

Well Abandonment Report



COLORADO
Division of Water Resources
Department of Natural Resources

NOT COMPLETED. PENDING REVIEW BY DWR.

Form Ref Num: 41210
Date Submitted: 5/6/2025 11:42:03 AM
Application Type: Applications, Filings, and Submittals (No Fee)

Receipt Number: 3663731D

Well Identification

- Does this well have a permit/receipt number: **Yes**
- Permit No **293703**
- Suffix **N/A**
- Replacement Suffix **N/A**

Owners Well Designation

- Does the well have a designation **Yes**
- What is the wells designation * **P-4**

Well Owner

- Owner contact information not known **No**
- Prefix **N/A**
- First Name **Joby**
- Middle Name **N/A**
- Last Name **Adams**
- Suffix **N/A**
- Organization **N/A**
- Address **4809 Four Star Court**
- City **Fort Collins**
- State **Colorado**
- Zip **80524**
- Country **United States**
- Phone **N/A**
- Email **joby@awes.com.co**

Well Location

- Location from Submitted Form:

Div	County	WD	Lat	Long	Q40	Q160	Sec	Twtnshp	Rng	PM	UTM_X	UTM_Y
1	Weld	3	40.418381	-104.641603	NE	NE	0	5 N	65 W	S	530406.4	4474255.9

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: * **The well was silted in and not usable.**
- What was the abandonment date: * **5/1/2025**
- Was the well destroyed and/or not locatable: * **No**

Well Condition

- In what aquifer was the well (or hole) completed: **ALLUVIAL**
- In what aquifer type was the well (or hole) completed: * **Type 3 (Alluvial)**
- Was static water level measured: * **Dry**
- 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	2	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
2	37	Neat Cement Grout (no fly ash)	Poured	0.2	Cubic Feet	23.000 total lbs cement, 2.750 total gallons water

Responsible Party - Type

- Who was responsible for the plugging/sealing of the well: * **Well Owner**
- Select contractor (start typing a name or license number) * **N/A**

Responsible Party - Contact Information

- Prefix **N/A**
- First Name **Joby**
- Middle Name **N/A**
- Last Name **Adams**
- Suffix **N/A**
- Organization **AWES, LLC**
- Address **4809 Four Star Court**
- City **Fort Collins**
- State **Colorado**
- Zip **80524**
- Country **United States**
- Phone **9705903807**
- Email **joby@awes.com.co**

Additional Information

- Please provide any additional information regarding the abandonment of the well. **The abandoned well was a monitoring well used only for obtaining water levels.**

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: **N/A**
- Name: * **Joby Adams**
- Email Address: * **joby@awes.com.co**