

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. 17<sup>th</sup> Ave, Ste. 700, Denver, CO 80203

<b>NAME OF WATER SYSTEM:</b> Hitching Post		
<b>CONTACT INFORMATION</b>		
Address: 6501 Douglas Hwy, Space #1		
City: Gillette	State: WY	ZIP Code: 82718
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 33	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 20,000	
Water Production Wells: 1	Production Rate in GPM of Each Well: 20	
Does the system have individual water meters: YES or <b>NO</b> (Please circle one)	Disinfection method: Chlorine Gas, <b>Sodium Hypochlorite</b> , Other (Please circle one, if other please describe)	
System Governmental Structure: <b>Improvement &amp; Service District, Water &amp; Sewer District, Homeowners Association, Other</b> (Please circle one, if other please describe)	System Reliability: <b>Good, Fair, Poor</b> (Please circle one) System Age (years): Comments (including recent improvements or repairs)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons):	Peak Day Summer Usage (gallons):	Peak Day Winter Usage (gallons):
Does the system provide fire protection: YES or <b>NO</b> (Please circle one)	Are there any other users beside residential? If so, who and how many?	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? YES or <b>NO</b> (Please circle one) If so, what type and where are they located?	What pressure does the system operate at (psi)? 35 What would be the optimum pressure (psi)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <b>Billing, Managerial, Operations, Reliability, Supply, Other:</b> (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?

**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)**

**\*\*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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**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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<b>NAME OF WATER SYSTEM:</b> Hoy Mobile Home Park		
<b>CONTACT INFORMATION</b>		
Address: PO Box 1656		
City: Gillette	State: WY	ZIP Code: 82717
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 50	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 16,000	
Water Production Wells:	Production Rate in GPM of Each Well:	
Does the system have individual water meters: YES or <b>NO</b> (Please circle one)	Disinfection method: Chlorine Gas, <b>Sodium Hypochlorite</b> , Other (Please circle one, if other please describe)	
System Governmental Structure: <b>Improvement &amp; Service District, Water &amp; Sewer District, Homeowners Association, Other</b> (Please circle one, if other please describe)  private system	System Reliability: <b>Good, Fair, Poor</b> (Please circle one) System Age (years): Comments (including recent improvements or repairs):	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 5,705,000	Peak Day Summer Usage (gallons): 19,258	Peak Day Winter Usage (gallons): 11,677
Does the system provide fire protection: YES or <b>NO</b> (Please circle one)	Are there any other users beside residential? If so, who and how many? YES - 1 welding shop	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? YES or <b>NO</b> (Please circle one) If so, what type and where are they located?	What pressure does the system operate at (psi)? 30-50 What would be the optimum pressure (psi)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <b>Billing, Managerial, Operations, Reliability, Supply, Other:</b> (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)

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- Do you have any water quality concerns?
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<b>NAME OF WATER SYSTEM:</b> Interstate Industrial Park		
<b>CONTACT INFORMATION</b>		
Address: PO Box 3922		
City: Gillette	State: WY	ZIP Code: 82717
Name of Operator and Engineer (if applicable): Duane Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 50	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 24,000	
Water Production Wells: 1	Production Rate in GPM of Each Well: 80	
Does the system have individual water meters: YES or <b>NO</b> (Please circle one)	Disinfection method: <b>Chlorine Gas, Sodium Hypochlorite, Other</b> (Please circle one, if other please describe)	
System Governmental Structure: <b>Improvement &amp; Service District, Water &amp; Sewer District, Homeowners Association, Other</b> (Please circle one, if other please describe)	System Reliability: <b>Good, Fair, Poor</b> (Please circle one) System Age (years): Comments (including recent improvements or repairs)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 3,900,000	Peak Day Summer Usage (gallons): 15,677	Peak Day Winter Usage (gallons): 11,742
Does the system provide fire protection: YES or <b>NO</b> (Please circle one)	Are there any other users beside residential? If so, who and how many? all business	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? YES or <b>NO</b> (Please circle one) If so, what type and where are they located?	What pressure does the system operate at (psi)? 30-50 What would be the optimum pressure (psi)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <b>Billing, Managerial, Operations, Reliability, Supply, Other:</b> (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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<b>NAME OF WATER SYSTEM:</b> Lakeview Mobile Home Park		
<b>CONTACT INFORMATION</b>		
Address:		
City: Gillette	State: WY	ZIP Code: 82716
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 19	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 18,000	
Water Production Wells: 1	Production Rate in GPM of Each Well: 11	
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)	
Private system		
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 1,233,000	Peak Day Summer Usage (gallons): 4,871	Peak Day Winter Usage (gallons): 3,194
Does the system provide fire protection: YES or NO (Please circle one)	Are there any other users beside residential? If so, who and how many?	
Fire Flow Protection Provided, if known (gpm):	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)? 30-50 What would be the optimum pressure (psi)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
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)

