	Appropriation (A.F.)
In House/Septic	1	Each	0.031	.031	10	.31
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	.0322	Acres	2.15	.069	1.18	.082
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	1.53×10^{-5}		10	
Motel Central		People/Day	7.65×10^{-4}		20	
Office Septic		People/Day	4.60×10^{-5}		10	
Office Central		People/Day	2.3×10^{-4}		20	
Other						
			Total	.100		.392

UAWCD Official: _____ Date Submitted: 12/29/98 Date Published: 2/3/99 600 foot spacing submitted: _____

☐ Denied: Date: _____ Reason: ☐ Outside of Augmentation Area ☐ Rejected for Lack of Exchange Decrees ☐ Recommend Exchange Decree on this Tributary

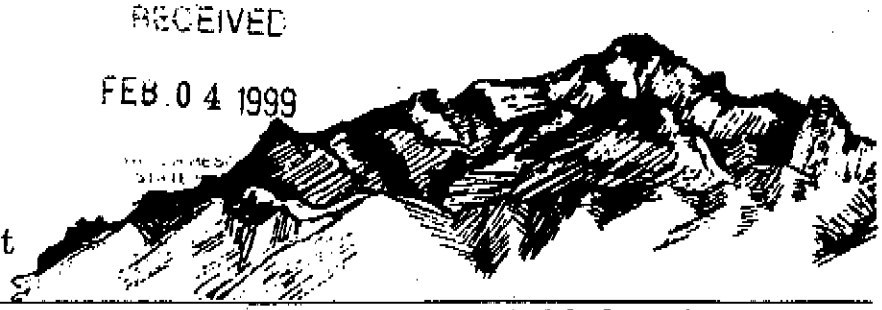
☐ Improper Calculations ☐ Improper Augmentation Source ☐ Improper Water Augmentation Type ☐ Other: _____

☒ Approval with conditions: _____

Other _____

Division Engineer Official: _____ Date: 1/4/99

Version Date:07/08/98 U4FORM6_98.DOC



UPPER ARKANSAS
Water Conservancy District

PHONE: 719-539-5425 FAX 539-7579 P.O. BOX 1090 SALIDA, COLORADO 81201

Dick Wolfe
Office of the State Engineer
Division of Water Resources
1313 Sherman Street, Rm. 818
Denver, Colorado 80203

February 2, 1999

Re: CASE 92CW84 & 94CW5 & 94CW41- AUGMENTATION CERTIFICATES

Dear Dick:

We enclose signed well application forms together with a photostatic copy of the Augmentation Certificates in Case 92CW84, Case 94CW5 and 94CW41, Division 2, and together with authorization forms from Steve Witte, Division 2 Engineer, together with a photostatic copy of well permits for existing wells for the following parties:

0179 – Edward C. Routon & Rebecca S. Routon
0367 – James B. Brooks & Judith D. Brooks
0583 – Fredrickson Brown Holding, LLC
0479 – Lloyd Fulton & LaVonne Fulton – resubmitting with 600 ft spacing waivers – Receipt #430060, and Field Inspection

A check in the amount of $180.00 is enclosed representing $60.00 application fee for each applicant. We also have enclosed the Fulton application – Receipt #430060. We would appreciate new certificates being issued for each of these applicants in accordance with the permit application form enclosed for each party, respectively.

Sincerely,

Ken Baker
General Manager

KB/lf
Enc.