# wsp

# **TECHNICAL MEMORANDUM**

DATE January 22, 2025

Reference No. 31404755.9183-001-TM-0

 TO Jocelyn Carter Colorado Division of Reclamation, Mining and Safety
CC Michael Toelle and Travis Weide (Holcim (US) Inc.)

**FROM** Sara Harkins and Griffin Easthouse

EMAIL sara\_harkins@wsp.com

# BOETTCHER LIMESTONE QUARRY: MONITORING WELL ABANDONMENT FIELD REPORT

On behalf of Holcim (US) Inc., WSP Inc. (WSP) is providing a field summary of the recent monitoring well abandonment activities conducted at the Boettcher Limestone Quarry (Site) located at 3060 West County Road 56, Laporte, Colorado 80535. The groundwater monitoring program at Boettcher Quarry has been discontinued following the Colorado Division of Reclamation, Mining and Safety (DRMS) approval of Technical Revision No. 12 (TR-12) of Permit No. M1977-348 by the dated July 15, 2024 (DRMS 2024). The field program conducted in November 2024 consisted of abandoning the eight on-site wells (MW-1 through MW-8) that were included in the discontinued monitoring program. The site layout and location these wells are presented in Figure 1.

The abandonment of monitoring wells MW-1 through MW-8 occurred between November 4, 2024, and November 7, 2024. The well abandonments were conducted in general compliance with minimum standards, as stipulated by the Division of Water Resources (DWR) of the state of Colorado (2 CCR 402-2; DWR 2016) for Type II unconfined bedrock aquifer wells. The work described below was conducted by drilling contractors Terracon Consultants (Terracon) under the direction of WSP.

The abonnement of MW-1 through MW-8 followed the same general procedure. The depth to water in the well was recorded, and the PVC well casing was filled with clean silica sand to a specified level above the measured water level (Attachment 1). During well abonnement, standard procedures include filling the PVC well casing with clean silica sand to just above the typical static water level for the given well. Based on observations from the discontinued monitoring program it is understood that the water levels in MW-1, MW-2, MW-3 and MW-5 represent the approximate static water levels. However, due to the observed slow recharge rates in MW-4, MW-6, MW7 and MW-8, the measured water level does not represent static water level conditions. Therefore, the silica sand fill level varied as follows:

- MW-1, MW-2, MW-3, and MW-5: The casing was filled with silica sand to approximately 5 feet above the measured water level.
- MW-4: The casing was filled with silica sand to approximately 20 feet above the measured water level.
- MW-6, MW-7, and MW-8: The casing was filled with silica sand to approximately 40 feet above the measured static water level.

T: 1 (303) 980-0540

The well casing was then filled with a grout slurry mixture of cement and bentonite that was prepared on-site. The grout mixture was pumped into the well casing, filling the casing between the top of the silica sand and the top of the PVC using a tremie pipe to displace water and fill voids and annular space

After the wells were filled with both silica sand and the grout slurry, the above ground steel well casing and cement platforms were removed with a backhoe and/or winch attached to the drill rig. For wells MW-2 through MW-8, the PVC well casing remaining below ground surface was then over drilled to approximately 10 feet below ground surface. After the over drilling and removal of the top ten feet of the PVC well casing, the borehole was filled to the ground surface with a cement slurry which was poured from the surface. MW-1 was not over drilled after the removal of the surface casing because the well was located on a sloped and elevated pad that could not be easily and safely accessed with the drilling rig. At MW-1, the top of the PVC casing was removed with a backhoe. Finally, the ground surface was graded to be level with the surrounding area. Photographs of the post abandonment surface condition at each well location are provided in Attachment 2. Terracon was responsible for off-site disposal of any trash generated, including the previous well surfaces completions (protective cover and cement pads).

Following the field activities, Well Abandonment Report eForms for the abandoned wells were completed by WSP and submitted to the DWR of the State of Colorado. The abandonment forms accepted by the DWR and posted to the Colorado's Decision Support Systems (CDSS) website are provided in Attachment 1.

If you have any questions about the above well abandonment activities, please call the undersigned at (303) 980-0540.

Sincerely,

WSP USA Inc.

