

WATER SUPPLY INFORMATION SUMMARY

Section 30-28-133,(d), C.R.S. requires that the applicant submit to the County, "Adequate evidence that a water supply that is sufficient in terms of quantity, quality and dependability will be available to ensure an adequate supply of water.

This summary will need to be updated following receipt of official water resources report. Total acre-feet per year (AFY) calculations are required.

1. NAME OF DEVELOPMENT AS PROPOSED HCD Drilling - 6201 East Platte Ave. - HCD Drilling LLC	
2. LAND USE ACTION Subdivision	
3. NAME OF EXISTING PARCEL AS RECORDED Tract in NE4NW4 sec 18-14-65	
SUBDIVISION	FILING
BLOCK	LOT
4. TOTAL ACREAGE 7.13	5. NUMBER OF LOTS PROPOSED 1 PLAT MAP ENCLOSED <input type="checkbox"/> YES
6. PARCEL HISTORY - Please attach copies of deeds, plats or other evidence or documentation.	
A. Was parcel recorded with county prior to June 1, 1972? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. Has the parcel ever been part of a division of land action since June 1, 1972? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, describe the previous action _____	
7. LOCATION OF PARCEL - Include a map deliniating the project area and tie to a section corner.	
NE _____ 1/4 OF NW _____ 1/4 SECTION _____ 18 TOWNSHIP _____ 14 <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE _____ 65 <input type="checkbox"/> E <input checked="" type="checkbox"/> W	
PRINCIPAL MERIDIAN: <input checked="" type="checkbox"/> 6TH <input type="checkbox"/> N.M. <input type="checkbox"/> UTE <input type="checkbox"/> COSTILLA	
8. PLAT - Location of all wells on property must be plotted and permit numbers provided. Surveyors plat <input type="checkbox"/> Yes <input type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year	10. WATER SUPPLY SOURCE
HOUSEHOLD USE # _____ of units _____ GPD _____ AF COMMERCIAL USE # <u>17,000</u> of S.F. _____ GPD _____ AF IRRIGATION # _____ of acres _____ GPD _____ AF STOCK WATERING # _____ of head _____ GPD _____ AF OTHER _____ _____ GPD _____ AF TOTAL _____ _____ GPD _____ AF	<input checked="" type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS <u>Well Number 4341F</u> <u>Receipt Number 9078626</u> <u>District approved for irrigation use only</u>
	<input type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS - (CHECK ONE) <input type="checkbox"/> ALLUVIAL <input type="checkbox"/> UPPER ARAPAHOE <input type="checkbox"/> UPPER DAWSON <input type="checkbox"/> LOWER ARAPAHOE <input type="checkbox"/> LOWER DAWSON <input type="checkbox"/> LARAMIE FOX HILLS <input type="checkbox"/> DENVER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER _____
	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT NAME <u>Cherokee Metro</u> LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	WATER COURT DECREE CASE NO.'S _____ _____ _____
11. ENGINEER'S WATER SUPPLY REPORT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.)	
12. TYPE OF SEWAGE DISPOSAL SYSTEM	
<input type="checkbox"/> SEPTIC TANK/LEACH FIELD <input checked="" type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME <u>Cherokee Metro</u>	
<input type="checkbox"/> LAGOON <input type="checkbox"/> VAULT - LOCATION SEWAGE HAULED TO _____	
<input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design) <input type="checkbox"/> OTHER _____	