



STATE OF  
COLORADO

Lennberg - DNR, Patrick <patrick.lennberg@state.co.us>

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## Platte Valley Monitoring Wells: Broda

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**Wyatt WEBSTER** <wyatt.webster@holcim.com>

Wed, Jul 10, 2024 at 2:03 PM

To: "Lennberg - DNR, Patrick" <patrick.lennberg@state.co.us>

Patrick,

All three wells have been successfully abandoned. Forms attached below.

Thank you,

**Wyatt Webster** | Environmental and Land Manager

Holcim Group | Holcim - WCR, Inc.

Address: [1687 Cole Blvd., Suite 300](#)

[Golden, CO 80401](#)

Office & Mobile: (702) 379-4623

Email: [Wyatt.Webster@holcim.com](mailto:Wyatt.Webster@holcim.com)

[Quoted text hidden]

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### 3 attachments



**Holcim Well abandonments MW-2.pdf**

413K



**Holcim Well abandonments MW-1.pdf**

413K



**Holcim Well abandonments MW-3.pdf**

561K

Form No GWS-09  03/2017	STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 303.866.3581 <a href="http://dwr.colorado.gov">dwr.colorado.gov</a> and <a href="mailto:dwrpermitsonline@state.co.us">dwrpermitsonline@state.co.us</a>	For Office Use Only
<b>WELL ABANDONMENT REPORT</b>		
Use to report plugging and sealing of permitted wells, monitoring and other holes. Type or print in black or blue ink. Instructions and plugging standards are on reverse side		
1. Well Permit Number of plugged well _____ or MH File Number MH- _____ Owners Well Designation- _____ SSSSSSSSSSSS Receipt Number: _____		
<b>2. Individual/Company responsible for plugging and sealing the well:</b> Name(s) _____ License # _____ Mailing Address _____ City, St., Zip _____ Phone (_____) _____ Email _____		
3. Well (Hole) Owner: Name(s): _____ Phone: (_____) _____ Email: _____ Mailing Address, City, St., Zip: _____		
4. Well Location Address: _____		
5. GPS Well Location: County _____ UTM <input type="checkbox"/> Zone 12 or <input type="checkbox"/> Zone 13 Easting _____ Northing _____		
6. Legal Location: ___ 1/4 of the ___ 1/4, Sec ____, Twp ____ N or S ____, Range ____ E or W ____, ____ P.M. Distance from Section Lines _____ Ft. From ____ N or S ____, _____ Ft. From ____ E or W ____ Line. Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____		
7. I/we report the existing well/hole was plugged and sealed on _____ (date) for the following reason(s): ___ The well was plugged and sealed as required under Well Permit Number _____. ___ The well was not in use and was plugged and sealed. ___ Other (please explain) _____		
8. Aquifer Type: <input type="checkbox"/> Type I (One Confining Layer) <input type="checkbox"/> Type I (Multiple Confining Layer) <input type="checkbox"/> Laramie-Fox Hills (check one) <input type="checkbox"/> Type II (Not Overlain by Type III) <input type="checkbox"/> Type II (Overlain by Type III) <input type="checkbox"/> Type III (alluvial)		
9. Intervals of Casing Removed/Ripped: from _____ feet to _____ feet,    from _____ feet to _____ feet,    from _____ feet to _____ feet, from _____ feet to _____ feet,    from _____ feet to _____ feet,    from _____ feet to _____ feet,		
10. Amount and Type of Material	Method of Placement	Interval
_____	_____	from _____ feet to _____ feet
_____	_____	from _____ feet to _____ feet
_____	_____	from _____ feet to _____ feet
_____	_____	from _____ feet to _____ feet
I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed (or name entered if filing online) and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402.2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), C.R.S., and is punishable by fines up to \$1,000 and/or revocation of the contracting license. If filing online the State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.		
11. Signature(s)  _____	Please Print the Name, Title, & License No.  _____	Date  _____
It is the responsibility of the well owner to have the well/hole properly plugged and sealed. The Well Construction Contractor is responsible for notifying the owner of this requirement in writing.		

## Instructions

This report must be computer-generated online, typed or printed in BLACK OR BLUE INK and may be reproduced by photocopy or computer generation. Photocopy reproductions must retain margins and print quality. Attach additional sheets if more space is required. Each additional sheet must be identified at the top by the well owner's name, the permit number, form name/number and a sequential page number. Report depths in feet below ground surface.

