Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN
INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

NAME OF WATER SYSTEM: American Road Water & Sewer District

CONTACT INFORMATION

Address: American Road Water & Sewer District
P.O. Box 2874 Gillette Wy 82717

City: Gillette | State: Wy | ZIP Code: 82717

Name of Operator and Engineer (if applicable): Duaine Fawcett

Phone Number: 299-9911

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 20

Number of Future Taps Planned: 0

Storage Tanks: 1

Volume of Each Tank: 110,000

Water Production Wells: 5

Production Rate in GPM of Each Well: 125

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years):
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 10,709,000

Peak Day Summer Usage (gallons): 58,194

Peak Day Winter Usage (gallons): 28,516

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many?

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

What pressure does the system operate at (psi)? 50 to 60
What would be the optimum pressure (psi)?

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

Please mail the survey and comments using the enclosed self addressed envelope.
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SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

no

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

**REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)

**The Wyoming Water Development Commission in conjunction with the City of Gillette and Campbell County has commissioned a study to develop a Regional Master Plan for the Gillette, Campbell County, and Crook County Regions. Your system has been identified as a potential regional partner. Please provide comments on your willingness to participate in a Regional District. Your participation and timely completion of this survey is appreciated.

Ideas for Comment Include:

- Would you prefer large district take over operation of your system?
- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

[redacted]

NAME OF WATER SYSTEM: Antelope Mobile Home Park

CONTACT INFORMATION

Address: P.O. Box 2210

City: Gillette | State: WY | ZIP Code: 82717

Name of Operator and Engineer (if applicable): Duaine Faucett

Phone Number: 299-9911

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 110

Number of Future Taps Planned: 0

Storage Tanks: 1

Volume of Each Tank: 12,000

Water Production Wells: 2

Production Rate in GPM of Each Well:

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

Private System

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years):
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 16,425,000

Peak Day Summer Usage (gallons): 51,323

Peak Day Winter Usage (gallons): 28,516

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many?

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

What pressure does the system operate at (psi)?

What would be the optimum pressure (psi)?

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

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[redacted]

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

no

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

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Ideas for Comment Include:

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- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:

Please mail the survey and comments using the enclosed self addressed envelope.
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Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

NAME OF WATER SYSTEM: Antelope Valley Bus. Park

CONTACT INFORMATION

Address: PO Box 545

City: Gillette | State: WY | ZIP Code: 82717

Name of Operator and Engineer (if applicable): Duaine Faucett

Phone Number: 299-9911

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 5

Number of Future Taps Planned:

Storage Tanks: 1

Volume of Each Tank: 15,000

Water Production Wells: 1

Production Rate in GPM of Each Well: 20

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years):
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 1,883,000

Peak Day Summer Usage (gallons): 10,806

Peak Day Winter Usage (gallons): 2,968

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many? All business

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

What pressure does the system operate at (psi)? 90

What would be the optimum pressure (psi)?

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

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Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

no

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

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Ideas for Comment Include:

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- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:

Please mail the survey and comments using the enclosed self addressed envelope.
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RECEIVED FEB 16 2009

SURVEY FOR WWDC GILLETTE REGIONAL WATER SYSTEM MASTER PLAN
INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

NAME OF WATER SYSTEM: Antelope Valley Improvement & Service District

CONTACT INFORMATION

Address: P.O. Box 2787

City: Gillette | State: WY | ZIP Code: 82717

Name of Operator and Engineer (if applicable): Mike Zmiewski | Phone Number: 660-5486

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 320 | Number of Future Taps Planned: 13

Storage Tanks: 2 above ground | Volume of Each Tank: Tan - 640,000 gal; White - 96,000 gal

Water Production Wells: 4 | Production Rate in GPM of Each Well: #2 - 120, #5 - 150, #3 - 180, #4 - 160

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years): 30
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 44,615,000

Peak Day Summer Usage (gallons): 600,000

Peak Day Winter Usage (gallons): 85,000

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many? Commercial - Kwik Shop gas station; Domestic - Antelope Valley Church

Approximate Peak Day Summer Usage of Non-Residential Users (gpm): 20

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

What pressure does the system operate at (psi)? Varies 70 - 120
What would be the optimum pressure (psi)?

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)
Fluoride levels in well water.

Please mail the survey and comments using the enclosed self addressed envelope.
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SURVEY FOR WWDC GILLETTE REGIONAL WATER SYSTEM MASTER PLAN
INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

NO

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

NO

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)

all water testing

Contact Information for viewing water quality data:

Name: Mike Zmienski
Address: PO Box 2787 Gillette WY 82717
Phone No.: 660-5886

see pg 3

Current Rates or Assessments (monthly):
$26.00 (which includes 4,000 gallons of WATER)
$11.25 (HOA ASSESSMENTS) $1.72 per thousand gallons

Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

HOMEOWNERS ASSESSMENTS DOES NOT

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

Antelope Valley is very interested in having a part in the creation of a Regional Water System. Utilizing the water from the new system would likely be in the future. Much more information needs to be provided to Antelope Valley as well as all systems so decisions can be made.

