



RESIDENTIAL BROKERAGE
Independently Owned and Operated by NRT, LLC



The printed portions of this form, except differentiated additions, have been approved by the Colorado Real Estate Commission. (SPD19-8-07) (Mandatory 1-08)

THIS FORM HAS IMPORTANT LEGAL CONSEQUENCES AND THE PARTIES SHOULD CONSULT LEGAL AND TAX OR OTHER COUNSEL BEFORE SIGNING.

**SELLER'S PROPERTY DISCLOSURE
(ALL TYPES OF PROPERTIES)**

THIS DISCLOSURE SHOULD BE COMPLETED BY SELLER, NOT BY BROKER.

Seller states that the information contained in this Disclosure is correct to the best of Seller's CURRENT ACTUAL KNOWLEDGE as of this Date. Any changes will be disclosed by Seller to Buyer promptly after discovery. Seller hereby receipts for a copy of this Disclosure. If the Property is part of a Common Interest Community, this Disclosure is limited to the Property or Unit itself, except as stated in Section L. Broker may deliver a copy of this Disclosure to prospective buyers.

Note: If an item is not present at the Property insert "N/A" in the Comments column. The Contract to Buy and Sell Real Estate, not this Disclosure form, determines whether an item is included or excluded.

Date: 7-2-09

Property Address: 11312 BELLE MEADE DR. CONIFER, CO 80433

Seller: DAVID & KAREN LANGS

F. IMPROVEMENTS

If this box is checked, there are no structures or improvements on the Property; do not complete Sections A-G.

A. STRUCTURAL CONDITIONS		Yes	No	Do Not Know	COMMENTS
Do any of the following conditions now exist or have they ever existed:					
1	Structural problems		/		
2	Moisture and/or water problems		/		
3	Damage due to termites, other insects or rodents		/		
4	Damage due to hail, wind, fire or flood		/		
5	Cracks, heaving or settling problems		/		
6	Exterior wall or window problems		/		
7	Exterior Artificial Stucco (EIFS)		/		
8	Any additions or alterations made		/		
9	Building code violations		/		
B. ROOF		Yes	No	Do Not Know	COMMENTS
1	Roof problems		/		
2	Roof material <u>COMPOSITE SHINGLES</u> Age <u>4 yr</u>		/		
2	Roof material _____ Age _____		/		
3	Roof leak: Past		/		
4	Roof leak: Present		/		
5	Damage to roof: Past		/		
6	Damage to roof: Present		/		
7	Roof under warranty until _____ Transferable		/		
8	Roof work done while under current roof warranty		/		
9	Skylight problems		/		
10	Gutter or downspout problems		/		

PREPARED BY: Agent, Broker Associate

SPD 19-8-07, SELLER'S PROPERTY DISCLOSURE (ALL TYPES OF PROPERTIES). Coldwell Banker Residential Brokerage RealFAST® Software, ©2008, Version 6.16. Software Registered to: Chris Mygatt, Coldwell Banker Residential Brokerage

Buyer(s) _____

Seller(s) DL Page 100

		IN WORKING CONDITION			Age If Known	COMMENTS
C. APPLIANCES		Yes	No	Do Not Know		
1	Built-in vacuum system & accessories					N/A
2	Clothes dryer	✓				
3	Clothes washer	✓				
4	Dishwasher	✓				
5	Disposal	✓				
6	Freezer	✓				
7	Gas grill	✓				
8	Hood	✓				
9	Microwave oven	✓				
10	Oven	✓				
11	Range	✓				
12	Refrigerator	✓				
13	T.V. antenna <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased	✓				
14	Satellite system or DSS dish <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased	✓				
15	Trash compactor	✓				

