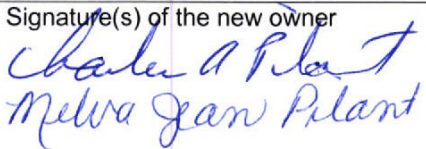
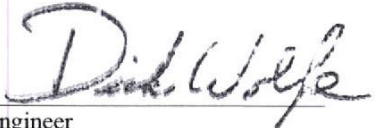


Form No. GWS-11 11/2011	COLORADO DIVISION OF WATER RESOURCES DEPARTMENT OF NATURAL RESOURCES 1313 Sherman St. Ste 821, Denver, CO 80203 Main: (303) 866-3581 Fax (303) 866-3589 dwrpermitsonline@state.co.us	For Office Use Only RECEIVED JUL 27 2015 WATER RESOURCES STATE ENGINEER ALAMOSA RECEIVED AUG 04 2015 WATER RESOURCES STATE ENGINEER COLO
CHANGE IN OWNERSHIP NAME/ADDRESS CORRECTION OF THE WELL LOCATION		
Review instruction on the reverse side prior to completing the form.		
Name, address and phone of the person claiming ownership of the well:		
NAME(S): Charles A. Pilant and Melva Jean Pilant		
Mailing Address: 3205 Berkeley Place NE		
City, St. Zip: Albuquerque, New Mexico 87106		
Phone: Email Address:		
This form is filed by the named individual/entity claiming that they are the owner of the well permit as referenced above. This filing is made pursuant to C.R.S. 37-90-143.		
WELL LOCATION: Well Permit Number: 127931 Receipt Number: 9104094 Case Number:		
County: Mineral Well Name or # (optional): _____		
206 La Font Dr., Creede, CO 81130		
(Address)		
NE ¼ of the SE ¼, Sec.29, Twp. 41 N., Range 1 W., N.M.P.M.		
Distance from Section Lines: 1960 Ft. From S., 400 Ft. From E. Line.		
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:		
☒ Change in name of owner ☒ Change in mailing address ☐ 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) (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.		
Signature(s) of the new owner 	Please print the Signer's Name & Title Charles A Pilant Melva Jean Pilant	Date 8/22/15
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 or change in owner name/address via: ☐ Email address listed above ☒ US Mail		
 State Engineer  By ACCEPTED AS A CHANGE IN OWNERSHIP AND/OR MAILING ADDRESS. 8-4-15 Date		