

Submit original plus three copies

<input type="checkbox"/> District Court Water Division _____, Colorado Court Address: _____	
CONCERNING THE APPLICATION FOR WATER RIGHTS OF:	
Applicant:	
IN _____ COUNTY.	
▲ COURT USE ONLY ▲	
If Represented by an Attorney, Attorney's Name and Address:	Case Number:
Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Division _____ Courtroom _____
APPLICATION: <input type="checkbox"/> FOR FINDING OF DILIGENCE <input type="checkbox"/> TO MAKE ABSOLUTE	

1. Name, address, telephone number(s) (residence and business) of applicant(s)

2. Name of structure: (well, spring, ditch, reservoir) _____

3. Describe conditional water right (as to each structure) giving the following from the Referee's Ruling and Judgment and Decree:

A. Date of Original Decree: _____ Case No. _____ Court _____

B. Legal description: include distance and bearing from established government section corner or quarter corner; or distances from section lines, and indicate ¼ ¼, section number, township, range and meridian; include map). The location may include UTM coordinates based on Zone 13 and NAD27(CONUS) datum. In urban areas, include street address, lot, block, and subdivision:

Required Description: County	_____ 1/4 of the	_____ 1/4	Section	Township	Range	Principal Meridian
				N or S <input type="checkbox"/> <input type="checkbox"/>	E or W <input type="checkbox"/> <input type="checkbox"/>	
Distance from section lines (section lines are typically not property lines)						
_____ Feet from <input type="checkbox"/> N <input type="checkbox"/> S and _____ Feet from <input type="checkbox"/> E <input type="checkbox"/> W						
Street Address: _____						
Subdivision:	Lot	Block				

Optional Additional Description: GPS location information in UTM format
 Required settings for GPS units are as follows: Format must be UTM; Zone must be 13; Units must be Meters Datum must be NAD27 (CONUS) and; Units must be set to true north.

Were points averaged? <input type="checkbox"/> YES <input type="checkbox"/> NO	Northing _____ Easting _____
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C. Source: _____

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D. Appropriation Date: _____ Amount: _____

E. Use: _____

F. Depth: (if well) _____

4. Provide a detailed outline of what has been done toward completion or for completion of the appropriation and application of water to a beneficial use as conditionally decreed, including expenditures: (add additional sheets if necessary)

5. If claim to make absolute
Water applied to beneficial use:

A. Date: _____ Amount: _____ Use: _____

B. Description of place of use where water is applied to beneficial use:

6. Names(s) and address(es) of owner(s) of the land on which structure is or will be located, upon which water is or will be stored, or upon which water is or will be placed to beneficial use.

****PLEASE NOTE:** The owner of any conditional water right shall notify the clerk of the court that decreed the conditional water right of any change in mailing address.

Signature of Applicant (or Attorney)

Address of Applicant

Telephone No. _____

I, _____, state under oath that I have read this application and verify its content.

Applicant

Subscribed and affirmed, or sworn to before me in the County of _____, State of _____,
this _____ day of _____, 20 _____.

My commission expires: _____

Notary Public