

**Maps/diagrams for
directional purposes only.
Summit & Main Realty Group**





CUSTER COUNTY PERMIT FOR INSTALLATION OF ON-SITE WASTEWATER TREATMENT SYSTEM

101-59-650

S20062421

Issue Date: 6/24/2020

Glenn A Choate
4455 Mitchell Mountain Rd
Westcliffe, CO 81252
(719) 783-2000

Septic Contractor: **Glenn Choate** Soil done by: **Justin Kaiser** Soil Date: **6/12/2020** Applicant: **Owner**

Permit Type: **Installation** System Type: **Standard**

Property Address: **1400 County Road 243**

Legal: **BUMBLE BEE LODGE S 18382 SEC 8 22 72**

Lot size: **10.330 acres** Number of people: **4** Number of bedrooms: **2** Tank Size: **1000**

This septic will serve a **Dwelling** Water: **Private Well**

Conditions: Depth to bedrock: **>96"** Depth to water: **>96"** Slope:

Soil Type: **3** Treatment Level: **1** Effluent Application Method: **Gravity**

	Rock or Tire Chips Sq. Ft.	Mfd Media other than Chambers Sq. Ft.	Chambers Sq. Ft.	Number of Chambers
Trench	857	771	600	50
Bed	1029	926	720	60

Comments:

I hereby certify that I have installed this system as designed:

Glenn Choate

Licensed Contractor / Homeowner

11-4-2020

Date

Inspected on: 11-4-2020

Amount use tax paid: Done

Zoning Office / Inspector [Signature]

By: JSH

Date: _____

Final approval date: 11-6-2020



Septic Inspection

Property Owner(s): **Glenn A Choate**

Date: 11-4-2020

Property Address: **1400 County Road 243**

Inspected By: JS H

Legal: **BUMBLE BEE LODE S 18382 SEC 8 22 72**

Septic Contractor: **Glenn Choate**

Schedule #: **101-59-650**

Permit Number: **S20062421**

Distance of Pipe from House to Tank: 20'
Distance DBL Cleanouts: 5'
Number of cleanouts needed (50 feet): na
Check slope (1/2 inch per 2 feet for last 10 feet before tank): OK
Type of pipe (schedule number): Sch 40
Building Sewer extended to foundation: no

Tank size: 1000 Bpm Is tank level?: OK
Check: Inlet OK Outlet OK
Check for cracks in tank: OK Date on tank: 9-10-2020

Distance of pipe from tank to leach field: 20' Check for slope: OK
Check for level distribution field: OK Type of pipe (schedule number) Sch 40

Type of leach field: Druck 4 Number, if chambers: 15 x 4 = 60
Check for screws on chamber connections: OK
Configuration: Trench, or Bed (Max 12' wide, 4' deep) Check for level: OK
Depth: 2-2 1/2' Check distance between trenches (4 feet minimum): OK

Distance from well to tank: 100' (50 feet minimum) Distance from well to leach field: 100' (100 feet minimum)
Distance from leach field to any irrigation ditch or creek: _____
(Minimums: Cistern - 25'; property line - 10'; water course - 50'; dry gulch - 25')

