



Castle Aggregate

549 East Cucharas, Street Colorado Springs, CO 80919 Ph:719-598-0215 Fax:719-598-3053

April 20, 2021

Colorado Division of Reclamation Mines and Safety
Attn: Tim Cazier
Room 215
1313 Sherman Street
Denver CO 80203

Re: P-2017-008 & P-2014-016 Surety Release Issues

Dear Tim:

The following pages are the response to the referenced NOI. The following have been submitted:

Page 1 – Well Permit 307358 Replaces 307364
Page 3 Application and approval of the correct well location for 307473
Page 4 Application and approval of the correct well location for 307360
Page 5 & 6 – Well permit 307364 Replaces 307473

In reference to the abandonment reports there was no ground water encountered at any of the Borings B-1 through B-6. Minor Seepage from fissures was encountered on the drill and reported as water encountered but there was not any type of consistent ground water level in these borings.

Any Questions please give me a call.

Sincerely,

Jerald Schnabel, President
Castle Aggregate

549 Cucharas Street
Colorado Springs CO 80919
Email: Jerald_schnabel@castleaggregate.com



COLORADO
Division of Water Resources
Department of Natural Resources

WELL PERMIT NUMBER 307358-
RECEIPT NUMBER 3683171A

ORIGINAL PERMIT APPLICANT(S)

TRANSIT MIX CONCRETE CO

APPROVED WELL LOCATION

Water Division: 2 Water District: 10
Designated Basin: N/A
Management District: N/A
County: EL PASO
Parcel Name: N/A
Physical Address: 2485 HITCH RACK RANCH RD COLORADO
SPRINGS, CO 80926
NW 1/4 NW 1/4 Section 16 Township 16.0 S Range 67.0 W Sixth P.M.

AUTHORIZED AGENT

HYDRO-LOGIC SOLUTIONS, INC (DAY, MIKE)

UTM COORDINATES (Meters, Zone:13, NAD83)

Easting: 508355.0 Northing: 4279197.0

PERMIT TO CONSTRUCT A NEW WELL

**ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT
CONDITIONS OF APPROVAL**

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of this permit does not ensure that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-92-602(3)(b)(I) for uses as described in CRS 37-92-602(1)(f). Use of this well is limited to monitoring water levels and/or water quality sampling.
- 4) Approved for the use of an existing well acknowledged for construction under monitoring hole notice 56847-MH, and known as LTC-GW-1.
- 5) This well must be equipped with a locking cap or seal to prevent well contamination or possible hazards as an open well. The well must be kept capped and locked at all times except during sampling or measuring.
- 6) Records of water level measurements and water quality analyses shall be maintained by the well owner and submitted to the Division of Water Resources upon request.
- 7) Upon conclusion of the monitoring program the well owner shall plug this well in accordance with Rule 16 of the Water Well Construction Rules. A Well Abandonment Report must be completed and submitted to the Division of Water Resources within 60 days of plugging.
- 8) The owner shall mark the well in a conspicuous location with the well permit number and name of aquifer as appropriate, and shall take necessary means and precautions to preserve these markings.
- 9) This well must have been constructed by or under the supervision of a licensed well driller or other authorized individual according to the Water Well Construction Rules.
- 10) This well must be located not more than 200 feet from the location specified on this permit.

NOTE: Issuance of this permit does not guarantee that this well can be converted to a production well under a future permit. Additionally, pursuant to Rule 14.2 of the Water Well Construction Rules (2 CCR 402-2), monitoring holes constructed pursuant to a monitoring hole notice shall not be converted to a production well. (Upon obtaining a permit from the State Engineer, a monitoring hole may be converted to a monitoring well, recovery well for remediation of the aquifer, or a dewatering system for dewatering the aquifer.)

Ailis A. Thyne

Issued By AILIS THYNE

Date Issued: 10/25/2017

Expiration Date: N/A



COLORADO

Division of Water Resources

Department of Natural Resources

1313 SHERMAN ST, STE 821

DENVER, CO. 80203

RECEIPT

Date: 2/25/2021 11:49:47 AM

Order Number: 6261

Transaction Number: 8444

Cashier: 75220

Jerald Schnabel

549 EAST CUCHARRAS STREET

COLORADO SPRINGS, CO. 80903

Application/Receipt	Quantity	Description	Price	Extended Price
10009959	1	Exempt Location Amendment/Correction (First Used On or After May 8, 1972) (Legacy Code: 27)	\$60.00	\$60.00
10009960	1	Exempt Location Amendment/Correction (First Used On or After May 8, 1972) (Legacy Code: 27)	\$60.00	\$60.00

Subtotal: \$120.00

Service Fee: \$3.47

Total: \$123.47

(Credit Card) Tendered: \$123.47
[*1024]

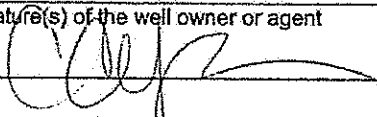
Change: \$0.00

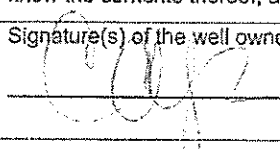
Exempt Location
Amendment/Correction (First
Used On or After May 8, 1972)
(Legacy Code: 27)

