



ORIGINAL PERMIT APPLICANT(S)

ELENA THEOS

APPROVED WELL LOCATION

Water Division: 1 Water District: 1
 Designated Basin: KIOWA-BIJOU
 Management District: NORTH KIOWA-BIJOU
 County: ADAMS
 Parcel Name: N/A

SW 1/4 NE 1/4 Section 34 Township 3.0 S Range 62.0 W Sixth P.M.

UTM COORDINATES (Meters, Zone:13, NAD83)

Easting: 559040.0 Northing: 4399998.0

REGISTRATION OF EXISTING 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 this permit does not ensure 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) Construction details for this existing well have not been provided to this office; therefore, it is not known if the construction of this well is in compliance with the Water Well Construction Rules, 2 CCR 402-2. The issuance of this permit does not relieve the well owner of responsibility or liability in the event contamination of the groundwater source results from the construction or use of this well, nor does the State Engineer assume any responsibility or liability should contamination occur.
- 3) This well is recorded and permit approved pursuant to CRS 37-90-105(4)(a). The use of this well is limited to the historical use as recorded with this office and by the terms of CRS 37-90-105, being a well used for the watering of livestock on range and pasture, for domestic purposes inside 1 single family dwelling, and irrigating no more than 1 acre of lawn and garden, with a maximum pumping rate of 15 GPM. The total depth of the well is estimated at 60 feet.
- 4) The date of first beneficial use, as claimed by the applicant, is 1948.

Issued By SHANNON JOHNSON

Date Issued: 7/18/2017

Expiration Date: N/A

Form No. GWS-12 6/2012
STATE OF COLORADO
OFFICE OF THE STATE ENGINEER
 1313 Sherman St., Room 821, Denver, CO 80203
 Main: (303) 866-3581
 DWR Website: www.water.state.co.us
 Email to: dwrpermitsonline@state.co.us

For Office Use Only

REGISTRATION OF EXISTING WELL
 Review form instructions prior to completing form

RECEIVED
 JUL 11 2017
 WATER RESOURCES
 STATE ENGINEER
 COLO

Transaction #: 3680637
 Date: 7/11/2017 12:15:17 PM
 Transaction Total: \$100.00
 CHECK #1446

NAME & CONTACT INFORMATION OF WELL OWNER:
 Name(s) Elena Theos NKA Elena K Mogensen
 Mailing Address P.O. Box 777
 City: Meeker State: CO Zip Code: 81641
 Phone No. with area code 970-878-5764 Email mogie685@gmail.com

WELL LOCATION County: Adams Well Name(optional):
57700 E. 24th Avenue Strasburg CO 80136
 (Address) (City) (State) (Zip)

SW 1/4 of the NE 1/4, Sec 34 Twp 3 N. or S., Range 62 E. or W., 6th P.M.
 Distance from Section Lines unknown Ft. N. or S. Line, unknown Ft. E. or W. Line.

ATTACH A COPY OF A CURRENT DEED FOR THE SUBJECT PARCEL

Subdivision Name N/A Lot _____ Block _____ Filing/Unit _____

Optional: GPS well location information in UTM format. The following GPS settings are required: Easting 55 9040
 Format must be UTM. Units must be in meters. Datum must be NAD83. Unit must be set to true North. Zone 12 or Zone 13
 Northing 4399998

Was GPS unit checked for above items? YES NO
 The well has historically been used for the following purpose(s): domestic, watering lawn, garden & live stock

Water first used beneficially by the original owner for the above described purposes on (mm/dd/yyyy) unknown / Home built in 1948

The total depth of this well is 60 feet.

The pumping rate of this well is 15 gallons per minute.

The average annual amount of water diverted is 1 acre-feet.

The lawn and garden irrigated (watered) by water from this well is 1 Acre or Square feet.
 Number

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. 23-3-104(13)(a). I have read the statements herein, know the contents thereof, and state that they are true to my knowledge.

Sign or enter name of Well Owner(s) Elena K Mogensen Print Name and Title of Well Owner(s) Elena K Mogensen Date (mm/dd/yyyy) 7/5/2017

For Office Use Only

- WE
- WR
- CWCB
- AQUA
- MYLAR

1808'N 2304'E

Div 8 WD 1 Basin 2 MD 7

Form No. GWS-12A 09/2016	STATE OF COLORADO OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 Phone: (303) 866-3581 DWR Website: www.water.state.co.us Email to: dwrpermitsonline@state.co.us	For Office Use Only
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STATEMENT OF HISTORICAL USE
 Review form instructions prior to completing form
 This form is to be submitted with the Registration of Existing Well form, GWS-12

I, Elena Theos NKA Elena Mogensen do state as follows: I am the owner of a well located in the
 (print name of well owner)
SW 1/4 of the NE 1/4, Sec. 34, Township 3 N. or S., Range 62 E. or W, 6th P.M.
 Water Court case no. _____ (if applicable), Owner's well designation (well name) _____
 Location of well (street address - if applicable): 57700 E. 24th Avenue Strasburg CO 80136
 Location of well (subdivision name/lot/block/filing - if applicable): N/A

Is historical use on same parcel as where well is located? Yes/ No. If no, provide location where well is used
 (address/subdivision name/lot/block/filing): _____
 Size of parcel where well is located 80 +/- acres. Will this be the only well on the parcel? Yes/ No. If no, list permit number(s)
 or water court decree case number(s) for other well(s) 10291-B
 Will future use be on same parcel as historical? Yes/ No. If no, provide new location (address/subdivision name /lot/block/filing)