Additional comments: _____



Owner

GUEN CHOATE
1400 CR 243
WESTCLIFFE, CO. 81252
719-783-2000

Legal Description

THE BUMBLEBEE LODGE
1400 CR 243
WESTCLIFFE, CO. 81252

* Long Term Acceptance Rate

.35 SOIL TYPE 3 SILTY CLAY LOAM

* 2 Bedroom/ 4 Person

300 GPD

* Gravity Distribution $300 \div .35 = 857.14 \uparrow 858$

* 858 SQ FT. Leach Field

* Trench System $858 \times .7 = 600.6 \div 12 = 50.5 \uparrow 51$

* 51 Chambers

* 51 Chambers in 3 Trenches

* 1000 Gallon Septic Tank

Notes: NEW DWTS INSTALLATION

All Tests Were Performed By

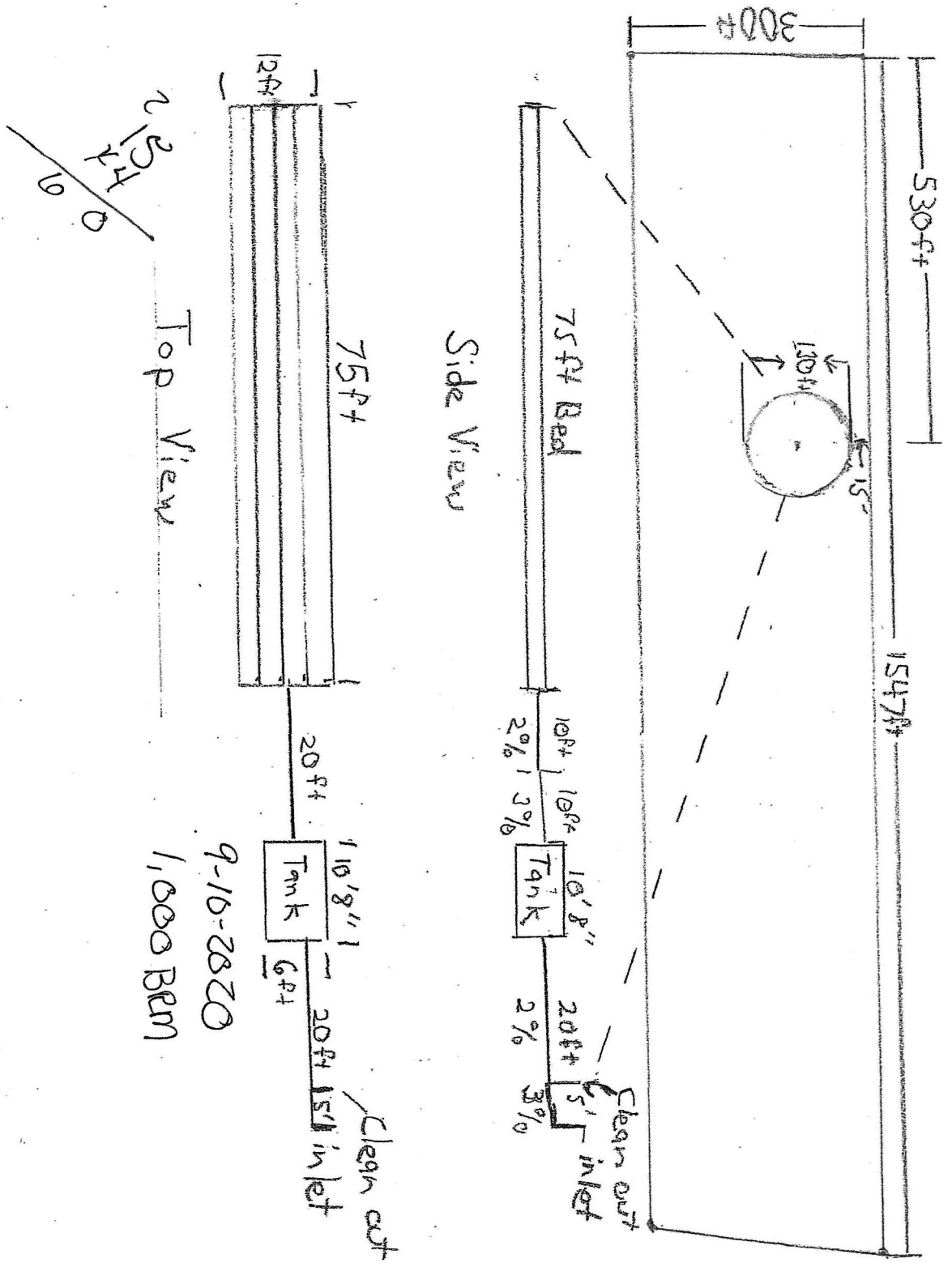
Justin Kaiser

CPOW Certified Technician

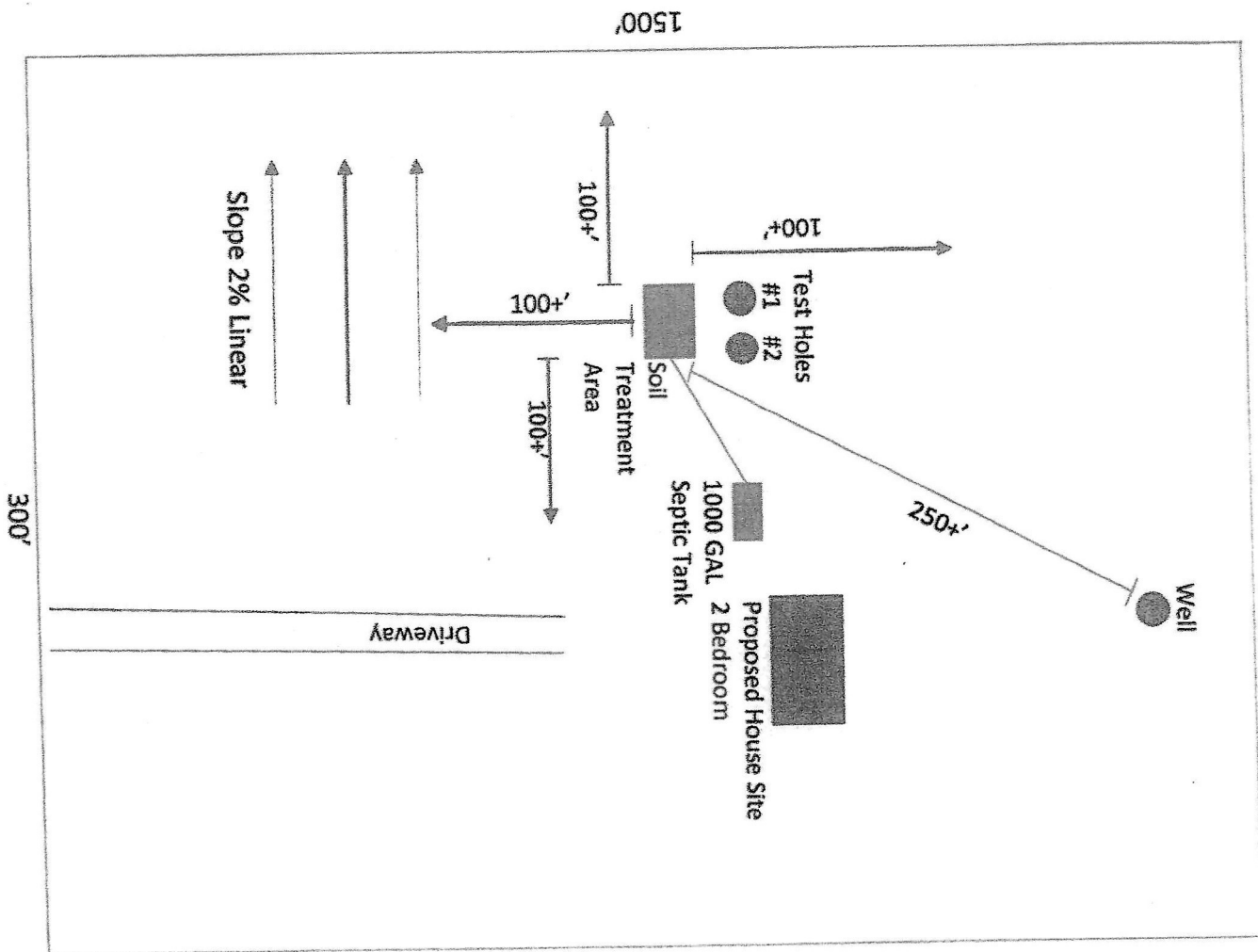
P.O. BOX 413

Cotopaxi, CO. 81223

(719)-942-4374



1400 CR 243
 Westcliffe Co. 81252
 Legal Description:
 The Bumblebee Lode



WELL CONSTRUCTION AND TEST REPORT
STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use Only

APR 06 1998

WAITING FOR
STATE OF
COLORADO
GWS-31-91-01 Rev. 2/94

1. WELL PERMIT NUMBER 200680
2. OWNER NAME(S) Clifton L. and/or Isobel F. Miller
Mailing Address P.O. Box 352
City, St. Zip Westcliffe, CO 81252
Phone 719-783-2807

3. WELL LOCATION AS DRILLED: SE 1/4, SW 1/4, Sec. 8, Twp. 22S, Range 72W, 6TH PM
DISTANCES FROM SEC. LINES:

1000 ft. from South Sec. line. and 2150 ft. from West Sec. line. OR:

(north or south)

(east or west)

SUBDIVISION: Bumble Bee Lode #18382 LOT N/A BLOCK N/A FLING N/A

4. GROUND SURFACE ELEVATION ft. DRILLING METHOD Air Percussion
DATE COMPLETED 3/26/98 TOTAL DEPTH 265 ft. DEPTH COMPLETED 265 ft.