Please allow 4-6 weeks for the processing of your application.

paid



Form No. GWS-42 08/2016	COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 Sherman St., Ste 821, Denver CO 80203 (303) 866-3581 dwrpermitsonline@state.co.us	For Office Use Only RCVD DWR 02/25/2021 10009959
APPLICATION FOR WELL LOCATION AMENDMENT		
PRIOR TO COMPLETING THIS FORM, SEE INSTRUCTIONS ON REVERSE SIDE INCOMPLETE, POOR QUALITY, OR ILLEGIBLE FORMS CANNOT BE PROCESSED AND WILL BE RETURNED		
Name, address and phone number of well owner: Name(s): <u>Hitch Rack Ranch RMBC, Cindi Almendinger</u> Mailing Address: <u>200 Hagen Court</u> City, St. Zip: <u>Aiken South Carolina 29803</u> Phone: <u>(719) 576 - 3890</u> Email: <u>cimata3@gmail.com</u>		
Location Amendment requested for: <input type="checkbox"/> Exempt/small capacity well permitted, registered, or first used prior to May 8, 1972, OR non-exempt well permitted prior to May 17, 1965, or registered pursuant to Section 37-90-139 – NO FEE REQUIRED (see instructions on reverse side). <input checked="" type="checkbox"/> Exempt well permitted on or after May 8, 1972, OR non-exempt well permitted on or after May 17, 1965 – FEE REQUIRED (see instructions on reverse side).		
Well Permit Number: <u>307360</u> Receipt Number: <u>368317C</u> AMENDED WELL LOCATION: County: <u>El Paso</u> Owner's Well Designation (optional): <u>LTC-GW-3</u>		
Street Address at Well Location <u>Colorado Springs</u> <u>Colorado</u> City State Zip <u>NE 1/4 of the SE 1/4, Sec. 16</u> , Township <u>16.0</u> <input type="checkbox"/> N. or <input checked="" type="checkbox"/> S., Range <u>67.0</u> <input type="checkbox"/> E. or <input checked="" type="checkbox"/> W., <u>SIXTH</u> P.M. Distance from Section Lines: _____ Ft. from <input checked="" type="checkbox"/> N. or <input type="checkbox"/> S. Line, _____ Ft. from <input type="checkbox"/> E. or <input type="checkbox"/> W. Line. Subdivision Name (if applicable): <u>Hitch Rack Ranch</u> , Lot _____, Block _____, Filing/Unit _____		
Optional: GPS well location information in UTM format. The following GPS settings are required: Format must be UTM. <input type="checkbox"/> Zone 12 or <input checked="" type="checkbox"/> Zone 13. Units must be in meters. Datum must be NAD83. Unit must be set to true north. Easting: <u>508868.60 509841</u> Northing: <u>4278937.16 4278554</u>		
The location of the existing well needs to be amended for the following reason(s): Attach appropriate documentation as necessary. Original UTM data does not correlate to the Colorado Division of Reclamation and Mines and Safety inspection. The discrepancy is greater than 200 feet and field investigation supports the CDrms Latitude and Longitude coordinates. We are asking to amend the well location in this permit to correct our error in this application.		
The making of false statements herein constitutes perjury in the second degree, which is punishable as a class 1 misdemeanor pursuant to C.R.S. 24-4-104(13)(a). I (we) claim and say that I (we) (are) the owner(s) of the well described above, have read the statements herein, know the contents thereof, and state that they are true to my (our) knowledge.		
Signature(s) of the well owner or agent 	Please print the Signer's Name & Title <u>Cindi Almendinger</u>	Date <u>2/14/21</u>
Signature of DWR staff indicates approval of the amended well location shown above pursuant to Policy Memorandum 93-1. For Staff Use Only		
Staff Signature <u>Jeff Davis</u> Date <u>April 1, 2021</u>		