		IN WORKING CONDITION			Age If Known	COMMENTS
D. ELECTRICAL & TELECOMMUNICATIONS		Yes	No	Do Not Know		
1	Security System: <input type="checkbox"/> Owned <input type="checkbox"/> Leased					N/A
2	Smoke/fire detectors: <input type="checkbox"/> Battery <input type="checkbox"/> Hardwire	✓				
3	Light fixtures	✓				
4	Switches & outlets	✓				
5	Aluminum wiring			✓		
6	Electrical: Phase _____ Voltage _____	✓				
7	Telecommunications (T1, fiber, cable, satellite)	✓				
8	Inside telephone wiring & blocks/jacks	✓				
9	Abandoned communication cables <input type="checkbox"/> Yes <input type="checkbox"/> No	✓				
10	Ceiling fans	✓				
11	Garage door opener	✓				
12	Garage door control(s) # _____	✓				
13	Intercom/doorbell	✓				
14	In-wall speakers	✓				
15	220 volt service	✓				
16	Landscape lighting	✓				

		IN WORKING CONDITION			Age If Known	COMMENTS
E. MECHANICAL		Yes	No	Do Not Know		
1	Air conditioning:					
	Evaporative cooler	✓				
	Window units	✓				
	Central	✓				
	Computer room	✓				
2	Attic/whole house fan	✓				
3	Vent fans	✓				
4	Humidifier					N/A
5	Air purifier					N/A
6	Sauna					N/A

		IN WORKING CONDITION			Age If Known	COMMENTS
E. MECHANICAL (Continued)	Yes	No	Do Not Know			
7	Hot tub or spa					
8	Steam room/shower	✓				
9	Pool					N/A
10	Heating system: Type <u>FORCED AIR</u> Fuel _____ Type _____ Fuel _____	✓				
11	Water heater: Number of <u>2</u> Fuel type _____ Capacity _____	✓				
12	Fireplace: Type _____ Fuel <u>GAS</u>	✓				
13	Fireplace insert					
14	Stove: Type _____ Fuel _____					N/A
15	When was fireplace/wood stove, chimney/flue last cleaned: Date: _____ <input type="checkbox"/> Do not know					N/A
16	Fuel tanks: <input type="checkbox"/> Owned <input type="checkbox"/> Leased					N/A
17	Radiant heating system <input type="checkbox"/> Interior <input type="checkbox"/> Exterior Hose Type _____					N/A
18	Overhead door					N/A
19	Entry gate system					N/A
20	Elevator/escalators					N/A
21	Lift/hoist/crane					N/A

		IN WORKING CONDITION			Age If Known	COMMENTS
F. WATER, SEWER & OTHER UTILITIES	Yes	No	Do Not Know			
1	Water filter system: <input type="checkbox"/> Owned <input type="checkbox"/> Leased					N/A
2	Water softener: <input type="checkbox"/> Owned <input type="checkbox"/> Leased					N/A
3	Sewage problems: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Do not know					
4	Lift station (sewage ejector pump)					N/A
5	Drainage, storm sewers, retention ponds					N/A
6	Grey water storage/use					N/A
7	Plumbing problems <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Do not know					
8	Sump Pump					N/A
9	Underground sprinkler system					N/A
10	Fire sprinkler system					N/A
11	Polybutylene pipe: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do not know			✓		
12	Galvanized pipe: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do not know			✓		
13	Backflow prevention device: <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Fire <input type="checkbox"/> Sewage			✓		
14	Irrigation pump					N/A
15	Well pump	✓				

		IN WORKING CONDITION			Age If Known	COMMENTS
G. OTHER DISCLOSURES - IMPROVEMENTS	Yes	No	Do Not Know			
1	Included fixtures and equipment in working condition	✓				
2						
3						
4						

PREPARED BY: Agent, Broker Associate

SPD 19-8-07, SELLER'S PROPERTY DISCLOSURE (ALL TYPES OF PROPERTIES). Coldwell Banker Residential Brokerage