If filing online please see the [FORM SUBMITTAL, PAYMENT OPTIONS, & FEE SCHEDULE](#)

You may also save, print and email the completed form to: [dwrpermitsonline@state.co.us](mailto:dwrpermitsonline@state.co.us)

These reports must be completed and submitted to the Division of Water Resources, usually within 60 days of plugging and sealing the well/hole.

Please refer to **Form GWS-09A** for the Standards for Plugging, Sealing, and Abandoning Wells and Boreholes

**Item Instructions:** (numbers correspond with those on the front of this form)

1. Complete the well permit and receipt number for the abandoned well.
2. Complete the name and contact information for the person performing the abandonment work.
3. Complete the well owner name and contact information.
4. Complete the address where the abandoned well is located.
5. Provide the GPS location and County where the abandoned well is located.

Colorado contains two (2) UTM zones. Zone 13 covers most of Colorado. The boundary between Zone 12 and Zone 13 is the 108<sup>th</sup> Meridian (longitude). West of the 108<sup>th</sup> Meridian is UTM Zone 12 and east of the 108<sup>th</sup> Meridian is UTM Zone 13. The 108<sup>th</sup> Meridian is approximately 57 miles east of the Colorado-Utah state line. On most GPS units, the UTM zone is given as part of the Easting measurement, e.g. 12T0123456. Check the appropriate box for the zone.

6. Complete the legal description location of the (abandoned) well. For wells located in subdivisions, the name, lot, block, and filing, must be provided.
7. Indicate the reason(s) for plugging and sealing the well/hole.
8. Indicate the aquifer in which the abandoned well was completed.
9. Indicate the intervals where casing was removed, perforated, or ripped.
10. Complete the amount, type, method of placement and interval placed of the sealing materials.
11. Complete the Name, Title, and License Number (if applicable) of the individual(s) who are responsible for the work performed. The report must be signed by the responsible party per Rule 17.4. If applicable, indicate if Professional Engineer or Professional Geologist in place of License Number.

**Rule 17.4 Certification** - Work reports must be signed and certified as to accuracy and truthfulness of the information on the report by the well construction or pump installation contractors or authorized individuals responsible for the work performed by them or under their direction or supervision, or by the private driller or private pump installer if the work was performed by them. Such reports are deemed to be completed, signed and certified under oath.

Submit completed report to: State of Colorado, Office of the State Engineer, 1313 Sherman St, Room 821, Denver, CO 80203. You may also save, print, scan and email the completed form to [dwrpermitsonline@state.co.us](mailto:dwrpermitsonline@state.co.us)

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<h2 style="margin: 0;">WELL ABANDONMENT REPORT</h2> <p style="margin: 0;">Use to report plugging and sealing of permitted wells, monitoring and other holes. Type or print in black or blue ink. Instructions and plugging standards are on reverse side</p>		
1. Well Permit Number of plugged well _____ or MH File Number MH- _____ Owners Well Designation- _____ SSSSSSSSSSSS Receipt Number: _____		
2. Individual/Company responsible for plugging and sealing the well: Name(s) _____ License # _____ Mailing Address _____ City, St., Zip _____ Phone ( _____ ) _____ Email _____		
3. Well (Hole) Owner: Name(s): _____ Phone: ( _____ ) _____ Email: _____ Mailing Address, City, St., Zip: _____		
4. Well Location Address: _____		
5. GPS Well Location: County _____ UTM <input type="checkbox"/> Zone 12 or <input type="checkbox"/> Zone 13 Easting _____ Northing _____		
6. Legal Location: ___ 1/4 of the ___ 1/4, Sec ____, Twp ____ N or S ____, Range ____ E or W ____, ____ P.M. Distance from Section Lines _____ Ft. From ____ N or S ____, _____ Ft. From ____ E or W ____ Line. Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____		
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9. Intervals of Casing Removed/Ripped: from _____ feet to _____ feet,    from _____ feet to _____ feet,    from _____ feet to _____ feet, from _____ feet to _____ feet,    from _____ feet to _____ feet,    from _____ feet to _____ feet,		
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These reports must be completed and submitted to the Division of Water Resources, usually within 60 days of plugging and sealing the well/hole.

Please refer to **Form GWS-09A** for the Standards for Plugging, Sealing, and Abandoning Wells and Boreholes

**Item Instructions:** (numbers correspond with those on the front of this form)

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