Existing well location and visual conditions: If stating no, must include an explanation of the circumstances.
 Type of existing well (circle one): drilled; hand dug; spring well; gallery well; gravel pit; other _____
 Distance to nearest septic tank/sewer line (approximate) 50 feet. Distance to nearest leach field (approx.) 80 feet.
 Is the well in a clean and sanitary location? yes
 Is the ground at the surface surrounding the well firm and stable and sloped away from the well for proper drainage? yes
 Is the well situated in a well house or vault? NO If so, is the well house or vault in good repair and condition? _____

Existing well construction and materials: If stating no, must include an explanation of the circumstances.
 Is the well equipped with a sanitary well seal/cap? _____
 Is the well constructed with steel casing that extends at least one (1) foot above the ground surface? yes
 Casing size (diameter) 6 inches.
 Who constructed well? unknown Who installed pump? unknown

Historical use initiated prior to May 8, 1972
 The well identified above has been used since prior to May 8, 1972 as the water supply for the following exempt uses listed in § 37-92-602, C.R.S. (or § 37-90-105, C.R.S., in a Designated Ground Water Basin):

- a) Ordinary household use inside single-family dwelling(s) (maximum of 3 single family dwellings);
- b) The irrigation of 1 acre/square feet (circle one) of home gardens and lawns (maximum of one acre - one acre is equivalent to 43,560 square feet);
- c) The watering of domestic animals/poultry yes/ no; livestock on a farm or ranch yes/ no

OR (above uses cannot be combined with commercial uses)

- d) Drinking and sanitary facilities inside an individual commercial business yes/ no (If commercial use claimed, Form GWS-57, Commercial drinking and sanitary well worksheet, must also be completed and submitted.)

(Note: Commercial wells in a Designated Ground Water Basin may also include outside uses.)

Have the above claimed uses been in continuous use since May 8, 1972? Yes/ No. If no, for each claimed use, list dates when this well supplied the above claimed uses: _____

I understand that uses that were not initiated prior to May 8, 1972 are not eligible for registration and any expansion of use that occurred after May 8, 1972 is not eligible for registration. Additionally, I understand that if the well has not been operational or has not existed for a period of at least ten (10) years, the well is not eligible for registration.

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. 23-3-104(13)(a). I have read the statements herein, know the contents thereof, and state they are true to my knowledge.

Sign or Enter Name of Well Owner(s) <u>Elena K Mogensen</u>	Print Name and Title of Well Owner(s) <u>Elena K Mogensen</u>	Date (mm/dd/yyyy) <u>7/5/2017</u>
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Form No. GWS-11 08/2016	COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 Sherman St., Ste 821, Denver CO 80203 (303) 866-3581 dwrpermitsonline@state.co.us	For Office Use Only
CHANGE IN OWNER NAME/MAILING ADDRESS		
PRIOR TO COMPLETING THIS FORM, SEE INSTRUCTIONS ON REVERSE SIDE INCOMPLETE, POOR QUALITY, OR ILLEGIBLE FORMS CANNOT BE PROCESSED AND WILL BE RETURNED		
Name, address and phone number of person claiming ownership of the well permit: Name(s): <u>HEIS, LLC - Justin Hammer, Member</u> Mailing Address: <u>30616 Bryant Drive</u> City, St. Zip: <u>Evergreen, CO 80439</u> Phone: (<u>925</u>) <u>886</u> - <u>9272</u> Email: <u>justinhammerrevivid@gmail.com</u>		
Well Permit Number: <u>306119</u> Receipt Number: <u>3680637</u> Case Number (optional): _____ WELL LOCATION: County: <u>Adams</u> Well Name or # (optional): _____ <u>57700 E 24th Avenue</u> <u>Strasburg</u> <u>CO</u> <u>80136</u> Street Address at Well Location City State Zip <input type="checkbox"/> Check if well address is same as owner's mailing address <u>SW</u> 1/4 of the <u>NE</u> 1/4, Sec. <u>34</u> , Township <u>3.0</u> <input type="checkbox"/> N. or <input checked="" type="checkbox"/> S., Range <u>62.0</u> <input type="checkbox"/> E. or <input checked="" type="checkbox"/> W., <u>Sixth</u> _____ P.M. Distance from Section Lines: <u>3428</u> Ft. from <input type="checkbox"/> N. or <input checked="" type="checkbox"/> S. Line, <u>2985</u> Ft. from <input type="checkbox"/> E. or <input checked="" type="checkbox"/> W. Line. Subdivision Name (if applicable): _____, Lot _____, Block _____, Filing/Unit _____ NOTE: If changing/correcting the permitted location of a well, use Form No. GWS-42.		
I (we) claim and say that I am (we are) the owner(s) of the well permit described above, know the contents of the statements made herein, and state that they are true to my (our) knowledge. This filing is made pursuant to C.R.S. 37-90-143.		
Signature(s) of the New Owner	Please print the Signer's Name & Title	Date
It is the responsibility of the new owner of this well permit to complete and sign this form. If an agent is signing or entering information, please see instructions. Please allow 4 to 6 weeks for processing of this form. Thereafter, you can view or print the accepted document at: http://www.dwr.state.co.us/WellPermitSearch		
Signature of DWR staff indicates acceptance as a Change in Owner Name and/or Mailing Address. For Staff Use Only		
Staff Signature _____	Date _____	