

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



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RECEIVED

MAY 27 1999

WATER RESOURCES
STATE ENGINEER
COLO.

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>C. Glen Walker</u>				See instructions to determine use(s) for which you may qualify -			
Mailing Address <u>2003 Marguerite</u>				<input type="checkbox"/> A. Ordinary household use in one single-family dwelling (NO outside use)			
City <u>Bay City</u>		State <u>Tx</u>		Zip code <u>77414</u>		<input checked="" type="checkbox"/> B. Ordinary household use in 1 to 3 single-family dwellings:	
Telephone Number (include area code) <u>(409) 245-2063</u>				Number of dwellings: <u>1</u>			
2. TYPE OF APPLICATION (check applicable box(es))				<input checked="" type="checkbox"/> Home garden/lawn irrigation, not to exceed 1 acre: area irrigated <u>1/2</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acre			
<input type="checkbox"/> Construct new well				<input type="checkbox"/> Use existing well			
<input checked="" type="checkbox"/> Replace existing well				<input type="checkbox"/> Change / Increase Use			
<input type="checkbox"/> Change (source) aquifer				<input checked="" type="checkbox"/> Reapplication (expired permit)			
<input type="checkbox"/> Other:				<input type="checkbox"/> C. Livestock watering (on farm/ranch/range/pasture)			
3. REFER TO (if applicable):				7. WELL DATA			
Water court case #		Permit # <u>194421 A</u>		Maximum pumping rate <u>15</u> gpm		Annual amount to be withdrawn <u>3</u> acre-feet	
Verbal # <u>-VE-</u>		Monitoring hole acknowledgment # <u>MH-</u>		Total depth <u>200</u> feet		Aquifer	
Well name or #				8. TYPE OF RESIDENTIAL SEWAGE SYSTEM			
4. LOCATION OF WELL				<input checked="" type="checkbox"/> Septic tank / absorption leach field			
County <u>La Plata</u>		Quarter/quarter <u>SW 1/4</u>		Quarter <u>NE 1/4</u>		<input type="checkbox"/> Central system	
Section <u>8</u>	Township N or S <u>T35</u> <input checked="" type="checkbox"/> <input type="checkbox"/>	Range E or W <u>7</u> <input type="checkbox"/> <input checked="" type="checkbox"/>	Principal Meridian <u>N.M.P.M.</u>	District name:		<input type="checkbox"/> Vault	
Distance of well from section lines <u>2600</u> ft. from <input checked="" type="checkbox"/> N <input type="checkbox"/> S <u>1530</u> ft. from <input checked="" type="checkbox"/> E <input type="checkbox"/> W				Location sewage to be hauled to:			
Well location address, if different from applicant address (if applicable) <u>12083 CR 502</u>				<input type="checkbox"/> Other (attach copy of engineering design)			
For replacement wells only - distance and direction from old well to new well <u>25</u> feet <u>WNW</u> direction				9. PROPOSED WELL DRILLER (optional)			
5. TRACT ON WHICH WELL WILL BE LOCATED				Name <u>Colorado Licensed</u>			
A. You must check one of the following - see instructions				License number			
<input type="checkbox"/> Subdivision: Name Lot no. <u>(unrecorded)</u> Block no. <u></u> Filing/Unit <u></u>				10. SIGNATURE of applicant(s) or authorized agent			
<input type="checkbox"/> County exemption (attach copy of county approval & survey) Name/no. <u></u> Tract no. <u></u>				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.			
<input type="checkbox"/> Mining claim (attach copy of deed or survey) Name/no. <u></u>				Must be original signature <u>C. Glen Walker</u>			
<input type="checkbox"/> Other (attach legal description to application)				Title <u>OWNER</u>			
B. STATE PARCEL ID# (optional): <u>5675-081-00-165</u>				Date <u>5/20/99</u>			
C. # acres in tract <u>39.4</u>		D. Are you the owner of this property? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if no - see detailed inst.)		OPTIONAL INFORMATION			
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.)				USGS map name		DWR map no.	
				Surface elev.			
Office Use Only				DIV <u>7</u>			
RECEIVED DIV. 7 <u>5-20-99</u>				CO <u>39</u>			
				WD <u>31</u>			
CHECKS TRN446155 052799 \$0.00				USE <u>8L</u> MD <u></u>			