**YES**

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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- Do you have any water quality concerns?
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<b>NAME OF WATER SYSTEM:</b> Meadow Springs		
<b>CONTACT INFORMATION</b>		
Address: P O Box 471		
City: Gillette	State: WY	ZIP Code: 82717
Name of Operator and Engineer (if applicable): Duane faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections:	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 17,000	
Water Production Wells: 1	Production Rate in GPM of Each Well: 16	
Does the system have individual water meters: YES or <b>NO</b> (Please circle one)	Disinfection method: <b>Chlorine Gas</b> , <b>Sodium Hypochlorite</b> , Other (Please circle one, if other please describe)	
System Governmental Structure: <b>Improvement &amp; Service District, Water &amp; Sewer District, Homeowners Association, Other</b> (Please circle one, if other please describe)	System Reliability: <b>Good</b> , <b>Fair</b> , <b>Poor</b> (Please circle one) System Age (years): Comments (including recent improvements or repairs)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 1,552,000	Peak Day Summer Usage (gallons): 13,129	Peak Day Winter Usage (gallons): 2,516
Does the system provide fire protection: YES or <b>NO</b> (Please circle one)	Are there any other users beside residential? If so, who and how many? no	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? YES or <b>NO</b> (Please circle one) If so, what type and where are they located? gravity system	What pressure does the system operate at (psi)? What would be the optimum pressure (psi)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <b>Billing, Managerial, Operations, Reliability, Supply, Other</b> (Please circle one and describe) ownership of <del>the</del> system + tank size + additional wells		

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

Water Quality is good.

**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)**

We feel a regional water system would not be in the best interest of the people of Meadow Springs as well as Cambell & Crook Counties.

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**WATER SUPPLY MASTER PLAN FOR THE REGIONAL SYSTEM OF COLORADO AND LOCAL OPERATORS**

Ideas for Comment Include:

- Would you prefer large district take over operation of your system? *No*
- 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)? *maybe*
- Do you have any water quality concerns? *no*
- What would be the preferred management structure of a regional system? *what are the options?*
- What are the issues that you can identify that would limit participation a regional system?  
*high cost, loss of local control*

Name of Person Completing Survey:	Phone Number:	Email Address:	Date:
<i>Mike Zmiewski</i>	<i>685-8235</i>	<i>katzmwz@msn.com</i>	<i>12-11-08</i>

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<b>NAME OF WATER SYSTEM:</b> Means W + S District		
<b>CONTACT INFORMATION</b>		
Address: PO Box 1661		
City: Gillette	State: WY	ZIP Code: 82717
Name of Operator and Engineer (if applicable): Ducine Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 108	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 167,000	
Water Production Wells: 2	Production Rate in GPM of Each Well: 88	
Does the system have individual water meters: <input checked="" type="radio"/> YES or <input type="radio"/> NO (Please circle one)	Disinfection method: <input checked="" type="radio"/> Chlorine Gas, <input type="radio"/> Sodium Hypochlorite, <input type="radio"/> Other (Please circle one, if other please describe)	
System Governmental Structure: <input checked="" type="radio"/> Improvement & Service District, <input type="radio"/> Water & Sewer District, <input type="radio"/> Homeowners Association, <input type="radio"/> Other (Please circle one, if other please describe)	System Reliability: <input checked="" type="radio"/> Good, <input type="radio"/> Fair, <input type="radio"/> Poor (Please circle one) System Age (years): Comments (including recent improvements or repairs)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 30,411,000	Peak Day Summer Usage (gallons): 139,097	Peak Day Winter Usage (gallons): 45,452
Does the system provide fire protection: <input checked="" type="radio"/> YES or <input type="radio"/> NO (Please circle one)	Are there any other users beside residential? If so, who and how many?	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? <input checked="" type="radio"/> YES or <input type="radio"/> 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)?	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <input checked="" type="radio"/> Billing, <input type="radio"/> Managerial, <input type="radio"/> Operations, <input type="radio"/> Reliability, <input type="radio"/> Supply, <input type="radio"/> Other: (Please circle one and describe)		

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**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)

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- 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?