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Buyer(s) _____

Seller(s)  _____

H. GENERAL					
H.	USE, ZONING & LEGAL ISSUES	Yes	No	Do Not Know	COMMENTS
1	Current use of the Property		<input checked="" type="checkbox"/>		
2	Zoning violation, variance, conditional use, enforceable PUD or non-conforming use		<input checked="" type="checkbox"/>		
3	Notice or threat of condemnation proceedings		<input checked="" type="checkbox"/>		
4	Notice of any adverse conditions from any governmental or quasi-governmental agency that have not been resolved		<input checked="" type="checkbox"/>		
5	Violation of restrictive covenants or owners' association rules or regulations		<input checked="" type="checkbox"/>		
6	Notice of zoning action related to the Property		<input checked="" type="checkbox"/>		
7	Notice of ADA complaint or report		<input checked="" type="checkbox"/>		
8	Other legal action		<input checked="" type="checkbox"/>		

I.	ACCESS, PARKING, DRAINAGE & SIGNAGE	Yes	No	Do Not Know	COMMENTS
1	Any access problems		<input checked="" type="checkbox"/>		
2	Roads, driveways, trails or paths through the Property used by others		<input checked="" type="checkbox"/>		
3	Public highway or county road bordering the Property		<input checked="" type="checkbox"/>		
4	Encroachments, boundary disputes or unrecorded easements		<input checked="" type="checkbox"/>		
5	Shared or common areas with adjoining properties		<input checked="" type="checkbox"/>		
6	Cross-parking agreement, covenants, easements		<input checked="" type="checkbox"/>		
7	Requirements for curb, gravel/paving, landscaping		<input checked="" type="checkbox"/>		
8	Flooding or drainage problems: Past		<input checked="" type="checkbox"/>		
9	Flooding or drainage problems: Present		<input checked="" type="checkbox"/>		
10	Signs: <input type="checkbox"/> Owned <input type="checkbox"/> Leased				N/A
11	Signs: Government or private restriction problems		<input checked="" type="checkbox"/>		

J.	WATER & SEWER SUPPLY	Yes	No	Do Not Know	COMMENTS
1	Water Rights: Type		<input checked="" type="checkbox"/>		
2	Water tap fees paid in full				N/A
3	Sewer tap fees paid in full				N/A
4	Subject to augmentation plan		<input checked="" type="checkbox"/>		
5	Well required to be metered		<input checked="" type="checkbox"/>		
6	Type of water supply: <input type="checkbox"/> Public <input type="checkbox"/> Community <input checked="" type="checkbox"/> Well <input type="checkbox"/> Shared Well <input type="checkbox"/> Cistern <input type="checkbox"/> None If the Property is served by a Well, a copy of the Well Permit <input checked="" type="checkbox"/> Is <input type="checkbox"/> Is Not attached. Well Permit #: <u>61487-F</u> <input type="checkbox"/> Drilling Records <input type="checkbox"/> Are <input type="checkbox"/> Are not attached. The Water Provider for the Property can be contacted at: Name: _____ Address: _____ Web Site: _____ Phone No.: _____ <input type="checkbox"/> There is neither a Well nor a Water Provider for the Property. The source of potable water for the Property is [describe source]: SOME WATER PROVIDERS RELY, TO VARYING DEGREES, ON NONRENEWABLE GROUND WATER. YOU MAY WISH TO CONTACT YOUR PROVIDER (OR INVESTIGATE THE DESCRIBED SOURCE) TO DETERMINE THE LONG-TERM SUFFICIENCY OF THE PROVIDER'S WATER SUPPLIES.				
7	Type of sanitary sewer service: Public Community <u>Septic System</u> None Other _____ If the Property is served by an on-site septic system, supply to buyer a copy of the permit. Type of septic system: <input type="checkbox"/> Tank <input checked="" type="checkbox"/> Leach <input type="checkbox"/> Lagoon				

