

Well Abandonment Report



COLORADO
Division of Water Resources
Department of Natural Resources

NOT COMPLETED. PENDING REVIEW BY DWR.

Form Ref Num: 41252
Date Submitted: 5/7/2025 8:18:14 AM
Application Type: Applications, Filings, and Submittals (No Fee)

Receipt Number: 3663731M

Well Identification

- Does this well have a permit/receipt number: **Yes**
- Permit No **293712**
- Suffix **N/A**
- Replacement Suffix **N/A**

Owners Well Designation

- Does the well have a designation **Yes**
- What is the wells designation * **P-13**

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 **AWES, LLC**
- Address **4809 FOUR STAR COURT**
- City **FORT COLLINS**
- State **COLORADO**
- Zip **80524**
- Country **United States**
- Phone **9705903807**
- 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	40.414977	-104.642034	SE	NE	0	5 N	65 W	S	530371.3	4473878.1

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

Abandonment Details

- What was the reason for abandonment: * **Other**
- Please explain why the well was abandoned: * **Removed during sand and gravel mining.**
- What was the abandonment date: * **5/1/2025**
- Was the well destroyed and/or not locatable: * **Yes**
- Please provide additional information:
Removed during sand and gravel mining.

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.* **Well was used for water levels only.**

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**