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SURVEY FOR WADC GILLETTE REGIONAL MASTER PLAN INCLUDES PORTIONS OF CAMPBELL AND CROOK COUNTIES		
NAME OF WATER SYSTEM: <i>Nickelsons Little Farms Water Co.</i>		
<b>CONTACT INFORMATION</b>		
Address: <i>94 Patrick Henry Road</i>		
City: <i>Gillette</i>	State: <del>Wyoming</del> <i>WY</i>	ZIP Code: <i>82718</i>
Name of Operator and Engineer (if applicable): <i>Duane Farcett</i>		Phone Number: <i>307 299 9911</i>
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections:	Number of Future Taps Planned:	
Storage Tanks: <i>3</i>	Volume of Each Tank: <i>1 - 68000</i> <i>2 - 68000</i> <i>3 - 36000</i>	
Water Production Wells: <i>2</i>	Production Rate in GPM of Each Well: <i>1 - 30</i> <i>2 - 94</i>	
Does the system have individual water meters: <input checked="" type="radio"/> YES or <input type="radio"/> NO (Please circle one)	Disinfection method: <input checked="" type="radio"/> Chlorine Gas, <input type="radio"/> Sodium Hypochlorite, <input type="radio"/> Other (Please circle one, if other please describe)	
System Governmental Structure: <input checked="" type="radio"/> Improvement & Service District, <input type="radio"/> Water & Sewer District, <input type="radio"/> Homeowners Association, <input type="radio"/> Other (Please circle one, if other please describe)	System Reliability: <input checked="" type="radio"/> Good, <input type="radio"/> Fair, <input type="radio"/> Poor (Please circle one) System Age (years): <i>25+</i> Comments (including recent improvements or repairs)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): <i>approx 19,000,000</i>	Peak Day Summer Usage (gallons): <i>143,419</i>	Peak Day Winter Usage (gallons): <i>14,161</i>
Does the system provide fire protection: <input checked="" type="radio"/> YES or <input type="radio"/> NO (Please circle one)	Are there any other users beside residential? If so, who and how many? <i>NO</i>	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? <input checked="" type="radio"/> YES or <input type="radio"/> NO (Please circle one) If so, what type and where are they located?	What pressure does the system operate at (psi)? <i>Pressure system 80psi</i> What would be the optimum pressure (psi)? <i>Gravity system 35 to 60</i>	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? <input checked="" type="radio"/> Billing, <input type="radio"/> Managerial, <input type="radio"/> Operations, <input type="radio"/> Reliability, <input type="radio"/> Supply, <input type="radio"/> Other: (Please circle one and describe) <i>Water is good quality, good quality the age of the system is the only concern</i>		
Do you have any water quality issues, concerns, comments, on-going water quality-focused projects or studies? <i>NO</i>		

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. 17<sup>th</sup> Ave, Ste. 700, Denver, CO 80203

**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:  
 Address:

*Dennis Fawcett*

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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<b>NAME OF WATER SYSTEM:</b> Overbrook Subdivision		
<b>CONTACT INFORMATION</b>		
Address:		
City: Gillette	State: WY	ZIP Code: 82716
Name of Operator and Engineer (if applicable): Duaine Faucett	Phone Number: 299-9911	
<b>GENERAL WATER SYSTEM INFORMATION</b>		
Number of Water Taps or Connections: 23	Number of Future Taps Planned:	
Storage Tanks: 1	Volume of Each Tank: 36,000	
Water Production Wells: 1	Production Rate in GPM of Each Well: 60	
Does the system have individual water meters <input checked="" type="radio"/> YES or <input type="radio"/> 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)	
<b>USAGE INFORMATION</b>		
Annual Volume Water Usage (gallons): 4,010,000	Peak Day Summer Usage (gallons): 13,871	Peak Day Winter Usage (gallons): 5,032
Does the system provide fire protection: YES or <input checked="" type="radio"/> NO (Please circle one)	Are there any other users beside residential? If so, who and how many? no	
Fire Flow Protection Provided, if known (gpm):	Approximate Peak Day Summer Usage of Non-Residential Users (gpm):	
Does the system have standby power? YES or <input type="radio"/> 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)? 80	
<b>SYSTEM OPERATION AND WATER QUALITY INFORMATION</b>		
What is the largest issue the system faces? Billing, Managerial, Operations, Reliability, Supply, Other: (Please circle one and describe)		

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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. 17<sup>th</sup> 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):

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

roads

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

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