



WATER-RIGHT DOCKET

Sand Creek Massacre National Historic Site

Docket No: 4

EXEMPT STOCK WELL

Preliminary Docket Information

01-08-2016: Docket Summary

DOCKET INFORMATION

Docket #: SAND 0004 Type (PC, APP, RIP, FRR, PWR, GW, ACQ): GW
Docket Title: Exempt Stock Well
Park Unit: Sand Creek Massacre National Historic Site Region: Intermountain
State: Colorado County: Kiowa
Source: Groundwater ☒ Surface Water ☐ Source Name: _____
POD Name / Location: NW1/4 NE1/4 Section 36 T17S R46W
POU Name / Location: _____
Quantity: not to exceed 15 gpm (include units – gpm, afy, etc.)
Use(s): Stock, _____, _____, _____
Application #: _____ Date: original 11/2010, amended 6/2014
Permit #: 284444-A Date Issued: 7/16/2014
License / Certificate #: not administered Priority Date: N/A
Ruling/Order/Decree#: N/A Date Issued: N/A
Owner: CO Board of Land Commissioners

Narrative / Remarks: (history, status, etc)

In October 2015, the NPS acquired a 640 acre parcel (S36 T17S R46W) from the Colorado State Board of Land Commissioners (Land Board). A grazing lease (Agricultural Lease No. 46519) was transferred to the NPS with the new parcel and expires in 2022. Prior to NPS acquisition, the Land Board filed an application for an existing exempt stock well and reported that water from the well was first beneficially used by the original owner in 1956 for livestock. Permit# 284444 was granted in November 2010. In June 2014, the Land Board on behalf of the lessee filed an application to replace the existing well with a new well. In July, 2014 permit# 284444-A was granted, with the condition that the existing well be plugged. On September 14, 2014, the new well was completed in alluvium to a total depth of 40 feet, screened from 25 to 40 feet with a static water level of 21.5 feet bls. The old well was plugged and abandoned on December 16, 2014.

A windmill pump was abandoned onsite and replaced with a solar pump that fills a stock tank adjacent to the well. Currently there is no float device connected to the pump therefore, the pump runs continuously when it is in operation and forms an artificial pond adjacent to the stock tank. WRB recommends the Park work with the lessee to install a float device that triggers the pump to shut off when the stock tank is full. The Park should request that the lessee turn off the pump during non-grazing periods. The current pumping rate is 8 gpm (allowable is 15 gpm), the well is not metered. No annual pumping limit has been established by CDWR for exempt stock wells. Current and future uses of this well are for livestock grazing for the duration of the lease.

Compiled by: Gwen Gerber Signature: [Signature] Date: 1/8/2016

National Park Service
Water Resources Division -Water Rights Branch
1201 Oakridge Drive, Suite 250
Fort Collins, Colorado 80525



COLORADO

State Land Board

Department of Natural Resources

Southeast District
700 South Main Street
Lamar, CO 81052
P 719.336.3031 | F 719.336.3034

RECEIVED

JAN 09 2015

WATER RESOURCES
STATE ENGINEER
COLO

January 5, 2015

COLORADO DIVISION OF WATER RESOURCES
818 CENTENNIAL BLDG., 1313 SHERMAN ST.
DENVER CO, 80203

Here's a completed pump installation and test report for well permit number 28444-A.

If you have any questions, please contact our office at (719) 336-3031.

Sincerely,

A handwritten signature in black ink that reads 'Mike Pollart'.

