



## FARMERS

Recipient:

Steve Gall

Sent By:

Brian Luckey

Company:

Company:

Luckey Agency

Fax Number:

14024712900

Fax Number:

970-744-4483

Voice Number:

Voice Number:

970-587-9260

Date:

2/12/2007

Time:

2:22:23 PM

Total No. Pages:

3

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Subject:

High PLains Hydrology

## Message:

Please Call if you have any questions

Brian Luckey 1300 Broad St. Suite A Milliken, Co 80543 Toll Free (888)-858-9266 Office (970)-587-9260

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Great service and competitive rates on all lines of insurance from Home, Auto Commercial, Life, Specialty and Financial Planning!

FEB 1 2 2007

| A   | CORD  | CERTIFICATE OF INSURANCE |                                    |   |   |   | DATE (MM/DD/YY)<br>02/03/2007 |  |
|---|---|--------------------------|------------------------------------|---|---|---|-------------------------------|--|
| PRODUCER Luckey Insurance Agency 1300 Broad St  |   |                          |                                    |   | THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. |   |                               |  |
| Milliken, CO 80543<br>970-587-9260  |   |                          |                                    | INSUREERS AFFORDING COVERAGE  |   |   |                               |  |
| INSURED   |   |                          |                                    |   | INSURER A Farmers Insurance Group   |   |                               |  |
| Richard R Luckey DBA<br>High Plains Hydrology LLC   |   |                          |                                    | INSURER B: Truck Insurance Exchange   |   |   |                               |  |
| 7956 S Shawnee St   |   |                          |                                    | INSURER C: Mid-Century Insurance Co.  |   |   |                               |  |
| Aurora CO 80016   |   |                          |                                    | INSURER D: Scottsdale Insurance Co.   |   |   |                               |  |
|   |   |                          |                                    | INSURERE: Hudson Insurance Company  |   |   |                               |  |
| COVERAGES   |   |                          |                                    |   |   |   |                               |  |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OF CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. |   |                          |                                    |   |   |   |                               |  |
| INS<br>R<br>LTR   | TYPE OF INSURANCE                                 | POLICY NUMBER            | POLICY EFFECTIVE<br>DATE(MM/DD/YY) |   | POLICY EXPIRATION<br>DATE(MWDD/YY)  | LIMITS                                  |                               |  |
|   | GENERAL LIABILITY                                 | FEC 6105647              | 5647 02/03/                        |   | 02/03/2007  | EACH OCCURENCE                          | \$1,000,000                   |  |
|   | ☑ GENERAL LIABILITY                               | •                        |                                    |   |   | FIRE DAMAGE (Any one fire)              | \$100,000                     |  |
|   | □CLAIMS MADE ☑ OCCUR                              |                          | Ì                                  |   |   | MED EXP (Any one person)                | \$1,000                       |  |
| E   | □Personal Property                                | ·                        |                                    |   |   | PERSONAL & ADV INJURY                   | \$1,000,000                   |  |
|   | □Loss of income                                   |                          |                                    |   |   | GENERAL AGGRREGATE PRODUCTS-COMP/OP AGG | \$1,000,000                   |  |
|   | Markey Corpurer Class                             |                          |                                    |   |   | PERSONAL PROPERTY                       | Q1,000,000                    |  |
|   | M POLICY PROJECT LOC AUTOMOBILE LIABILITY         | 116848265                | 07/09/                             | /2006   | 07/09/2008  | COMBINED SINGLE LIMIT (Ea accident)     | S .                           |  |
|   | ☐ ALL OWNED AUTOS                                 |                          |                                    |   |   | BODILY INJURY<br>(Per person)           | \$1,250,000                   |  |
| A   | ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ☐ NON-OWNED AUTOS |                          |                                    |   |   | BODILY INJURY<br>(Per accident)         | \$1,250,000                   |  |
|   | □ NON-OWNED AUTOS                                 | _                        |                                    |   |   | PROPERTY DAMAGE<br>(Per accident)       | \$1,250,000                   |  |
|   | GARAGE LIABILITY                                  |                          |                                    |   |   | AUTO ONLY-EA ACCIDENT                   | \$                            |  |
|   | ☐ ANY AUTO  | ,                        |                                    | •   |   | OTHER THAN EA                           | \$                            |  |
|   |   |                          |                                    |   |   | AUTO ONLY: AGG                          | \$                            |  |
| E   | PROFESSIONAL LIABILITY                            | FEC 6105647              | 02/03/2                            | 007   | 02/03/2007  | EACH OCCURRENCE                         | \$1,000,000                   |  |
| -   | OCCUR X CLAIMS MADE                               | CCUR IXI CLAIMS MADE     |                                    |   |   | AGGREGATE                               | \$1,000,000                   |  |
|   | ☑ DEDUCTIBLE \$ 2500                              |                          |                                    |   |   |   | \$                            |  |
|   | D RETENTION &                                     |                          |                                    |   |   |   | \$                            |  |
|   | WORKERS COMPENSATION AND                          |                          |                                    |   |   | STATU ER                                |                               |  |
|   | EMPLOYERS' LIABILITY                              |                          |                                    |   |   | EACH ACCIDENT                           | \$                            |  |
|   |   |                          |                                    |   |   | DISEASE-EA EMPLOYEE                     | \$                            |  |
|   | ·   |                          |                                    |   |   | DISEASE - POLICY LIMIT                  | \$                            |  |
|   | OTHER   |                          |                                    |   | <b>.</b>  | Limits of<br>Liability                  | \$1,000,000                   |  |
| DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS   |   |                          |                                    |   |   |   |                               |  |
| XI CERTIFICATE HOLDER   |   |                          |                                    |   | CANCELLATION  |   |                               |  |
| Nebraska Department of Natural<br>301 Centennial Mall South<br>P.O. Box 94676<br>Lincoln, NE 68509-4676   |   |                          |                                    | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 1.0 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OF REPRESENTATIONS  AUTHORIZED REPRESENTATIVE  BYLAN R Looking |   |   |                               |  |
|   |   |                          |                                    | Luckey Insurance Inc.   |   |   |                               |  |