5. GEOLOGIC LOG:

Depth	Desc. of Mat. (Type, Size, Color, Water Loc.)
0 3	Overburden
3 21	Rhyolite w/Perolite
21	Perolite w/Iron
90	Frac
90 265	Perolite w/FRAC & Iron, Additional Water Locations unknown

6. HOLE DIAM.(in.) FROM (ft) TO (ft)

8 5/8	0	19
6	19	265

7. PLAIN CASING

OD(in)	Kind	Wall Size	From(ft)	To(ft)
6 5/8	Steel	.188	+1	19
4"	PVC-200	.227	15	215
			255	265

PERF. CASING: Screen Slot Size: .025

4"	PVC-40	.237	215	255
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8. FILTER PACK:

Material N/A
Size M/A
Interval N/A

9. PACKER PLACEMENT:

Type N/A
Depth N/A

10. GROUTING RECORD:

Material	Amount	Density	Interval	Placement
Cement	3 bags w/ 16 gals.		2' - 19'	poured & vibrated

REMARKS:

11. DISINFECTION: Type H.T.H Amt. Used 5 oz

12. WELL TEST DATA: ☐ Check box if Test Data is submitted on Supplemental Form.

TESTING METHOD Air

Static Level 85 ft. Date/Time measured 3/26/98

Production Rate 10 G.P.Min

Pumping level 245 ft. Date/Time measured

Test length (hrs.) 2

Remarks

13. I have read the statements made herein and know the contents thereof, and that they are true to my knowledge. [Pursuant to Section 24-4-104 (13)(a) C.R.S., the making of false statements herein constitutes perjury in the second degree and is punishable as a class 1 misdemeanor.]

CONTRACTOR Nequette Drilling

Phone (719) 783-2652

Lic. No. 1043

Mailing Address P.O. Box 186 Westcliffe, Co. 81252

Name/Title(Please type or print) David J. Nequette Driller/Owner

Signature

Date March 30, 1998



APPLICANT

WELL PERMIT NUMBER **200680**

DIV. 2 CNTY. 14 WD 13 DES. BASIN MD

Lot: Block: Filing: Subdiv: BUMBLE BEE LODGE #18382

APPROVED WELL LOCATION
CUSTER COUNTY

SE 1/4 SW 1/4 Section 8
Twp 22 S RANGE 72 W 6th P.M.

DISTANCES FROM SECTION LINES

1000 Ft. from South Section Line
2150 Ft. from West Section Line

CLIFTON L & ISOBEL F MILLER
BOX 352
WESTCLIFFE CO 81252-

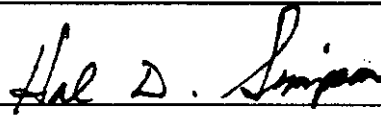
(719)783-2807

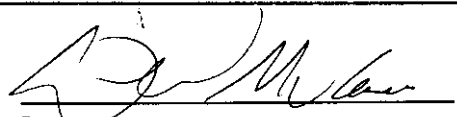
PERMIT TO CONSTRUCT A WELL

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 the permit does not assure the applicant 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)(b)(II)(A) as the **only well** on a residential site of **10 acres** described as that portion of the SW 1/4 of Sec. 8, Twp. 22 S., Rng. 72 W., 6th P.M., Custer County, also known as the Bumble Bee Lodge, MS-18382, and being more particularly described on attached exhibit A.
- 4) The use of ground water from this well is **limited to ordinary household purposes inside a single family dwelling. The ground water shall not be used for irrigation or other purposes.**
- 5) The maximum pumping rate shall not exceed 15 GPM.
- 6) The return flow from the use of this well must be through an individual waste water disposal system of the non-evaporative type where the water is returned to the same stream system in which the well is located.
- 7) This well shall be constructed not more than 200 feet from the location specified on this permit.