K.	ENVIRONMENTAL CONDITIONS	Yes	No	Do Not Know	COMMENTS
	Do any of the following conditions now exist or have they ever existed:				
1	Hazardous materials on the Property, such as radioactive, toxic, or biohazardous materials, asbestos, pesticides, herbicides, wastewater and other sludge, radon, methane, solvents or petroleum products		✓		
2	Underground storage tanks		✓		
3	Aboveground storage tanks		✓		
4	Underground transmission lines		✓		
5	Pets kept on the Property	✓			
6	Property used as, situated on, or adjoining a dump, land fill or municipal solid waste land fill		✓		
7	Monitoring wells or test equipment		✓		
8	Sliding, settling, upheaval, movement or instability of earth or expansive soils of the Property		✓		
9	Mine shafts, tunnels or abandoned wells on the Property		✓		
10	Within governmentally designated geological hazard or sensitive area		✓		
11	Within governmentally designated flood plain or wetland area		✓		
12	Governmentally designated noxious weeds (within last 3 years only) If yes, see Section O.		✓		
13	Dead, diseased or infested trees or shrubs		✓		
14	Environmental assessments, studies or reports done involving the physical condition of the Property		✓		
15	Property used for any mining, graveling, or other natural resource extraction operations such as oil and gas wells		✓		
16	Endangered species on the Property		✓		
17	Archeological features, fossils, or artifacts on the Property		✓		
18	Interior of Improvements of Property Smoke-free		✓		
19	Other environmental problems		✓		
L.	COMMON INTEREST COMMUNITY - ASSOCIATION PROPERTY	Yes	No	Do Not Know	COMMENTS
1	Property is part of an owners' association	✓			
2	Special assessments or increases in regular assessments approved by owners' association but not yet implemented		✓		
3	Has the Association made demand or commenced a lawsuit against a builder or contractor alleging defective construction of improvements of the Association Property (common area or property owned or controlled by the Association but outside the Seller's Property or Unit).		✓		
M.	OTHER DISCLOSURES - GENERAL	Yes	No	Do Not Know	COMMENTS
1	Any part of the Property leased to others (written or oral)		✓		
2	Written reports of any building, site, roofing, soils or engineering investigations or studies of the Property		✓		
3	Any property insurance claim submitted (whether paid or not)		✓		
4	Structural, architectural and engineering plans and/or specifications for any existing improvements		✓		
5	Property was previously used as a methamphetamine laboratory and not remediated to state standards		✓		
6	Government special improvements approved, but not yet installed, that may become a lien against the Property		✓		

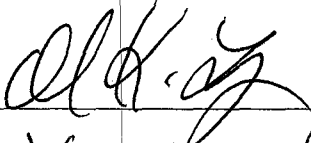
III. LAND					
N.	CROPS, LIVESTOCK & LEASES	Yes	No	Do Not Know	COMMENTS
1	Crops being grown on the Property		/		
2	Seller owns all crops				N/A
3	Livestock on the Property		/		
4	Any land leased from others: <input type="checkbox"/> State <input type="checkbox"/> BLM <input type="checkbox"/> Federal <input type="checkbox"/> Private <input type="checkbox"/> Other		/		
O.	NOXIOUS WEEDS				
The Colorado Weed Management Act became law on January 1, 1992. The law requires that every county or municipality in Colorado adopt a weed management plan outlining the rules governing identification and method of eradication. The State of Colorado has identified PURPLE LOOSESTRIFE, SPOTTED KNAPWEED, MUSK THISTLE, LEAFY SPURGE, CANADIAN THISTLE, DIFFUSE KNAPWEED, RUSSIAN KNAPWEED, DALMATIAN TOADFLAX and YELLOW TOADFLAX, among others, as noxious weeds.					
Have any of the following occurred to the Property within the last 3 years:		Yes	No	Do Not Know	COMMENTS
1	Identification of noxious weeds		/		
2	Subject to written weed control plan		/		
3	Herbicides applied		/		
4	Biological agents or insects released on any of the noxious weeds		/		
P.	OTHER DISCLOSURES - Land	Yes	No	Do Not Know	COMMENTS
1	Any part of the Property enrolled in any governmental programs such as Conservation Reserve Program (CRP), Wetlands Reserve Program (WRP), etc.		/		
2	Conservation easement		/		

Seller and Buyer understand that the real estate brokers do not warrant or guarantee the above information on the Property. Property inspection services may be purchased. This form is not intended as a substitute for an inspection of the Property.

ADVISORY TO SELLER:

Failure to disclose a known material defect may result in legal liability.