Mike Pollart
Southeast District Manager



FORM NO. GWS-32 04/2012	PUMP INSTALLATION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 821, Denver, CO 80203 Main (303) 866-3581 Fax (303) 866-3589, dwrpermitsonline@state.co.us		For Office Use Only	
1. WELL PERMIT NUMBER: ~~28444-A~~ 284444-A		RECEIVED JAN 09 2015 WATER RESOURCES STATE ENGINEER COLO		
2. WELL OWNER INFORMATION NAME OF OWNER <u>CO. State Board of Land Commissioners</u>				
MAILING ADDRESS <u>1127 Sherman St.</u>				
CITY <u>Denver</u>	STATE <u>CO.</u>			ZIP CODE <u>80203</u>
TELEPHONE # (area code) <u>303-864-3454</u>				
3. WELL LOCATION AS DRILLED: <u>NW1/4, NE 1/4 Sec. 36 Twp. 17</u> ☐ N or ☒ S, Range <u>46</u> ☐ E or ☒ W DISTANCES FROM SEC. LINES: <u>333</u> ft. from ☒ N or ☐ S section line and <u>2200</u> ft. from ☒ E or ☐ W section line. SUBDIVISION: _____, LOT _____, BLOCK _____, FILING (UNIT) _____ Optional GPS Location: GPS Unit must use the following settings: Format must be UTM , Units <u>Easting: 716320</u> must be meters , Datum must be NAD83 , Unit must be set to true N , ☐ Zone 12 or ☐ Zone 13 Northing: <u>4268679</u>				
STREET ADDRESS AT WELL LOCATION: _____				
4. PUMP DATA: Type: <u>Solar</u> Date Installed(mm/dd/yyyy): <u>9-20-2014</u> Pump Manufacturer: <u>Grundfos</u> Pump Model No. _____ Design GPM: <u>8</u> at RPM _____ HP _____ Volts _____ Full Load Amps _____ Pump Intake Depth: <u>35</u> Feet, Drop/Column Pipe Size Inches, _____ Kind of Drop Pipe _____ ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 50 GPM: Turbine Driver Type ☐ Electric ☐ Engine ☐ Other _____ Design Head _____ feet Number of Stages _____ Shaft size _____ inches				
5. OTHER EQUIPMENT: Airline Installed Yes No, Orifice Depth ft. _____ Monitor Tube Installed Yes No, Depth ft. _____ Flow Meter Mfg. _____ Meter Serial No. _____ Meter Readout: ☐ Gallons, ☐ Thousand Gallons, ☐ Acre feet Beginning Reading _____				
6. TEST DATA: check box if Test Data is submitted on Supplemental Form. Date: _____ Total Well Depth: <u>N/A</u> ft. Time: _____ Static Level: _____ ft. Rate (gpm): <u>6 gpm per Mike Pollart</u> Date Measured: _____ Pumping Level (ft): _____				
7. DISINFECTION: Type <u>N/A</u> Amt. Used _____				
8. Water Quality analysis available ☐ Yes ☐ No If yes, please submit with this report.				
9. Remarks: _____				
10. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. By signing or entering my name I am certifying 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 \$5000 and/or revocation of the contracting license.]				
Company Name: <u>Art Fox</u>	Phone w/area code: <u>719-688-2331</u>	License Number: <u>N/A</u>		
Mailing Address: <u>55901 CRS</u>	<u>EADS CO</u>	<u>81036</u>		
Sign or Enter Name and Title <u>Art Fox</u>	Date (mm/dd/yyyy) <u>1/5/15</u>			

