

FORM NO. GWS-76 05/2011	WATER SUPPLY INFORMATION SUMMARY STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 Main (303) 866-3581 water.state.co.us		
	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: ELK VIEW ESTATES			
2. LAND USE ACTION: FINAL PLAT			
3. NAME OF EXISTING PARCEL AS RECORDED: N/A SUBDIVISION: N/A , FILING (UNIT) N/A , BLOCK N/A , LOT N/A			
4. TOTAL ACREAGE: 17.1		5. NUMBER OF LOTS PROPOSED 6 PLAT MAP ENCLOSED? ☒ YES or ☐ NO	
6. PARCEL HISTORY – Please attach copies of deeds, plats, or other evidence or documentation. TITLE ATTACHED A. Was parcel recorded with county prior to June 1, 1972? ☐ YES or ☒ NO B. Has the parcel ever been part of a division of land action since June 1, 1972? ☐ YES or ☒ NO If yes, describe the previous action:			
7. LOCATION OF PARCEL – Include a map delineating the project area and tie to a section corner. SW 1/4 of the SE 1/4, Section 23 , Township 12 ☐ N or ☒ S, Range 66 ☐ E or ☒ W Principal Meridian (choose only one): ☒ Sixth ☐ New Mexico ☐ Ute ☐ Costilla Optional GPS Location: GPS Unit must use the following settings: Format must be UTM , Units must be meters , Datum must be NAD83 , Unit must be set to true N , ☐ Zone 12 or ☐ Zone 13 Easting: _____ Northing: _____			
8. PLAT – Location of all wells on property must be plotted and permit numbers provided. Surveyor's Plat: ☐ YES or ☐ NO If not, scaled hand drawn sketch: ☒ YES or ☐ NO N/A			
9. ESTIMATED WATER REQUIREMENTS		10. WATER SUPPLY SOURCE	
USE	WATER REQUIREMENTS		☒ NEW WELLS - PROPOSED AQUIFERS – (CHECK ONE) ☐ ALLUVIAL ☐ UPPER ARAPAHOE ☐ UPPER DAWSON ☐ LOWER ARAPAHOE ☐ LOWER DAWSON ☐ LARAMIE FOX HILLS ☒ DENVER ☐ DAKOTA ☐ OTHER: _____ WATER COURT DECREE CASE NUMBERS: 25CW3026
HOUSEHOLD USE # 6 of units	Gallons per Day 232	Acre-Feet per Year 0.26	
COMMERCIAL USE # 0 of S. F	0	0	
IRRIGATION # _____ of acres	See comments on water resources report regarding irrigation		
STOCK WATERING # 0 of head	0	0	
OTHER: _____			☐ EXISTING WELL ☐ DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____ _____ ☐ MUNICIPAL ☐ ASSOCIATION ☐ COMPANY ☐ DISTRICT NAME _____ LETTER OF COMMITMENT FOR SERVICE ☐ YES or ☐ NO
TOTAL 6	1,393	1.56	
11. WAS AN ENGINEER'S WATER SUPPLY REPORT DEVELOPED? ☒ YES or ☐ NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.)			
12. TYPE OF SEWAGE DISPOSAL SYSTEM ☒ SEPTIC TANK/LEACH FIELD ☐ CENTRAL SYSTEM ☐ LAGOON ☐ VAULT ☐ ENGINEERED SYSTEM (Attach a copy of engineering design.) ☐ OTHER: DISTRICT NAME: _____ LOCATION SEWAGE HAULED TO: _____			