The information contained in this Disclosure has been furnished by Seller, who certifies to the truth thereof based on Seller's CURRENT ACTUAL KNOWLEDGE. Any changes will be disclosed by Seller to Buyer promptly after discovery. Seller hereby receipts for a copy of this Disclosure.

SELLER  DATE 7-2-09

SELLER Karen C. Lang DATE 7-2-09

ADVISORY TO BUYER:

Even though Seller has answered the above questions to the best of Seller's current actual knowledge, Buyer should obtain expert assistance to accurately and fully evaluate the Property regarding use and access, water, sewer, utilities, environmental and geological conditions, noxious weeds and other matters which may affect Buyer's use of the Property. Valuable information may be obtained from various local/state/federal agencies, and other experts may perform more specific evaluation of the Property.

Boundaries, location and ownership of fences, driveways, hedges, and similar items may become matters of dispute. A survey may be used to determine such matters.

The contract between Seller and Buyer controls if any item is included or excluded.

Buyer acknowledges that Seller does not warrant that the Property is fit for Buyer's intended purposes or use of the Property. Buyer acknowledges that Seller's indication that an item is "working" is not to be construed as a warranty of its continued operability or as a representation or warranty that such item is fit for Buyer's intended purposes. Buyer hereby receipts for a copy of this Disclosure.

BUYER _____ DATE _____

BUYER _____ DATE _____



RESIDENTIAL BROKERAGE

Independently Owned and Operated by NRT, Incorporated



The printed portions of this form, except differentiated additions, have been approved by the Colorado Real Estate Commission. (SF 94-5-04) FINAL 060104

SQUARE FOOTAGE DISCLOSURE

This disclosure is made to Buyer and Seller pursuant to the requirements of Colorado Real Estate Commission and applies to improved residential real estate. Check applicable boxes below.

Property Address: 11312 Belle Meade

1. Licensee Measurement

Listing Licensee Has Has Not measured the square footage of the residence according to the following standard, methodology or manner.

Table with 3 columns: Standard/Methodology/Manner, Date Measured, Square Footage. Rows include Exterior measurement, FHA, ANSI, Local standard, and Other.

2. Other Source of Measurement:

Listing Licensee Is Is Not providing information on square footage of the residence from another source(s) as indicated below:

Table with 3 columns: Source of Square Footage Information, Date, Square Footage. Rows include Prior appraisal, Building plans, Assessor's office, and Other.

Measurement is for the purpose of marketing, may not be exact and is not for loan, valuation or other purpose. If exact square footage is a concern, the property should be independently measured.

Buyer and Seller are advised to verify this information. Any independent measurement or investigation should be completed on or before the Inspection Objection Deadline of the contract.

By [Signature] Listing Licensee Date 7/12/09

The undersigned acknowledge receipt of this disclosure.

SELLER  DATE 7.2.09

SELLER Karen Lang DATE 7-2-09

BUYER _____ DATE _____

BUYER _____ DATE _____



RESIDENTIAL BROKERAGE

Independently Owned and Operated by NRT, Incorporated



AFFILIATED BUSINESS ARRANGEMENT DISCLOSURE STATEMENT

To: Consumer

From: Coldwell Banker Residential Brokerage

Thank you for contacting us, your local Coldwell Banker Residential Brokerage office (hereinafter Broker), in connection with the purchase or sale of a home or other property. This is to give you notice that Broker has a business relationship with the companies listed in this Statement, in that each of the companies is wholly or partially owned by Broker or by Realty Corporation. Realty Corporation indirectly wholly owns NRT Incorporated, a parent company of your local Broker, and other brokerage offices throughout the nation. Realty Corporation also owns the franchisor of the COLDWELL BANKER®, COLDWELL BANKER COMMERCIAL®, CENTURY 21®, ERA® and SOTHEBY'S INTERNATIONAL REALTY® systems. Because of these relationships, the referral of business to these companies may provide us or other related parties noted herein a financial or other benefit.

In connection with providing real estate brokerage services, Broker may receive a commission or a cooperative brokerage referral fee for a referral to another real estate brokerage company (which is typical in the real estate brokerage industry); however, this will not affect the amount you pay to purchase or sell a property.

