

**COLORADO DIVISION OF WATER RESOURCES FIELD INSPECTION REPORT**

Please complete this form in ink

Application Receipt No(s): \_\_\_\_\_

DIV \_\_\_\_\_ WD \_\_\_\_\_ WELL STRUCTURE NO. (IF APPLICABLE): \_\_\_\_\_

DATE OF INSPECTION: \_\_\_\_\_ PURPOSE OF INSPECTION: LATE REG  OTHER  \_\_\_\_\_

WATER COMMISSIONER NAME: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ or (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

APPLICANT: \_\_\_\_\_ Person contacted if not applicant: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ext. \_\_\_\_\_

EXISTING WELL LOCATION:

\_\_\_\_\_ 1/4, of the \_\_\_\_\_ 1/4, of Section \_\_\_\_\_, Township \_\_\_\_\_  N or  S, Range \_\_\_\_\_  E or  W, \_\_\_\_\_ P.M.

Distance from section line \_\_\_\_\_  N or  S, \_\_\_\_\_  E or  W, County \_\_\_\_\_

OPTIONAL INFORMATION (GPS unit must be set for NAD83, meters, and true north) Zone 12  or 13

Easting \_\_\_\_\_ Northing \_\_\_\_\_

Mark type of existing well:  drilled,  hand dug,  spring well,  gallery well,  gravel pit,  other \_\_\_\_\_

Estimated date well constructed: \_\_\_\_\_ Date of first use: \_\_\_\_\_ Estimate pumping rate: \_\_\_\_\_ GPM

Total number of acres in this tract/parcel: \_\_\_\_\_ acres

Address of property (if different from than the applicant address): \_\_\_\_\_

Additional subdivision /parcel information: \_\_\_\_\_

Number of non-exempt acres irrigated: \_\_\_\_\_ Name of Aug. Plan? \_\_\_\_\_

Any other wells located on this property? (yes) how many \_\_\_\_\_, (no); permit #, case #, use? \_\_\_\_\_

Use of Well:

- Household use in (indicate how many) \_\_\_\_\_ single family dwelling(s)
- Watering of poultry, domestic animals, and livestock – approximately how many head? \_\_\_\_\_
- Watering of livestock only – approximately how many head? \_\_\_\_\_ Is this a feed lot?  yes  no
- Estimated area of historical lawn and garden: \_\_\_\_\_  Square feet  acre of lawn and garden
- Fire protection
- Commercial – drinking & sanitary only? (write details in “comments” section)
- Other (write details in “comments” section)
- YES  NO WERE THE USES CHECKED ABOVE INITIATED PRIOR TO MAY 8, 1972?

NOTE: If ANY CHANGE IN HISTORIC USE OF THE WELL HAS OCCURRED SINCE MAY 8, 1972, please indicate the date(s) the use changed, and discuss this change/expansion of the current or proposed use in the comments section of this form.

Signature of Water Commissioner: \_\_\_\_\_

Dated: \_\_\_\_\_

(NOTE: If filing electronically without a signature, please check the box. )

Additional comments and/or information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

More room for comments on the back