Griffin Easthouse Geochemist

GE/SH/rm

Aara Harkins

Sara Harkins, PG (WY) Senior Geochemist

Attachments: Figure 1: Site Location Plan Attachment 1: Well Abandonment Report eForm Attachment 2: Post-abandonment Ground Surface Photographs

https://wsponlinenam.sharepoint.com/sites/us-holcimboettcherqua/shared documents/2024\_202319183\_2024 well abandonment/6\_deliverables/001-tm-mw\_abandonment\_field\_report/rev0/31404755.9183-001-tm-0-monitoring\_well\_abandonment\_field\_report\_22jan25.docx

# REFERENCES

- DRMS (Colorado Division of Reclamation, Mining and Safety). 2024. *Technical Revision No. 12, permit No. M1977-348*; Colorado Division of Reclamation, Mining and Safety, July 15, 2024.
- DWR (Division of Water Resources). 2016. Rules and Regulations for Water Well Construction, Pump Installation, Cistern Installation, And Monitoring and Observation Hole/Well Construction, *2 CCR 402-2*, Effective September 1, 2016.

# Figure



**ATTACHMENT 1** 

# Well Abandonment Report eForm



Receipt Number:

0435151A

Form Ref Num:34175Date Submitted:11/27/2024 12:57:13 PMApplication Type:Applications, Filings, and Submittals (No Fee)

#### Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **213334**
- Suffix N/A
- Replacement Suffix N/A

#### **Owners Well Designation**

- Does the well have a designation Yes
- What is the wells designation \* MW1

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization N/A
- Address N/A
- City N/A
- State CO
- Zip N/A
- Country United States
- Phone N/A
- Email N/A

#### Well Location

•	Loca	ition fron	n Subr	nitted Form									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.669098	-105.148673	sw	sw	26067	8 N	69 W	s	487434.9	4502034.8

### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 2
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*			т	o (feet)*	Casing Condition*
0					2		Ripped
From (feet)	To (feet)	Type of Material	Method of Placement	Amount of Material	Units	Density	
0	37.6	Other	Tremie	0.82	Cubic Feet	Casing filled (Mixture: 59 lbs surface to the top of casing, t	cement, 0.25 lb bentonite and 8 gallons of water) from 37.6 ft below ground hen the casing was removed and well backfilled to ground surface.
27.6	63.4	Clean	Tremie	0.56	Cubic	N/A	

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

#### Signature and Certification

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com

An incorrect static water level measurement was provided on the submitted form. The correct static water level (42.6 ft) was provided to the DWR via email.



Receipt Number:

0435151B

Form Ref Num:34321Date Submitted:11/27/2024 1:22:28 PMApplication Type:Applications, Filings, and Submittals (No Fee)

#### Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **213335**
- Suffix N/A
- Replacement Suffix N/A

#### **Owners Well Designation**

- Does the well have a designation Yes
- What is the wells designation \* MW2

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLNAM INC
- Address 4629 N OVERLAND TRPO BOX 1548
- City LAPORTE
- State CO
- Zip 80535
- Country United States
- Phone 9704824065
- Email N/A

#### Well Location

•	Loca	ation from	n Subn	nitted Form									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.670912	-105.148085	sw	sw	26172	8 N	69 W	s	487485.0	4502236.0

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 72.1
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*				To (feet)*	Casing Condition*
0						10	Removed
For	each	interv	al, please	e state	the ty	pe and amount of	naterial, and the placement method.
From (feet)	To ) (feet)	Type of Materia	Method of Placement	Amount of Material	Units	Density	
66.8	110.6	Clean Sand	Poured	0.948	Cubic Feet	N/A	
						asing filled (Mixture: 59 )	s cement 1 lb bentonite and 10 gallons of water) from 66.8 ft below ground surface

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



COLORADO Division of Water Resources Department of Natural Resources

Form Ref Num: Date Submitted: Application Type: 34492 11/27/2024 1:34:37 PM

Turner

Applications, Filings, and Submittals (No Fee)

#### Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **214094**
- Suffix N/A
- Replacement Suffix N/A

#### **Owners Well Designation**

- Does the well have a designation Yes
- What is the wells designation \* MW3

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLNAM INC
- Address 4629 N OVERLAND TRPO BOX 1548
- City LAPORTE
- State CO
- Zip 80535
- Country United States
- Phone 9704824065
- Email N/A

#### Well Location

•	Loca	ation fron	n Subr	nitted Form									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.666764	-105.147558	NW	NW	26316	8 N	69 W	s	487528.7	4501775.5

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 44.8
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*				To (feet)*	Casing Condition*
0						10	Removed
For	each	interv	al, please	e state	the ty	pe and amount of	material, and the placement method.
From (feet)	To (feet)	Type of Material	Method of Placement	Amount of Material	Units	Density	
33.8	102.9	Clean Sand	Poured	1.5	Cubic Feet	N/A	

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



Form Ref Num: Date Submitted: 34493 -- 2025001-AB Receipt 2025001 11/27/2024 1:17:42 PM

Application Type:

Applications, Filings, and Submittals (No Fee)