We have set forth below the full range of services that these companies provide, along with an estimate of the range of charges generally made for these services. You are NOT required to use the listed companies as a condition of the purchase or sale of your property. THERE ARE FREQUENTLY OTHER SETTLEMENT SERVICE PROVIDERS AVAILABLE WITH SIMILAR SERVICES. YOU ARE FREE TO SHOP AROUND TO DETERMINE THAT YOU ARE RECEIVING THE BEST SERVICES AND THE BEST RATE FOR THESE SERVICES.

COMPANIES	HUD-1 DESCRIPTION/LINE DESIGNATION	ESTIMATE OF RANGE OF CHARGES GENERALLY MADE BY PROVIDER ¹
PHH HOME LOANS, LLC, dba COLDWELL BANKER HOME LOANS Provides a full range of residential first mortgage loan products and services.	Loan origination fee (801) Loan discount fee/points (802) Application fee (800 Series)	0 - 2% of loan amount 0 - 5% of loan amount ² \$0 - \$350 ³
MID-EXCHANGE, INC. Acts as a qualified intermediary for Inc. 1031 Tax Deferred	Additional settlement charges (1300 Series)	\$500.00 - \$3,000.00 Exchange
GUARDIAN TITLE AGENCY, LLC Based upon a search of public records, this service brings to your attention any known problems with the property's title before closing, and insures against loss due to certain title defects.	Purchase of owner's policy (1108-1110): Up to \$100,000 \$105,000 - \$250,000 \$255,000 - \$500,000	Rates calculated on a per \$5,000 of coverage basis \$650 - \$938 \$947 - \$1,216 \$1,225 - \$1,678
NRT Insurance Agency, Inc. Provides insurance agency services for homeowners and other types of insurance	Hazard Insurance Premium (903)	\$2.50 - \$4 per thousand dollars of replacement cost of dwelling.

- Actual charges may vary according to the particular circumstances underlying the transaction, including the home value, coverage and limits, other requested terms and services, unusual market conditions, government regulations, property location and features, and other similar factors. Rates may not be the lowest available and are subject to change. For a free, no obligation quote, please contact the company directly. Where required by state law, current rates for insurance are filed with the applicable state agency, and depending upon the circumstances, may vary from the rates shown above.
- The loan discount fee/points are affected by the note rate. Depending upon market conditions, the loan discount fee/points may be higher to adjust for below-market rates.
- There are other charges imposed in connection with mortgage loans. In addition, a lender may require the use of other service providers, including but not limited to an attorney, credit reporting agency or real estate appraiser chosen to represent the lender's interest. If you apply to any of these companies for a loan, you will receive additional information regarding anticipated charges.

Although not affiliated business arrangements, please also note the following: Certain Brokers market the Coldwell Banker Home Protection Plan provided by

PREPARED BY: Agent, Broker Associate

CB3-5-06 Affiliated Business Arrangement Disclosure Statement, Revised 9/21/2006. Coldwell Banker Residential Brokerage ©2004-2005 NRT Incorporated. All rights reserved. An Equal Opportunity Company. Equal Housing Opportunity. Owned and Operated by NRT Incorporated. RealFAS® Software, ©2007, Version 6.16. Software Registered to: Chris Mygatt, Coldwell Banker Residential Brokerage

Buyer(s) _____

Seller(s)

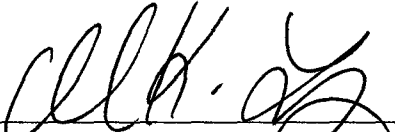
American Home Shield Corporation, and U.S. Inspect, Inc., as well as other products and services. Broker, its employees or its affiliate(s) may receive a financial or other benefit in connection with the products or services described herein.

Acknowledgement of Receipt of Disclosure

I/We have received the Affiliated Business Arrangement Disclosure Statement from Broker and understand that Broker may refer me/us to the settlement service providers listed in this Statement. Broker, its employees or its affiliate(s) may receive a financial or other benefit as the result of that referral.

