

# 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.

1. NAME OF DEVELOPMENT AS PROPOSED <b>HCD Drilling - 6201 East Platte Ave. - HCD Drilling LLC</b>			
2. LAND USE ACTION <b>Subdivision</b>			
3. NAME OF EXISTING PARCEL AS RECORDED <b>Tract in NE4NW4 sec 18-14-65</b>			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE <b>7.13</b>	5. NUMBER OF LOTS PROPOSED <b>1</b>	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.			
<b>NE</b> 1/4 OF <b>NW</b> 1/4 SECTION <b>18</b> TOWNSHIP <b>14</b> <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE <b>65</b> <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		<input checked="" type="checkbox"/> EXISTING WELLS	<input type="checkbox"/> DEVELOPED SPRING
COMMERCIAL USE # <b>17,000</b> of S.F. _____ GPD _____ AF		WELL PERMIT NUMBERS <b>Well Number 4341F</b> <b>Receipt Number 9078626</b> <b>District approved for irrigation use only</b>	
IRRIGATION # _____ of acres _____ GPD _____ AF		<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input checked="" type="checkbox"/> DISTRICT NAME <b>Cherokee Metro</b>	
STOCK WATERING # _____ of head _____ GPD _____ AF		LETTER OF COMMITMENT FOR SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
OTHER _____ GPD _____ AF		<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 _____	
TOTAL _____ GPD _____ AF		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 <b>Cherokee Metro</b>		
<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 _____		