

FORM NO. GWS-76 05/2011	<b>WATER SUPPLY INFORMATION SUMMARY</b> STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 Main (303) 866-3581 <a href="http://water.state.co.us">water.state.co.us</a>																	
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>JUDGE ORR RANCHETTES</b>																		
2. LAND USE ACTION: <b>FINAL PLAT</b>																		
3. NAME OF EXISTING PARCEL AS RECORDED: SUBDIVISION: <b>UNPLATTED</b> , FILING (UNIT) _____, BLOCK _____, LOT _____																		
4. TOTAL ACREAGE: <b>40.21</b>	5. NUMBER OF LOTS PROPOSED <b>7</b> PLAT MAP ENCLOSED? <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO																	
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 or <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 or <input checked="" type="checkbox"/> NO If yes, describe the previous action: _____																		
7. LOCATION OF PARCEL – Include a map delineating the project area and tie to a section corner. _____ 1/4 of the <u>S/E</u> 1/4, Section <u>33</u> , Township <u>12</u> <input type="checkbox"/> N or <input checked="" type="checkbox"/> S, Range <u>64</u> <input type="checkbox"/> E or <input checked="" type="checkbox"/> W Principal Meridian (choose only one): <input checked="" type="checkbox"/> Sixth <input type="checkbox"/> New Mexico <input type="checkbox"/> Ute <input type="checkbox"/> Costilla <b>Optional GPS Location:</b> GPS Unit must use the following settings: Format must be <b>UTM</b> , Units must be <b>meters</b> , Datum must be <b>NAD83</b> , Unit must be set to <b>true N</b> , <input type="checkbox"/> Zone 12 or <input type="checkbox"/> Zone 13 Easting: _____ Northing: _____																		
8. PLAT – Location of all wells on property must be plotted and permit numbers provided. Surveyor's Plat: <input checked="" type="checkbox"/> YES or <input type="checkbox"/> NO    If not, scaled hand drawn sketch: <input type="checkbox"/> YES or <input type="checkbox"/> NO																		
9. ESTIMATED WATER REQUIREMENTS <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">USE</th> <th style="width: 30%;">WATER REQUIREMENTS</th> <th style="width: 40%;"></th> </tr> </thead> <tbody> <tr> <td>HOUSEHOLD USE # <u>7</u> of units</td> <td>Gallons per Day _____ Acre-Feet per Year <u>.55</u></td> <td rowspan="4"> <input type="checkbox"/> EXISTING WELL    <input type="checkbox"/> DEVELOPED SPRING            WELL PERMIT NUMBERS            _____            _____            _____         </td> </tr> <tr> <td>COMMERCIAL USE # _____ of S. F</td> <td>_____</td> </tr> <tr> <td>IRRIGATION # _____ of acres</td> <td>_____</td> </tr> <tr> <td>STOCK WATERING # _____ of head</td> <td>_____</td> </tr> <tr> <td>OTHER: _____</td> <td>_____</td> <td rowspan="2"> <input type="checkbox"/> MUNICIPAL  <input type="checkbox"/> ASSOCIATION  <input type="checkbox"/> COMPANY  <input type="checkbox"/> DISTRICT            NAME _____            LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES or <input type="checkbox"/> NO         </td> </tr> <tr> <td>TOTAL</td> <td>_____ <b>3.85</b></td> </tr> </tbody> </table>	USE	WATER REQUIREMENTS		HOUSEHOLD USE # <u>7</u> of units	Gallons per Day _____ Acre-Feet per Year <u>.55</u>	<input type="checkbox"/> EXISTING WELL <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS _____ _____ _____	COMMERCIAL USE # _____ of S. F	_____	IRRIGATION # _____ of acres	_____	STOCK WATERING # _____ of head	_____	OTHER: _____	_____	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input type="checkbox"/> DISTRICT NAME _____ LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES or <input type="checkbox"/> NO	TOTAL	_____ <b>3.85</b>	10. WATER SUPPLY SOURCE <input checked="" 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 checked="" type="checkbox"/> DENVER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER: _____ WATER COURT DECREE CASE NUMBERS: <u>679-BD</u> _____ _____
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TOTAL	_____ <b>3.85</b>																	
11. WAS AN ENGINEER'S WATER SUPPLY REPORT DEVELOPED? <input checked="" type="checkbox"/> YES or <input 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 <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input checked="" type="checkbox"/> SEPTIC TANK/LEACH FIELD   <input type="checkbox"/> LAGOON   <input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design.)         </div> <div style="width: 48%;"> <input type="checkbox"/> CENTRAL SYSTEM            DISTRICT NAME: _____  <input type="checkbox"/> VAULT            LOCATION SEWAGE HAULED TO: _____  <input type="checkbox"/> OTHER: _____         </div> </div>																		