

Form No. GWS-11 11/2011	COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 Sherman St., Ste 821, Denver, CO 80203 Main: (303) 866-3581 Fax: (303) 866-2223 dwrpermitsonline@state.co.us	For Office Use Only
CHANGE IN OWNER NAME/ADDRESS		
CORRECTION OF THE WELL LOCATION		
Review instructions on the reverse side prior to completing the form.		
<u>Name, address and phone of person claiming ownership of the well permit:</u>		
Name(s): _____		
Mailing Address: _____		
City, St. Zip: _____		
Phone _____ Email Address: _____		
This form is filed by the named individual/entity claiming that they are the owner of the well permit as referenced below. This filing is made pursuant to C.R.S. 37-90-143.		
WELL LOCATION: Well Permit Number: _____ Receipt No.: _____ Case Number: _____ County _____ Well Name or # (optional) _____ _____ (Address) (City) (State) (Zip) _____ 1/4 of the _____ 1/4, Sec. _____, Twp. _____ <input type="checkbox"/> N. or <input type="checkbox"/> S., Range _____ <input type="checkbox"/> E. or <input type="checkbox"/> W., _____ P.M. Distance from Section Lines: _____ Ft. From <input type="checkbox"/> N. or <input type="checkbox"/> S., _____ Ft. From <input type="checkbox"/> E. or <input type="checkbox"/> W. Line. OR: GPS well location information in UTM format. You must check GPS unit for required settings as follows: Format must be UTM, <input type="checkbox"/> zone 12 or <input type="checkbox"/> zone 13; Units must be meters; Datum must be NAD83; Unit must be set to true north. Easting _____ Northing _____ Subdivision Name _____ Lot _____, Block _____, Filing/Unit _____		
The above listed owner(s) say(s) that he, she (they) own the well permit described herein. The existing record is being amended for the following reasons: <input type="checkbox"/> Change in name of owner <input type="checkbox"/> Change in mailing address <input type="checkbox"/> Correction of location for exempt wells permitted prior to May 8, 1972 and non-exempt wells permitted before May 17, 1965. Please see the reverse side for further information regarding correction of the well location.		
I (we) claim and say that I (we) (am) (are) the owner(s) of the well permit described above, know the contents of the statements made herein, and state that they are true to my (our) knowledge.		
Sign or enter the name(s) of the new owner(s)	If signing print name & title	Date (mm/dd/yyyy)
It is the responsibility of the new owner of this well permit to complete and/or sign this form. If an agent is signing or entering information please see instructions.		
Please send confirmation of acceptance of change in owner name/address via: <input type="checkbox"/> Email address listed above <input type="checkbox"/> US Mail		
_____ State Engineer	_____ By	_____ Date

**INSTRUCTIONS FOR CHANGE IN OWNER NAME/ADDRESS/LOCATION CORRECTION
NO FEE IS REQUIRED**

The form can be computer generated on-line, typewritten or printed in **BLACK OR BLUE INK.**

This form may be reproduced by photocopying or computer means. If filing online please see online filing instructions for further information. You may also save, print and email the completed form to: dwrpermitsonline@state.co.us

INCOMPLETE OR FALSIFIED FORMS WILL NOT BE ACCEPTED.

Be sure to include the well permit number in the space provided in the section titled "WELL LOCATION".

The form is to be completed by the well permit owner (the individual, company or entity claiming ownership of the well permit). Print the **well permit owner's** name and include the mailing address and phone number.

Complete the well location information. The Well Name or # is optional and is a designation provided by the well permit owner. If the address of the well location is different than the mailing address of the owner, include the address where the well is located. The actual **well location must** include ¼, ¼, Section, Township and Range. Check the appropriate boxes for distance from section lines North or South and East or West directions **OR** GPS (UTM) Easting and Northing coordinates as indicated on the front of this form. Colorado contains two UTM zones (12 & 13). Zone 13 covers most of Colorado. 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. Complete the Subdivision, Lot, Block and Filing information, if applicable.

Indicate in the appropriate boxes if the form is submitted to change the ownership and/or address, or both.

The individual signing the application or entering their name (and title if applicable) must be the applicant or an officer of the corporation/company/agency identified as the applicant or their attorney. An authorized agent may also sign or enter their name on the application if a letter signed by the applicant or their attorney is submitted with the application authorizing that agent to sign or enter their name on the applicant's behalf.

USE THIS FORM TO CORRECT THE LOCATION OF A WELL IF:

A. The well was permitted, registered, or first used prior to May 8, 1972 for ordinary household purposes in up to three single-family dwellings, fire protection, the watering of poultry, domestic animals, and livestock on farms and ranches and the irrigation of not over one acre of home gardens and lawns.

B. The well is not of the type described in A above, but was permitted or registered prior to May 17, 1965. Inside the Designated Ground Water Basins, other procedures and publication may be required.

IN ALL OTHER CASES USE FORM GWS-42 (CORRECTION OF WELL LOCATION FORM).

If you have questions, contact the Denver Office or the Division Office where the well is located. Contact information is also available from our website at <http://www.water.state.co.us>.

Also, if filing online with internet email (non-outlook email) the address is: dwrpermitsonline@state.co.us