Form No. STATE OF COLORADO GWS-44 OFFICE OF THE STATE ENGINEER 5/2024 1313 Sherman St., Room 821, Denver, CO 80203 Page Phone: (303) 866-3581 Website: https://dwr.colorado.gov/ 1 of 3 Email to: dwr.germitsonline@state.co.us RESIDENTIAL Water Well Permit Application Note: Also use this form to apply for livestock watering Review form instructions prior to completing form.			Office Use Only		
1. Applicant Information			6. Use Of Well (check appl	cable boxes)	
Name of Applicant(s)			See instructions to determine use(s) for which you may qualify		
Skyridge Lending LLC Mailing address			A. Ordinary household use in one single-family dwelling (no outside use)		
509 Scott Ave., Suite 154			(
^{City} Woodland Park	State Zip Code CO 80863		B. Ordinary household use in 1 to 3 single-family dwellings: Number of dwellings:		
Telephone # (area code & number) 720-371-3580	E-mail (online filing required) jeremy@phoenixcrpro.com		Home garden/lawn irrigation, not to exceed one acre:		
2. Type Of Application (che	ck applicable boxes	5)	area irrigated sq. ft. 🗋 acre		
Construct new well Change source (aquifer)					
Replace existing well	Reapplication (exp		Domestic animal and poultry watering (non-commercial)		
Use existing well	Rooftop precipitation collection		C. Livestock watering (on farm/ranch/range/pasture)		
Change or increase use Other:					
	3. Refer To (if applicable)		7. Well Data (proposed)	A new of one wat to be with drawn	
Well permit #	Water Court case #		Maximum pumping rate 15 GPM	Annual amount to be withdrawn 1 acre-fee	
n/a	n/a		Total Depth	Aquifer	
Designated Basin Determination #	Well name or #				
n/a n/a		100 est	alluviuim		
4. Location Of Proposed Well (SEE INSTRUCTIONS)		8. Water Supplier			
Property address (Include City, State, Zip) Check if well address is same as Item 1			Is this parcel within boundaries of a water service area? TYES X NO		
6306 HWY 9, Breckenridge, CO 80424		If yes, provide name of supplier: 9. Type Of Sewage System			
Rule 6.2.3 I Yes I No		9. Type Of Sewage System	1		
(see instruction for information) Summit		Septic tank / absorption leach field			
<u>Section</u> 1/4 of the <u>NW</u> 1/4 19	Township N or S Range E or W P.M. 7 Image: X 77 Image: X 6th Image: X Central system: District name Blue River				
Preferred location format: GPS well location information in UTM format. The following GPS settings are required: Format must be UTM. Units must be in			Vault: Location sewage to be hauled to:		
meters. Datum must be NAD83. Unit must be set to true north.			Other (explain)		
Zone 12 or Zone 13.			10. Proposed Well Driller License # (optional):		
Easting: TBD			11. Sign or Enter Name of Applicant(s) or Authorized Agent		
Northing:			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.		
Optional Location Information (must be provided if GPS location is not provided above and Rule 6.2.3 does not apply): distances from section lines:					
1800 feet from the X N.	or 🔲 S. Line,		Sign or enter name(s) of person(s) sub	mitting application Date (mm/dd/yyyy)	
2000 feet from the E. or XW. Line			Clearthan	09/05/2024	
5. Parcel On Which Well Will Be Located			If signing print name		
(You must attach a current deed for the subject parcel)			Jeremy Hume		
A. You must check and complete <i>one</i> of the following: Subdivision: Name Mountain View			Title		
Lot 170 Block Filing/Unit Filing/Unit County exemption (attach copy of county approval & survey)			Owner - Phoenix CR Pro LLC		
Name/#Lot #			Office Use Only		
□ Parcel less than 35 acres, not in a subdivision attach a deed with metes & bounds description recorded prior to June 1, 1972, and current deed			Once use only		
Mining claim (attach copy of deed or survey) Name/#:					
□ Square 40 acre parcel as described in Item 4 (1/4 of the 1/4 is required)					
Parcel of 35 or more acres (attach metes & bounds description or survey)					
Other: (attach metes & bounds des B. # of acres in parcel C. Are you the ov	cription or survey) mer of this parcel? If no, list o	-			
D. Will this be the only well on this parcel? YES NO (if no – list other wells)			-		
E. Parcel ID# (optional):					