Form No. GWS-09 4/2012	STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 821 Centennial Bldg., 1313 Sherman St., Denver, CO 80203 (303) 866-3581 Fax (303) 866-3589 dwrpermitsonline@state.co.us	For Office Use Only RECEIVED DEC 19 2014 WATER RESOURCES STATE ENGINEER COLC															
WELL ABANDONMENT REPORT Use to report plugging and sealing of permitted wells, monitoring and other holes. This form can be computer generated, typed or printed in black or blue ink. Instructions and plugging standards are on reverse side of form.																	
Well Permit Number of the well being plugged <u>284444</u> or MH File Number MH- _____ Hole ID #/Name _____																	
Individual/Company responsible for plugging and sealing the well: Name(s) <u>Kemp's Well Service</u> Mailing Address <u>P.O. Box 414</u> City, St., Zip <u>Cheyenne Wells, CO 80810</u> Phone (area code & no.) <u>719-767-5722</u> Email: _____																	
Well (Hole) Owner: NAME(S) <u>CO state Board Of Land Commissioners</u> Phone (include area code) <u>303-866-3454</u> Mailing Address, City, St., Zip <u>1127 Sherman STE 300 Denver, CO 80203</u>																	
ACTUAL WELL LOCATION: County <u>Kiowa</u> Property Address, City, St, Zip _____ 1/4 of the _____ 1/4, Sec. <u>36</u> , Twp. <u>17</u> ☐ N. or ☒ S., Range <u>46</u> ☐ E. or ☒ W., sixth _____ P.M. Distance from Section Lines _____ Ft. from ☐ N. or ☐ S., _____ Ft. from ☐ E. or ☐ W Line. Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____ Optional: GPS well location information in UTM format. You must check GPS unit for required settings as follows: Format must be UTM, zone 12 ☐ or zone 13 ☒ ; Units must be meters; Datum must be NAD83; Unit must be set to true north. Easting <u>716302</u> Northing <u>4268689</u>																	
I (we) report the existing well (hole) was plugged and sealed on the date of <u>12/16/2014</u> for the following reason(s): ☒ The well was plugged and sealed as required under Well Permit Number <u>284444--A</u> ☐ The well was not in use and was plugged and sealed. ☐ Other (please explain) _____																	
The well was plugged with the following materials placed at the indicated intervals: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Amount and Type of Material</th> <th style="text-align: left;">Method of Placement</th> <th style="text-align: left;">Interval</th> </tr> </thead> <tbody> <tr> <td><u>Cement</u></td> <td><u>pour</u></td> <td>from <u>4</u> feet to <u>11</u> feet</td> </tr> <tr> <td><u>native clay</u></td> <td></td> <td>from <u>11</u> feet to <u>20</u> feet</td> </tr> <tr> <td><u>sand</u></td> <td></td> <td>from <u>20</u> feet to <u>26</u> feet</td> </tr> <tr> <td colspan="2">Intervals of casing removed/ripped in feet</td> <td>from <u>0</u> feet to <u>4</u> feet</td> </tr> </tbody> </table>			Amount and Type of Material	Method of Placement	Interval	<u>Cement</u>	<u>pour</u>	from <u>4</u> feet to <u>11</u> feet	<u>native clay</u>		from <u>11</u> feet to <u>20</u> feet	<u>sand</u>		from <u>20</u> feet to <u>26</u> feet	Intervals of casing removed/ripped in feet		from <u>0</u> feet to <u>4</u> feet
Amount and Type of Material	Method of Placement	Interval															
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<u>native clay</u>		from <u>11</u> feet to <u>20</u> feet															
<u>sand</u>		from <u>20</u> feet to <u>26</u> feet															
Intervals of casing removed/ripped in feet		from <u>0</u> feet to <u>4</u> feet															
Report <u>must</u> be signed or name entered by person who performed the well plugging work or by the well owner if this person is unknown or not reachable. I (we) have read the statements made herein, know the contents thereof, and that they are true to my (our) knowledge.																	
Sign or enter full name 	If signing print name & title George Kemp, Owner	Date (mm/dd/yyyy) 12/16/2014															
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.																	

KEMP'S WELL SERVICE
P.O. BOX 414 44855 CR Q.4
CHEYENNE WELLS, CO 80810
719-767-5722 OR 5327

WATER RESOURCES
STATE ENGINEER
COLO

SEP 30 2014

RECEIVED

9-26-14

Well Completion 28444 - A

Pump to be installed and well abandoned
by the lessee.

George Kemp

Form No.
GWS-25**OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES**
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

859

WELL PERMIT NUMBER 284444 - A
DIV. 2 WD 67 DES. BASIN MDAPPLICANTCO STATE BOARD OF LAND COMMISSIONERS
1127 SHERMAN ST
STE 300
DENVER, CO 80203-

(303) 866-3454

APPROVED WELL LOCATIONKIOWA COUNTY
NW 1/4 NE 1/4 Section 36
Township 17 S Range 46 W Sixth P.M.DISTANCES FROM SECTION LINES333 Ft. from North Section Line
2200 Ft. from East Section LineUTM COORDINATES (Meters, Zone: 13, NAD83)

Easting: 716320 Northing: 4268679

PERMIT TO CONSTRUCT A 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)(c) for the relocation of an existing well, permit no. 284444. The old well must be plugged in accordance with Rule 16 of the Water Well Construction Rules within ninety-one (91) days of completion of the new well. The enclosed Well Abandonment Report form must be completed and submitted to affirm that the old well was plugged.
- 4) The use of ground water from this well is limited to the watering of livestock on a farm or ranch.
- 5) The pumping rate of this well shall not exceed 15 GPM.
- 6) This well shall be constructed not more than 200 feet from the location specified on this permit.

NOTE: This permit will expire on the expiration date unless the well is constructed by that date. A Well Construction and Test Report (GWS-31) must be submitted to the Division of Water Resources to verify the well has been constructed. An extension of the expiration date may be available. Contact the DWR for additional information or refer to the extension request form (GWS-64) available at: <http://www.water.state.co.us>

NOTICE: This permit has been approved for a location which was determined from permit no. 284444. 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.)