**The Wyoming Water Development Commission in conjunction with the City of Gillette and Campbell County has commissioned a study to develop a Regional Master Plan for the Gillette, Campbell County, and Crook County Regions. Your system has been identified as a potential regional partner. Please provide comments on your willingness to participate in a Regional District. Your participation and timely completion of this survey is appreciated.

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SURVEY FOR WWDC GILLETTE REGIONAL WATER SYSTEM MASTER PLAN
INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

Ideas for Comment Include:

- Would you prefer large district take over operation of your system?
- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:
Mike Zmienski	660-5486	katmw2@msn.com	1-27-09

Current Rates

minimum monthly rate - $26.00
includes 4,000 gallons

additional water over 4000 - $1.72 per 1,000 gallons

Home owners assessment - $11.25

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

NAME OF WATER SYSTEM: Bemor Subdivision

CONTACT INFORMATION

Address:

City: Gillette | State: WY | ZIP Code: 82716

Name of Operator and Engineer (if applicable): Duaine Faucett | Phone Number: 299-9911

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 43 | Number of Future Taps Planned:

Storage Tanks: 1 | Volume of Each Tank: 125,000

Water Production Wells: 1 | Production Rate in GPM of Each Well: 125

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

private System

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years):
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 4,419,000 | Peak Day Summer Usage (gallons): 48,387 | Peak Day Winter Usage (gallons): 18,322

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many? no

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?
gravity

What pressure does the system operate at (psi)? 60
What would be the optimum pressure (psi)? 60

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)
Privately owned System

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

no

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

no

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly): $50.00 mo. base - $10,000 $1.50 above.	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

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Please mail the survey and comments using the enclosed self addressed envelope.
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Ideas for Comment Include:

- Would you prefer large district take over operation of your system? yes
- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)? no prefer large district.
- Do you have any water quality concerns? no
- What would be the preferred management structure of a regional system? state or local
- What are the issues that you can identify that would limit participation a regional system? NONE

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:
Daniel Ward Ward Const. LLC	907-821-1704	Daniel W58@ Hotmail.com	12-18-08

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

NAME OF WATER SYSTEM: Buckskin Meadows

CONTACT INFORMATION

Address: 2035 PJ Rd

City: Gillette | State: Wy | ZIP Code: 82717

Name of Operator and Engineer (if applicable):

Phone Number:

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 1

Number of Future Taps Planned: 7

Storage Tanks:

Volume of Each Tank:

Water Production Wells: 1

Production Rate in GPM of Each Well: 25 GPM

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years): NEW
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): NA

Peak Day Summer Usage (gallons): NA

Peak Day Winter Usage (gallons): NA

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many? NO

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

What pressure does the system operate at (psi)?

What would be the optimum pressure (psi)?

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

its NEW NOT FINISHED YET!

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

NA

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SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

NO

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: PAUL WALKER Address: PO 2338 GILLETTE WY 82717 Phone No.: 307 680 8214
Current Rates or Assessments (monthly): McKINDEY	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

**REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)

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Ideas for Comment Include:

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- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:
PAUL WALKER	307 680 8214		2/15/10

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

SURVEY FOR THE WYOMING GILLETTE REGIONAL WATER SYSTEM MASTER PLAN
WATER SYSTEMS OF CAMPBELL AND SURROUNDING COUNTIES

NAME OF WATER SYSTEM: Campbell County Airport

CONTACT INFORMATION

Address: 2000 Airport Road		
City: Gillette	State: WY	ZIP Code: 82716
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 18	Number of Future Taps Planned:
Storage Tanks:	Volume of Each Tank:
Water Production Wells:	Production Rate in GPM of Each Well:
Does the system have individual water meters: **YES** or **NO** (Please circle one)	Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)
System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)	System Reliability: **Good, Fair, Poor** (Please circle one) System Age (years): Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 2,089,000	Peak Day Summer Usage (gallons): 15,871	Peak Day Winter Usage (gallons): 8,290
Does the system provide fire protection: **YES** or **NO** (Please circle one) Fire Flow Protection Provided, if known (gpm):	Are there any other users beside residential? If so, who and how many? Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? **YES** or **NO** (Please circle one) If so, what type and where are they located?	What pressure does the system operate at (psi)? What would be the optimum pressure (psi)?	