Skyridge Lending, LLC 509 Scott Avenue, Ste 154 Woodland Park, CO 80863

WARRANTY DEED

THIS DEED, Made on May 7, 2019 betwe

Merle K. Miller and Katie M. Miller

of the County of <u>Summit</u>, State of Colorado, grantor(s), and Skyridge Lending, LLC

whose legal address is 509 Scott Avenue, Ste 154, Woodland Park, CO 80863

of the County of _____ and State of Colorado, grantee(s):

WTINESS. That the grantor(s), for and in consideration of the sum of One Hundred Twenty-Five Thousand And No/100 DOLLARS (\$125,000.00), the receipt and sufficiency of which are hereby acknowledged, have granted, bargained, sold and conveyed, and by these presents do grant, bargain, sell, convey and confirm unto the grante(s), their heirs and assigns forever, all the real property, together with improvements, if any, situate, lying and being in the County of Summit, State of Colorado, described as follows:

as known by street and numbers:6306 Highway 9, Breckenridge, CO 80424

TOGETHER with all and singular the hereditaments and apputenances therounto belonging, or in anywise appertaining and the reversion and reversions, remainder and remainders, rents, issues and profits thereof, and all the estate, right, title, interest, daim and demand whatsoever of the grantor(s), either in law or equity, of, in and to the above bargained premises, with the hereditaments and appurtenances.

The above bargained premises, with the hereditaments and appurtenances. TO HAVE AND TO HOLD the said premises above bargained and described with the appurtenances, unto the grantbe(s), their heirs and assigns forever. And the grantbr(s), for themselves, their heirs, and personal representatives, do coverant, grant, bargain, and agree to and with the grantbe(s), their heirs and assigns, that at the time of the ensealing and delivery of the presents, they are well seized of the premises above conveyed, had good, sure, perfect, absolute and indefeasible estate of inheritance, in law, in fee simple and have good right, full power and lawful authority to graint, bargain, sail and convey the saine in maintier and there and other grants, bargains, sales, liens, taxes, assessments, encumbrances and restrictions of whatever kind or nature scover, except for:

Subject to statutory exceptions.

The grantor(s) shall and will WARRANT AND FOREVER DEFEND the above-bargained premises in the quiet and peaceable possession of the grantee(s), their heirs and assigns, against all and every person or persons lawfully claiming the whole of any part thereof. Wherever used herein, the plural references shall be construed to be singular references and singular references shall be construed to be plural references where the context requires and all references of gender and person shall be construed to refer to the grantor or grantors identified herein regardless of the context.

IN WITNESS WHEREOF, the grantor(s) have executed this deed on the date set forth above.

nonk. neu legle K. Miller 0 Kate M. Miller ΊV

State of Colorado County of Summit

On May 17^{M}_{2} 2019 before me, the undersigned a Notary Public in and for said County and State, personally appeared Merie K. Miller and Katie M. Miller personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the restrictly upon behalf of which the person(s) acted, executed the instrument.

hand and off ficial/seal. WITNESS my ha Signature: My Commission expires: 00/20/2022



32300-19-11761





Date: 09/05/2024 Order 46943 Number:

Water well permit application for Skyridge Lending LLC

Receipt Number	Quantity	Description	Unit Price	Extended Price
10038136	1	Exempt Well Permit Application - Outside DesB (Legacy Code: 11)	100.00	100.00
			Subtotal	\$100.00
			Total	\$100.00

To make the payment for this invoice, please visit our Online Payment Portal.

A third-party payment processing fee will be added to the total price at checkout. The third-party service fee for electronic check is **\$1.00.** If you pay by credit card, your fee will be **\$3.02** for this order. This amount will be included in the total price on your receipt. If you are unable to make payment online, please visit our website to view <u>alternative payment</u> <u>methods</u>. Applications or requests will not be processed until payment has been received. Fees are nonrefundable.

If you have any questions regarding this invoice, please contact:

Main Office 1313 SHERMAN ST, STE 821 DENVER, CO. 80203 (303) 866-3581