APPROVED
MP2

State Engineer

DATE ISSUED 07-16-2014

By

EXPIRATION DATE 07-16-2016

Receipt No. 0052564

COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 SHERMAN ST, RM 821, DENVER, CO 80203 Main: (303) 866-3581 Fax: (303) 866-2223 dwrpermitsonline@state.co.us		Office Use Only RECEIVED JUN 19 2014 WATER RESOURCES STATE ENGINEER COLORADO Form GWS-45 (07/2013)	
GENERAL PURPOSE Water Well Permit Application Review instructions on reverse side prior to completing form. The form must be computer generated, typed or in black or blue ink.		6. Use Of Well (check applicable boxes) Attach a detailed description of uses applied for. ☐ Industrial ☐ Municipal ☐ Irrigation ☐ Commercial ☐ Dewatering System ☐ Geothermal (production or reinjection) ☒ Other (describe): <u>Livestock</u>	
1. Applicant Information Name of applicant <u>Colorado State Board of Land Commissioners</u> Mailing address <u>1127 Sherman Street Suite 300</u> City <u>Denver</u> State <u>CO</u> Zip code <u>80203</u> Telephone # (area code & number) <u>303-866-3454</u> E-mail (online filing required) _____		7. Well Data (proposed) Maximum pumping rate _____ gpm Annual amount to be withdrawn _____ acre-feet Total depth _____ feet Aquifer _____	
2. Type Of Application (check applicable boxes) ☐ Construct new well ☒ Replace existing well ☐ Change source (aquifer) ☐ COGCC Well ☐ Use existing well ☐ Change or increase use ☐ Reapplication (expired permit) ☐ Other: _____		8. Land On Which Ground Water Will Be Used Legal Description of Land (may be provided as an attachment): N/A	
3. Refer To (if applicable) Well permit # <u>284444</u> Water Court case # _____ Designated Basin Determination # _____ Well name or # _____		(If used for crop irrigation, attach a scaled map that shows irrigated area.) A. # Acres _____ B. Owner _____ C. List any other wells or water rights used on this land. _____	
4. Location Of Proposed Well County <u>Kiowa</u> NW 1/4 of the NE 1/4 Section <u>36</u> Township <u>17</u> Range <u>46</u> Principal Meridian <u>6E</u> Distance of well from section lines (section lines are typically not property lines) Ft. from ☒ N ☐ S ☐ E ☐ W		9. Proposed Well Driller License #(optional): <u>859</u> 10. Sign or Entered Name Of Applicant(s) Or Authorized Agent 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 have read the statements herein, know the contents thereof and state that they are true to my knowledge. Sign or enter name(s) of person(s) submitting application: <u>Mike Pollack</u> Date (mm/dd/yyyy) <u>6/16/2014</u> If signing print name and title: <u>Mike Pollack SE DM</u>	
For replacement wells only - distance and direction from old well to new well <u>Re-drill as close to existing well as possible</u> Well location address (include City, State, Zip) _____ ☐ Check if well address is same as in item 1		Office Use Only USGS map name _____ DWR map no _____ Surface elev. _____ Receipt area only 0052564	
Optional: GPS well location information in UTM format. You must check GPS unit for required settings as follows: Format must be UTM ☐ Zone 12 or ☐ Zone 13 Units must be Meters Datum must be NAD83 Unit must be set to true north Was GPS unit checked for above? ☐ YES ☒ NO Remember to set Datum to NAD83		AQUAMAP _____ WE _____ WR _____ CWCB _____ TOPO _____ MYLAR _____ SBS _____	
5. Parcel On Which Well Will Be Located (PLEASE ATTACH A CURRENT DEED FOR THE SUBJECT PARCEL) A. Legal Description (may be provided as an attachment): <u>Section 36-17S-46W</u> <u>6E PM</u>		DIV <u>2</u> WD <u>67</u> BA _____ MD _____	
B. # of acres in parcel <u>6.40</u> C. Owner <u>Co. State Land Board</u> D. Will this be the only well on this parcel? ☒ YES ☐ NO (if no list other wells) <u>Will replace existing well</u> E. State Parcel ID# (optional) _____		Will replace existing well	

Form No.
GWS-25**OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES**
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

LR

WELL PERMIT NUMBER 284444 - - -
DIV. 2 WD 67 DES. BASIN MDAPPLICANTCO STATE BOARD OF LAND COMMISSIONERS
1127 SHERMAN ST
STE 300
DENVER, CO 80203-