APPROVED
DWM


State Engineer


By

Receipt No. 0403349

DATE ISSUED **JAN 27 1997**

EXPIRATION DATE **JAN 27 1999**



COLORADO DIVISION OF WATER RESOURCES
DEPARTMENT OF NATURAL RESOURCES
1313 SHERMAN ST., RM. 818, DENVER CO 80203
phone - info: (303) 866-3587 main: (303) 866-3581

NEW HOUSEHOLD USE ONLY

Review instructions prior to completing form

Water Well Permit Application
Must be completed in black ink or typed

200680 RECEIVED
JAN 09 1997

1. APPLICANT INFORMATION				6. USE OF WELL	
Name of applicant <u>CLIFTON L + ISOBEL F. MILLER</u>				ORDINARY HOUSEHOLD PURPOSES INSIDE ONE SINGLE FAMILY DWELLING (NO OUTSIDE USE)	
Mailing Address <u>PO BOX 2123</u>					
City <u>CANON CITY</u> State <u>CO</u> Zip code <u>81215-2123</u>					
Telephone Number (include area code) <u>(719) 275-5482</u>				7. WELL DATA	
2. TYPE OF APPLICATION				MAXIMUM PRODUCTION RATE OF THE WELL WILL NOT EXCEED 15 GPM	
CONSTRUCT A NEW HOUSEHOLD USE ONLY WELL ON LESS THAN 35 ACRES				8. TYPE OF RESIDENTIAL SEWAGE SYSTEM	
3. REFER TO (if applicable):				<input checked="" type="checkbox"/> Septic tank / absorption leach field <input type="checkbox"/> Central system District name: _____ <input type="checkbox"/> Vault Location sewage to be hauled to: _____ <input type="checkbox"/> Other (attach copy of engineering design)	
Monitoring hole acknowledgment # <u>MH-</u>				9. PROPOSED WELL DRILLER (optional)	
4. LOCATION OF WELL				Name <u>Youngs Drilling Pump SCS</u> License number <u>592</u>	
County <u>CUSTER</u>		Quarter/quarter <u>SE 1/4</u>	Quarter <u>SW 1/4</u>	10. SIGNATURE of applicant(s) or authorized agent	
Section <u>8</u>	Township N or S <u>32</u> <input type="checkbox"/> N <input checked="" type="checkbox"/> S	Range E or W <u>72</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Principal Meridian <u>6th</u>	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.	
Distance of well from section lines <u>1000</u> ft. from <input type="checkbox"/> N <input checked="" type="checkbox"/> S <u>2150</u> ft. from <input type="checkbox"/> E <input checked="" type="checkbox"/> W				Must be original signature <u>Robert Young for Clifton + Isobel Miller</u>	
Well location address, if different from applicant address (if applicable)				Title <u>President</u> Date <u>11/8/97</u>	
5. TRACT ON WHICH WELL WILL BE LOCATED				Office Use Only <u>403349 Wellbldr</u> DWR Map No. <u>784</u>	
A. You must check <u>one</u> of the following - see instructions				<u>See plat map files for 26</u>	
<input type="checkbox"/> Subdivision: Name _____					
Lot # _____ Block # _____ Filing/Unit# _____					
<input type="checkbox"/> County Exemption (copy of county approval & survey must be attached)					
Exempt. name/# _____ Tract # _____					
<input checked="" type="checkbox"/> Mining claim (attach copy of deed or survey)				DIV <u>2</u> CO <u>14</u> WD <u>18</u> BA _____ USE _____ MD _____	
Claim name/# <u>BUMBLE BEE LODGE #18382</u>					
<input type="checkbox"/> Other (attach legal description to application)					
B. STATE PARCEL					
ID# (optional): _____					
C. # of acres in tract <u>10</u>					
D.					
THIS WILL BE THE ONLY WELL ON THIS TRACT					



Equal Housing Opportunity: All listings are offered in compliance with the Federal Fair Housing Act. The accuracy of this information is not guaranteed. It is not to be relied upon and should be verified by the buyer.

Form GWS-49 (12/95)