BUYER _____ DATE _____

BUYER _____ DATE _____

SELLER  _____ DATE 7-2-09

SELLER Karen C. Lang _____ DATE 7-2-09

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RESIDENTIAL BROKERAGE

MOLD DISCLOSURE

There has been a great deal of publicity regarding the existence of toxic and non-toxic mold in homes, apartments and commercial buildings. Current information indicates that some types of mold may cause severe health problems for certain individuals.

Not all molds are detectable by a visual inspection by a Realtor or even a professional whole house inspector. It is also possible that the property could have a hidden mold problem that the seller is not aware of.

The only way to provide any reasonable assurance that the property does not have a mold or other health hazard problems is to retain the services of an environmental expert who will conduct specific tests. Normally, these tests will consist of an interior and exterior examination for airborne spores and a carpet test but other procedures may be necessary. Any visible mold should be professionally evaluated.

Broker advises that every buyer should consider having a specific mold test performed by an environmental professional as either a separate test or an add-on to his or her whole house inspection. This is especially necessary if any of the inspection reports or disclosure documents indicate that there is evidence of past or present moisture, standing water or water intrusion at the property since most molds thrives on moisture.

All inspections, including those to detect mold, should be completed within the inspection period established in the purchase contract. Any waiver or failure on the part of a buyer to complete and obtain all appropriate tests, including those for mold, is against the advice of Broker.

Broker has not and cannot verify whether or not there is any health hazard at the property.

Property Address: 11312 Belle Meade Dr.

Date: 7-2-09 Seller [Signature]

Date: 7-2-09 Seller Karen E. Lang

Date: Buyer

Date: Buyer

COLORADO DIVISION OF WATER RESOURCES
DEPARTMENT OF NATURAL RESOURCES
1313 SHERMAN ST., RM 818, DENVER, CO 80203
phone - info: (303) 866-3587 main: (303) 866-3681
fax: (303) 866-3589 http://www.water.state.co.us

Office Use Only

Form GWS-44 (1/2001)

RECEIVED

JUL 28 2004

WATER RESOURCES
STATE ENGINEER
COLORADO

RESIDENTIAL Note: Also use this form to apply for livestock watering

Water Well Permit Application

Review instructions on reverse side prior to completing form.
The form must be completed in black ink.

1. Applicant Information

Name of applicant

David K. & Karen C. Lang

Mailing address

8236 Homestake Rd

City

Larkspur

State

CO

Zip code

80018

Telephone #

303, 681-0630

2. Type Of Application (check applicable boxes)

- Construct new well Use existing well
 Replace existing well Change or increase use
 Change source (aquifer) Reapplication (expired permit)
 Other:

3. Refer To (if applicable)

Well permit #

Water Court case #

92CW087

Designated Basin Determination #

Well name or #

4. Location Of Proposed Well

County

JEFFERSON

SW

1/8 of the SW 1/4

Section

23

Township N or S

6

Range E or W

71

Principal Meridian

6th

Distance of well from section lines (section lines are typically not property lines)

250

Ft. from

N

5

1000

Ft. from

E

W

For replacement wells only - distance and direction from old well to new well

feet

direction

Well location address (if applicable)

Optional: GPS well 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)

Units must be set to true north

Were points averaged? YES NO

Northing 4373811

Easting 472879

5. Parcel On Which Well Will Be Located

A. You must check and complete one of the following:

- Subdivision: Name Belle Meade
Lot 23 Block Filing/Unit
- County exemption (attach copy of county approval & survey):
Name/# Lot #
- Parcel less than 35 acres, not in a subdivision, attach a deed with
metes and bounds description recorded prior to June 1, 1972
- Mining claim (attach a copy of the deed or survey):
Name/#
- Square 40 acre parcel as described in Item 4
- Parcel of 35 or more acres (attach a metes and bounds description or survey)
- Other (attach metes & bounds description or survey and supporting documents)

B. # of acres in parcel

10

C. Are you the owner of this parcel?

YES NO (if no - see instructions)

D. Will this be the only well on this parcel?

YES NO (if no - list other wells)