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

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[redacted]

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

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Ideas for Comment Include:

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- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:

Please mail the survey and comments using the enclosed self addressed envelope.
If you have any comments or questions please call Gary Fuller at (303) 764-1524
Please send survey to the following address if envelope is lost: 303 E. 17th Ave, Ste. 700, Denver, CO 80203

SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN
INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

NAME OF WATER SYSTEM: Cedar Hills Water Co.

CONTACT INFORMATION

Address: P.O. Box 925

City: Gillette | State: Wy | ZIP Code: 82717

Name of Operator and Engineer (if applicable): Duane Fancott

Phone Number: 299-9911

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 100

Number of Future Taps Planned:

Storage Tanks: 3

Volume of Each Tank:
1 - 45000
2 - 45000
3 45000

Water Production Wells: 2

Production Rate in GPM of Each Well:
1 —
2 - 85 GPM

Does the system have individual water meters: **YES** or **NO** (Please circle one)

Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)

System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)

Water Company

System Reliability: **Good, Fair, Poor** (Please circle one)
System Age (years): 20+
Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 12,107,000

Peak Day Summer Usage (gallons): 96,710

Peak Day Winter Usage (gallons): 24,258

Does the system provide fire protection: **YES** or **NO** (Please circle one)

Fire Flow Protection Provided, if known (gpm):

Are there any other users beside residential? If so, who and how many? No

Approximate Peak Day Summer Usage of Non-Residential Users (gpm):

Does the system have standby power? **YES** or **NO** (Please circle one)
If so, what type and where are they located?

it's a gravity System

What pressure does the system operate at (psi)? 70

What would be the optimum pressure (psi)? 70

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

runs well

Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

No water quality issues

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SURVEY FOR WWDC GILLETTE REGIONAL MASTER PLAN INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

no

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duane Farrell Address: Phone No.: 299 9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

**REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)

**The Wyoming Water Development Commission in conjunction with the City of Gillette and Campbell County has commissioned a study to develop a Regional Master Plan for the Gillette, Campbell County, and Crook County Regions. Your system has been identified as a potential regional partner. Please provide comments on your willingness to participate in a Regional District. Your participation and timely completion of this survey is appreciated.

Ideas for Comment Include:

- Would you prefer large district take over operation of your system?
- Are you interested in raw water purchase (the system still operates as an individual system with supply being provided by the regional system in lieu of wells)?
- Do you have any water quality concerns?
- What would be the preferred management structure of a regional system?
- What are the issues that you can identify that would limit participation a regional system?

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:

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NAME OF WATER SYSTEM: Cook Road Water District

CONTACT INFORMATION

Address:		
City: Gillette	State: WY	ZIP Code: 82716
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	

GENERAL WATER SYSTEM INFORMATION

Number of Water Taps or Connections: 70	Number of Future Taps Planned:
Storage Tanks: 1	Volume of Each Tank: 480,000
Water Production Wells: 1	Production Rate in GPM of Each Well: 110
Does the system have individual water meters: **YES** or **NO** (Please circle one)	Disinfection method: **Chlorine Gas, Sodium Hypochlorite, Other** (Please circle one, if other please describe)
System Governmental Structure: **Improvement & Service District, Water & Sewer District, Homeowners Association, Other** (Please circle one, if other please describe)	System Reliability: **Good, Fair, Poor** (Please circle one) System Age (years): Comments (including recent improvements or repairs)

USAGE INFORMATION

Annual Volume Water Usage (gallons): 18,321,000	Peak Day Summer Usage (gallons): 145,193	Peak Day Winter Usage (gallons): 18,323
Does the system provide fire protection: **YES** or **NO** (Please circle one) Fire Flow Protection Provided, if known (gpm):	Are there any other users beside residential? If so, who and how many? no Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? **YES** or **NO** (Please circle one) If so, what type and where are they located? gravity system	What pressure does the system operate at (psi)? 20 What would be the optimum pressure (psi)?	

SYSTEM OPERATION AND WATER QUALITY INFORMATION

What is the largest issue the system faces? **Billing, Managerial, Operations, Reliability, Supply, Other:** (Please circle one and describe)

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Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies?

no

SYSTEM OPERATION AND WATER QUALITY INFORMATION CONT.

Have you conducted any water system studies in the past few years? If so, is a copy of the report available?

no

Do you have copies of water quality data that can be reviewed? **YES** or **NO** (Please circle one, and list available data below)	Contact Information for viewing water quality data: Name: Duaine Faucett Address: Phone No.: 299-9911
Current Rates or Assessments (monthly):	Does assessment include road or other costs? **YES** or **NO** (Please circle one, if yes please describe)

****REGIONAL SYSTEM COMMENTS (CONTINUE ON BACK IF NECESSARY)**

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