Well Identification

Does this well have a permit/receipt number: No

#### **Owners Well Designation**

- Does the well have a designation Yes
- What is the wells designation \* MW4

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLCIM (US) INC
- Address N/A
- City N/A
- State N/A
- Zip N/A
- Country United States
- Phone N/A
- Email N/A

#### Well Location

Loc	ation from	n Subr	nitted Form									
Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
1	Larimer	3	40.662478	-105.143981	SE	NW	26318	8 N	69 W	s	487830.3	4501299.3

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

#### Abandonment Details

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

# Well Condition

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 74.2

• In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

• L	ist t	he ir	iterval	for whic	h the c	asing	was perforated, ripped, or removed	
F	rom	(feet)				100	To (feet)* Casing Co	andition*
0							10 Removed	
F (f	rom feet)	To (feet)	Type of Material	Method of Placement	Amount of Material	Units	ensity	placement method.
53	3.7	181	Clean Sand	Poured	2.8	Cubic Feet	/Α	
0		53.7	Other	Tremie	4.7	Cubic Feet	asing filled (Mixture: 47 lbs cement, 1 lb benton the top of casing, then over drilled to 10 ft bel	ite and 10 gallons of water) from 53.7 ft below ground surface ow ground surface and hole backfilled to ground surface

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### **Responsible Party - Contact Information**

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



Receipt Number:

3659022A

Form Ref Num:34494Date Submitted:11/27/2024 1:11:36 PMApplication Type:Applications, Filings, and Submittals (No Fee)

#### Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **290442**
- Suffix N/A
- Replacement Suffix N/A

#### **Owners Well Designation**

- Does the well have a designation **Yes**
- What is the wells designation \* **MW-5**

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLCIM US INC
- Address C/O GOLDER ASSOCIATES INC44 UNION BOULEVARD SUITE 300
- City **DENVER**
- State CO
- Zip 80228
- Country United States
- Phone **3039800540**
- Email N/A

#### Well Location

•	Loca	ation from	n Subr	nitted Form									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.677731	-105.149551	sw	NW	26319	8 N	69 W	s	487362.3	4502993.2

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/4/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 48.7
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*				To (feet)*	Casing Condition*
0						10	Removed
For	each	interv	al, please	e state	the ty	pe and amount of	material, and the placement method.
From (feet	To ) (feet)	Type of Materia	Method of Placement	Amount of Material	Units	Den sity	
43	57.1	Clean Sand	Poured	0.3	Cubic Feet	N/A	
						asing filled (Mixture: 282	lbs cement 5 lb bentonite and 30 gallons of water) from 43 ft below ground surfa-

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



Receipt Number:

**COLORADO Division of Water Resources** Department of Natural Resources

3659022B

Form Ref Num:34495Date Submitted:11/27/2024 12:19:32 PMApplication Type:Applications, Filings, and Submittals (No Fee)

# Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **290443**
- Suffix N/A
- Replacement Suffix N/A

# **Owners Well Designation**

- Does the well have a designation **Yes**
- What is the wells designation \* **MW-6**

# Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLCIM US INC
- Address C/O GOLDER ASSOCIATES INC44 UNION BOULEVARD SUITE 300
- City **DENVER**
- State CO
- Zip 80228
- Country United States
- Phone **3039800540**
- Email N/A

#### Well Location

•	Loca	ation from	n Subn	nitted Form:									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.668660	-105.145804	NE	NW	0	8 N	69 W	s	487677.3	4501985.7

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* **Other**
- Please explain why the well was abandoned: \* Monitoring program concluded
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 203.6
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*				To (feet)*	Casing Condition*
0						10	Removed
For	each	interv	al, please	e state	the ty	pe and amount of i	naterial, and the placement method.
From (feet)	To (feet)	Type of Material	Method of Placement	Amount of Material	Units	Density	
		Clean	Poured	5.8	Cubic Feet	N/A	
160.6	227	Sand					

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



Receipt Number:

3659022C

Form Ref Num:34498Date Submitted:11/27/2024 12:36:58 PMApplication Type:Applications, Filings, and Submittals (No Fee)

#### Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **290444**
- Suffix N/A
- Replacement Suffix N/A

#### **Owners Well Designation**

- Does the well have a designation **Yes**
- What is the wells designation \* MW-7

#### Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLCIM US INC
- Address C/O GOLDER ASSOCIATES INC44 UNION BOULEVARD SUITE 300
- City **DENVER**
- State CO
- Zip 80228
- Country United States
- Phone **3039800540**
- Email N/A

#### Well Location

•	Loca	ition from	n Subn	nitted Form									
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y
	1	Larimer	3	40.663468	-105.143716	SE	NW	26323	8 N	69 W	s	487852.9	4501409.1

#### Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### THERE IS NO PHYSICAL ADDRESS ASSOCIATED WITH THIS WELL

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024
- Was the well destroyed and/or not locatable: \* No

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 225.9
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

From	(feet)	*				To (feet)*	Casing Condition*			
0						10	Removed			
For	each interval, please state the type and amount of material, and the placement method.									
From (feet)	To (feet)	Type of Material	Method of Placement	Amount of Material	Units	Density				
185.6	253.6	Clean Sand	Poured	5.9	Cubic Feet	N/A				
						Casing filled (Mixture: 705	lbs cement 25 lb bentonite and 125 gallons of water) from 185.6 ft below group			

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### Responsible Party - Contact Information

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.
- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com



Receipt Number:

10009710

Form Ref Num:34500Date Submitted:11/27/2024 1:39:33 PMApplication Type:Applications, Filings, and Submittals (No Fee)

# Well Identification

- Does this well have a permit/receipt number: Yes
- Permit No **320845**
- Suffix N/A
- Replacement Suffix N/A

# **Owners Well Designation**

- Does the well have a designation **Yes**
- What is the wells designation \* **MW-8**

# Well Owner

- Owner contact information not known No
- Prefix N/A
- First Name N/A
- Middle Name N/A
- Last Name N/A
- Suffix N/A
- Organization HOLCIM (US) INC
- Address 3500 STATE HIGHWAY 120
- City FLORENCE
- State CO
- Zip 81226
- Country United States
- Phone **7192881402**
- Email MIKE.TOELLE@LAFARGEHOLCIM.COM

#### Well Location

• Lo	Loca	cation from Submitted Form:													
	Div	County	WD	Lat	Long	Q40	Q160	Sec	Twnshp	Rng	PM	UTM_X	UTM_Y		
	1	Larimer	3	40.677851	-105.147635	sw	NW	26325	8 N	69 W	s	487524.3	4503006.2		

# Physical Address for The Well

• To verify your selection, please enter the physical ("street") address of the property on which the well is located, then click "**NEXT**". This is for information only and does not affect the permitted well location.

#### ADDRESS

- Address MV27+R5 LAPORTE
- City LAPORTE
- State CO
- Zip 80535

- What was the reason for abandonment: \* Other
- Please explain why the well was abandoned: \* Monitoring program discontinued
- What was the abandonment date: \* 11/7/2024

• Was the well destroyed and/or not locatable: \* No

#### Well Condition

- In what aquifer was the well (or hole) completed: N/A
- In what aquifer type was the well (or hole) completed: \* Type 2 (Not Overlain by Type III)
- Static Water Level at Time of Abandonment (feet) \* 173
- In what condition did you leave the wellhead: \* Casing grouted and cut off below ground surface

#### Interval Data

 List the interval for which the casing was perforated, ripped, or removed. From (feet)\* To (feet)\* Casing Condition\* 0 10 Removed For each interval, please state the type and amount of material, and the placement method. From To Type of Method Amount (feet) (feet) Material of of Of Placement Material Units Density Cubic N/A 132.5 226.6 Clean Sand Poured 8.2 Feet Casing filled (Mixture: 578 lbs cement, 17 lb bentonite and 135 gallons of water) from 132.5 ft below ground Cubic 0 132.5 Other Tremie 14.4 surface to the top of casing, then over drilled to 10 ft below ground surface and hole backfilled to ground Feet surface (Mixture: 71 lbs cement, 10 gallons water).

#### Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: \* Water Well Driller Licensed in Colorado
- Select driller (start typing a name or license number) \* 1367

#### **Responsible Party - Contact Information**

- Prefix N/A
- First Name RICHARD C.
- Middle Name N/A
- Last Name ROGERS
- Suffix N/A
- Organization TERRACON CONSULTANTS INC.
- Address 1309 DUFF DRIVE
- City FORT COLLINS
- State CO
- Zip 80524
- Country United States
- Phone 9704845183
- Email RICK.ROGERS@TERRACON.COM

#### Additional Information

• Please provide any additional information regarding the abandonment of the well. N/A

- 1. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402-2.
- 2. The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), CRS, and is punishable by fines up to \$1,000 and/or revocation of the contracting license.
- 3. The State Engineer considers the entry of the licensed contractor's name to be in compliance with Rule 17.4.
- I have read and agree to the Terms and Conditions listed above \* Yes
- Organization: WSP USA Inc.

- Name: \* Griffin Easthouse
- Email Address: \* Griffin.Easthouse@wsp.com

**ATTACHMENT 2** 

# Post-abandonment Ground Surface Photographs