6. Use Of Well (check applicable boxes)

See instructions to determine use(s) for which you may qualify

- A. Ordinary household use in one single-family dwelling
(no outside use)
- B. Ordinary household use in 1 to 3 single-family dwellings:
Number of dwellings:
- Home garden/lawn irrigation, not to exceed one acre:
area irrigated sq. ft. acre
- Domestic animal watering - (non-commercial)
- C. Livestock watering (on farm/ranch/range/pasture)

7. Well Data (proposed)

Maximum pumping rate 15 gpm Annual amount to be withdrawn 33 acre-feet
Total depth feet Aquifer

8. Water Supplier

Is this parcel within boundaries of a water service area? YES NO
If yes, provide name of supplier:

9. Type Of Sewage System

- Septic tank / absorption leach field
- Central system: District name:
- Vault: Location sewage to be hauled to:
- Other (attach copy of engineering design and report)

10. Proposed Well Driller License #(optional): 949

11. Signature Of Applicant(s) Or Authorized Agent

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.

Sign here (Must be original signature)

Date

David K. Lang

6-11-04

Print Name & Title

DAVID K. LANG

Office Use Only

USGS map name DWR map no. Surface elev.

Receipt area only

Invoice # 527691
7/28/2004 - 09:05:36
Cashier ID: 01
6488.00

Check Purchase- 82188

WE
WR
CWCS
TOPO
MYLAR
SBS
DIV WD BA MD

FORM NO.
GWS-32
10/94

PUMP INSTALLATION AND TEST REPORT
STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use only

1. WELL PERMIT NUMBER 61487-F

2. OWNER NAME(S) David K. & Karen C. Lang
Mailing Address 10822 Trailrider Pass
City, St. Zip Littleton, Co 80127
Phone (303) 681-0630

3. WELL LOCATION AS DRILLED: SW 1/4 SW 1/4, Sec. 23 Twp. 6 S, Range 71 W
DISTANCES FROM SEC. LINES:
1300 ft. from South Sec. line. and 250 ft. from West Sec. line.
(north or south) (east or west)
SUBDIVISION: Belle Meade LOT 23 BLOCK _____ FILING(UNIT) _____
STREET ADDRESS AT WELL LOCATION: _____

4. PUMP DATA: Type submersible Installation Completed 1-26-05
Pump Manufacturer Sta-Rite Pump Model No. L5P4GHL-03B
Design GPM 5 at RPM _____, HP 2, Volts 230, Full Load Amps 13
Pump Intake Depth 770 Feet, Drop/Column Pipe Size 1 inches, Kind PVC sch 120

ADDITIONAL INFORMATION FOR PUMPS GREATER THAT 50 GPM:

TURBINE DRIVER TYPE: Electric Engine Other _____
Design Head _____ feet, Number of Stages _____, Shaft size _____ inches.

5. OTHER EQUIPMENT:
Airline Installed Yes No, Orifice Depth ft. _____ Monitor Tube Installed Yes No, Depth ft. _____
Flow Meter Mfg. _____ Meter Serial No. _____
Meter Readout Gallons, Thousand Gallons, Acre feet, Beginning Reading _____

6. TEST DATA: Check box if Test data is submitted on Supplemental Form.
Date _____
Total Well Depth 805' Time _____
Static Level 100' Rate (GPM) 5
Date Measured _____ Pumping Lvl. 770'

7. DISINFECTION: Type granular chlorine Amt. Used 21 oz

8. Water Quality analysis available. Yes No

9. Remarks _____

10. I have read the statements made herein and know the contents thereof, and that they are true to my knowk [Pursuant to Section 24-4-104 (13)(a) C.R.S., the making of false statements herein constitutes perjury in the se degree and is punishable as a class 1 misdemeanor.]

CONTRACTOR ASPEN DRILLING CO., INC Phone (303) 697-8335 Lic. No. 12
Mailing Address 9054 S. HWY 285 MORRISON, CO 80465

Name/Title (Please type or print) BRADLEY J. BEERY, pres Signature Bradley J. Beery Date 1-26-05