This document may need to be updated based on a new WRR, State does mention a new well permit could be required and this well would need to be no longer in use

Well permit no. 73654 was issued on March 19, 1974 pursuant to C.R.S. 37-90-105 for a 20 acre parcel for domestic purposes. This well appears to be withdrawing groundwater from the not-nontributary Dawson aguifer. Upon approval of this subdivision the conditions under which this permit was issued would no longer exist. making the well out of compliance with its permit. Should well 73654 be used on the proposed Lot 2, approval of a determination of water right, a replacement plan and a new large capacity well permit would be required before subdivision approval."

If yes, describe the previous action

12. TYPE OF SEWAGE DISPOSAL SYSTEM

SEPTIC TANK/LEACH FIELD

PRINCIPAL MERIDIAN:

OTHER

□ LAGOON

TOTAL

INFORMATION SUMMARY

nt submit to the County,"Adequate evidence that a water supply that ndability will be available to ensure an adequate supply of water. divided LOT BLOCK PLAT MAP ENCLOSED X YES SED 3 evidence or documentation. □ NO ne 1, 1972? ☐ YES X NO 7. LOCATION OF PARCEL - Include a map deliniating the project area and tie to a section corner. NE 1/4 OF 1/4 SECTION 14 TOWNSHIP 11 IN IS RANGE 65 I E IN W Ø 6TH □ N.M. □ UTE □ COSTILLA 8. PLAT - Location of all wells on property must be plotted and permit numbers provided. 9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year 10. WATER SUPPLY SOURCE **⊠** EXISTING □ DEVELOPED ☐ NEW WELLS -SPRING WELLS HOUSEHOLD USE # 3 of units 1784 GPD 2 AF PROPOSED ABUFERS - (CHECK ONE) C ALLUVIAL UPPER ARAPAHOE **WELL PERMIT NUMBERS** UPPER DAWSON
LOWER DAWSON Q LOWER ARAPAKOE LARAMIE FOX HILLS COMMERCIAL USE #_____ of S.F. _____ GPD _____ AF □ DAKOTA C DEKYER OTHER -IRRIGATION # ___ of acres ____ GPD ___ AF STOCK WATERING #_____ of head _____ GPD ____ AF ■ MUNICIPAL WATER COURT DECREE CASE NO.'S □ ASSOCIATION _____ GPD ____ AF ☐ COMPANY □ DISTRICT GPD 2 AF NAME LETTER OF COMMITMENT FOR SERVICE I YES INO 11. ENGINEER'S WATER SUPPLY REPORT 💆 YES 🗆 NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.) ☐ CENTRAL SYSTEM - DISTRICT NAME □ VAULT - LOCATION SEWAGE HAULED TO _____ ENGINEERED SYSTEM (Attach a copy of engineering design)