(303) 866-3454

APPROVED WELL LOCATIONKIOWA COUNTY
NW 1/4 NE 1/4 Section 36
Township 17 S Range 46 W Sixth P.M.DISTANCES FROM SECTION LINES333 Ft. from North Section Line
2200 Ft. from East Section LineUTM COORDINATES (Meters, Zone: 13, NAD83)

Easting: 716320 Northing: 4268679

REGISTRATION OF EXISTING 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) Construction details for this existing well have not been provided to this office; therefore, it is not known if the construction of this well is in compliance with the Water Well Construction Rules, 2 CCR 402-2. The issuance of this permit does not relieve the well owner of responsibility or liability in the event contamination of the groundwater source results from the construction or use of this well, nor does the State Engineer assume any responsibility or liability should contamination occur.
- 3) This well is recorded and permit approved in accordance with CRS 37-92-602(5) for historical use as indicated herein and described in CRS 37-92-602(1)(b), being a well producing 8 GPM and used for the watering of livestock on a farm or ranch.
- 4) The date of first beneficial use, as claimed by the applicant, is December 31, 1956.

APPROVED
SMJ

State Engineer

Receipt No. 0049505

DATE ISSUED 11-04-2010

By

EXPIRATION DATE

N/A

Form No. GWS-12 7/2009	STATE OF COLORADO OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 818, Denver, CO 80203 Phone - Info: (303) 866-358 Main: (303) 866-3581 Fax (303) 866-3589 http://water.state.co.us/default.htm		For Office Use Only	
REGISTRATION OF EXISTING WELL Review form instructions prior to completing form				
NAME & CONTACT INFORMATION OF WELL OWNER:				
NAME(S) <u>State Board of Land Commissioners</u>				
MAILING ADDRESS <u>1127 Sherman St. Suite 300</u>				
CITY: <u>Denver</u>	STATE: <u>CO</u>	ZIP CODE: <u>80202</u>		
TELEPHONE NUMBER <u>(303) 866-3454</u>	E-MAIL (OPTIONAL)			
WELL LOCATION County <u>Kiowa</u> Owner's Well Designation (optional)				
(Address) (City) (State) (Zip) <u>1/4 of the 1/4, Sec. 36, Twp. 17</u> ☐ N. or ☒ S., Range <u>4b</u> ☐ E. or ☒ W., <u>6th</u> P.M. Distance from Section Lines <u>333</u> Ft. ☒ N. or ☐ S. Line, <u>2,200</u> Ft. ☒ E. or ☐ W. Line.				
ATTACH A COPY OF A CURRENT DEED FOR THE SUBJECT PARCEL				
Subdivision Name _____, Lot _____, Block _____, Filing/Unit _____				
Optional: GPS well location information in UTM format. The following GPS settings are required: Format must be UTM. Units must be in meters. Datum must be NAD83. Unit must be set to true north. ☐ Zone 12 or ☐ Zone 13				
Was GPS unit checked for above items? ☐ YES ☐ NO				
The well has historically been used for the following purpose(s): <u>livestock</u>				
Water from the well was first used beneficially by the original owner for the above described purposes on <u>1956</u>				
The total depth of this well is <u>app 50</u> feet.				
The pumping rate of this well is <u>8</u> gallons per minute.				
The average annual amount of water diverted is _____ acre-feet.				
The lawn and garden irrigated (watered) by water from this well is _____ ☐ Acre or ☐ Square feet.				
Number				
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. 23-3-104(13)(a). I have read the statements herein, know the contents thereof, and state that they are true to my knowledge.				
Signature(s) of the Well Owner(s) <u>State Board of Land Commissioners</u> <u>Mike Pollack SE Dist Mgr</u>		Print Name and Title of Well Owner(s) <u>STATE BOARD OF LAND COMMISSIONERS</u> <u>MIKE POLLACK SE Dist Mgr</u>		Date <u>11-2-2010</u>
For Office Use Only				
WE ☒	NW, NE			
WR ☒	E 716320			
CWCB ☒	N 4268679			
AQUA ☒	049505			
MYLAR _____	Div <u>2</u> WD <u>67</u> Basin _____ MD _____			

Docket Information

Number of Documents in Docket 10

Documents Dated from 11/2/2010 to 1/8/2016

Docket Compiled: 1/27/2016