

Form No. GWS-11 6/2006	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	For Office Use Only RECEIVED JAN 03 2007 WATER RESOURCES STATE ENGINEER COLO.
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:		
NAME(S): <u>James F. Mach</u>		
Mailing Address: <u>P.O. Box 2333</u>		
City, St. Zip: <u>Durango, Co. 81302</u>		
Phone <u>(970) 963-3675 / (970) 946-2077</u>		
This form is filed by the named individual/entity claiming that they are the owner of the well permitted as referenced above. This filing is made pursuant to C.R.S. 37-90-143.		
WELL LOCATION: Well Permit Number: <u>160245</u>		
Receipt Number: <u>0324174</u>		
County <u>La Plata</u> <u>4650 CR 318</u> (Address)		Owner's Well Designation (optional) <u>Ignacio</u> (City) <u>Co</u> <u>81137</u> (State) (Zip)
<u>NW 1/4 of the SW 1/4, Sec. 21, Twp. 33</u> <input checked="" type="checkbox"/> N. or <input type="checkbox"/> S., Range <u>8</u> <input type="checkbox"/> E. or <input checked="" type="checkbox"/> W., <u>NMPM</u> P.M.		
Distance from Section Lines: <u>2800</u> Ft. From <input checked="" type="checkbox"/> N. or <input type="checkbox"/> S., <u>2000</u> Ft. From <input type="checkbox"/> E. or <input checked="" type="checkbox"/> 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: <input checked="" type="checkbox"/> Change in name of owner <input type="checkbox"/> Change in mailing address <input type="checkbox"/> 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 <u>James F. Mach</u>	Please print the Signer's Name & Title <u>James F. Mach</u>	Date <u>12/21/06</u>
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		
<div style="text-align: right;"> ACCEPTED AS A CHANGE IN OWNERSHIP AND/OR MAILING ADDRESS. </div> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>[Signature]</u> State Engineer </div> <div style="text-align: center;"> <u>[Signature]</u> By </div> <div style="text-align: right;"> <u>1-3-07</u> Date </div> </div>		