Form No. GWS-42 08/2016	COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 Sherman St., Ste 821, Denver CO 80203 (303) 866-3581 dwrpermitsonline@state.co.us	For Office Use Only RCVD DWR 02/25/2021 10009960
APPLICATION FOR WELL LOCATION AMENDMENT		
PRIOR TO COMPLETING THIS FORM, SEE INSTRUCTIONS ON REVERSE SIDE INCOMPLETE, POOR QUALITY, OR ILLEGIBLE FORMS CANNOT BE PROCESSED AND WILL BE RETURNED		
Name, address and phone number of well owner:		
Name(s): <u>Hitch Rack Ranch RMBC, Cindi Allmendinger</u>		
Mailing Address: <u>200 Hagen Court</u>		
City, St. Zip: <u>Aiken South Carolina 29803</u>		
Phone: <u>(719) 576-3890</u> Email: <u>cimata3@gmail.com</u>		
Location Amendment requested for:		
<input type="checkbox"/> Exempt/small capacity well permitted, registered, or first used prior to May 8, 1972, OR non-exempt well permitted prior to May 17, 1965, or registered pursuant to Section 37-90-139 – NO FEE REQUIRED (see instructions on reverse side).		
<input checked="" type="checkbox"/> Exempt well permitted on or after May 8, 1972, OR non-exempt well permitted on or after May 17, 1965 – FEE REQUIRED (see instructions on reverse side).		
Well Permit Number: <u>307473</u>		Receipt Number: <u>3883171B</u>
AMENDED WELL LOCATION: County: <u>El Paso</u>		Owner's Well Designation (optional): <u>LTC-GW-2</u>
Street Address at Well Location	<u>Colorado Springs</u> City	<u>Colorado</u> State
<u>NE 1/4 of the SE 1/4, Sec. 16</u> , Township <u>16.0</u>	<input type="checkbox"/> N. or <input checked="" type="checkbox"/> S., Range <u>67.0</u>	<input type="checkbox"/> E. or <input checked="" type="checkbox"/> W., <u>SIXTH</u> P.M.
Distance from Section Lines: _____ Ft. from <input checked="" type="checkbox"/> N. or <input type="checkbox"/> S. Line, _____ Ft. from <input type="checkbox"/> E. or <input type="checkbox"/> W. Line.		
Subdivision Name (if applicable): <u>Hitch Rack Ranch</u> , Lot _____, Block _____, Filing/Unit _____		
Optional: GPS well location information in UTM format. The following GPS settings are required: Format must be UTM. <input type="checkbox"/> Zone 12 or <input checked="" type="checkbox"/> Zone 13. Units must be in meters. Datum must be NAD83. Unit must be set to true north.		
Easting: 509770.62 <u>509910</u> Northing: 4275626.29 <u>4278585</u>		
The location of the existing well needs to be amended for the following reason(s): Attach appropriate documentation as necessary. Original UTM data does not correlate to the Colorado Division of Reclamation and Mines and Safety inspection. The discrepancy is greater than 200 feet and field investigation supports the CDrms Latitude and Longitude coordinates. We are asking to amend the well location in this permit to correct our error in this application.		
The making of false statements herein constitutes perjury in the second degree, which is punishable as a class 1 misdemeanor pursuant to C.R.S. 24-4-104(13)(a). I (we) claim and say that I (we) (are) the owner(s) of the well described above, have read the statements herein, know the contents thereof, and state that they are true to my (our) knowledge.		
Signature(s) of the well owner or agent 	Please print the Signer's Name & Title <u>Cindi Allmendinger</u>	Date <u>2/25/21</u>
Signature of DWR staff indicates approval of the amended well location shown above pursuant to Policy Memorandum 93-1. For Staff Use Only		
Staff Signature <u>Jeff Davis</u>		Date <u>April 1, 2021</u>



COLORADO
Division of Water Resources
Department of Natural Resources

WELL PERMIT NUMBER 307364-
RECEIPT NUMBER 3683171G

ORIGINAL PERMIT APPLICANT(S)

TRANSIT MIX CONCRETE CO

APPROVED WELL LOCATION

Water Division: 2 Water District: 10
Designated Basin: N/A
Management District: N/A
County: EL PASO
Parcel Name: N/A
Physical Address: 2485 HITCH RANCH RD COLORADO
SPRINGS, CO 80926
NE 1/4 SE 1/4 Section 16 Township 16.0 S Range 67.0 W Sixth P.M.

AUTHORIZED AGENT

HYDRO-LOGIC SOLUTIONS, INC (DAY, MIKE)

UTM COORDINATES (Meters, Zone:13, NAD83)

Easting: 509993.0 Northing: 4278621.0

PERMIT TO CONSTRUCT A NEW WELL

**ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT
CONDITIONS OF APPROVAL**

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- 3) Approved pursuant to CRS 37-92-602(3)(b)(I) for uses as described in CRS 37-92-602(1)(f). Use of this well is limited to monitoring water levels and/or water quality sampling.
- 4) Approved for the use of an existing well acknowledged for construction under monitoring hole notice 56977-MH, and known as LTC-GW-7.
- 5) This well must be equipped with a locking cap or seal to prevent well contamination or possible hazards as an open well. The well must be kept capped and locked at all times except during sampling or measuring.
- 6) Records of water level measurements and water quality analyses shall be maintained by the well owner and submitted to the Division of Water Resources upon request.
- 7) Upon conclusion of the monitoring program the well owner shall plug this well in accordance with Rule 16 of the Water Well Construction Rules. A Well Abandonment Report must be completed and submitted to the Division of Water Resources within 60 days of plugging.
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NOTICE: This permit has been approved subject to the following changes: The quarter/quarter and quarter were determined from UTM coordinate values provided with the permit application. You are hereby notified that you have the right to appeal the issuance of this permit, by filing a written request with this office within sixty (60) days of the date of issuance, pursuant to the State Administrative Procedures Act. (See Section 24-4-104 through 106, C.R.S.)

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WELL PERMIT NUMBER 307364-

RECEIPT NUMBER 3683171G

Ailis A. Thyne

Date Issued: 10/25/2017

Expiration Date: N/A

Issued By AILIS THYNE

