

RECEIVED

JUN 09 1997

WATER RESOURCES
STATE ENGINEER
C.O.C.

1. WELL PERMIT NUMBER 198242

2. OWNER NAME(S) RON CRAIG
Mailing Address 9390 Hardin Rd
City, St. Zip Black Forest, CO 80908
Phone ()

3. WELL LOCATION AS DRILLED: SW 1/4 NE 1/4, Sec. 15 Twp. 12S Range 65W 6th
DISTANCES FROM SEC. LINES:
1932 ft. from North Sec. line, and 2310 ft. from EAST Sec. line.
(north or south) (east or west)
SUBDIVISION: High Acres LOT BLOCK FILING(UNIT)
STREET ADDRESS AT WELL LOCATION: 9390 Hardin Rd

4. PUMP DATA: Type Submersible Installation Completed 5-19-97
Pump Manufacturer Goulds Pump Model No. 166515412
Design GPM 10 at RPM 3450 HP 1.5 Volts 230 Full Load Amps
Pump Intake Depth 380 Feet, Drop/Column Pipe Size 1 Inches, Kind PVC

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 5-19-97
Total Well Depth 440' Time 1 hr
Static Level 180' Rate (GPM) 12
Date Measured 5-2-97 Pumping Lvl. 400'

DISINFECTION: Type HTH Amt. Used 3.5 02

Water Quality analysis available. ☐ Yes ☒ No

Remarks _____

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

CONTRACTOR Barnhart Pump Co Phone (719) 495-2912 Lic. No. 1122
Mailing Address 11685 Eggert Dr Falcon, CO 80831
Name/Title (Please type or print) Steve Barnhart / Pres Signature Steve Barnhart Date 6-5-97

For Office Use only

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MAY 22 1997

**WATER RESOURCES
STATE ENGINEER
UNIT**

1. WELL PERMIT NUMBER 198242

2. OWNER NAME(S) Ron+Susan Craig/Consumer Const.
Mailing Address 9390 Hardin Rd.
City, St. Zip Black Forest, CO 80908
Phone ()

3. WELL LOCATION AS DRILLED: SW 1/4 NE 1/4, Sec. 15 Twp. 12 S, Range 65 W, 6th
DISTANCES FROM SEC. LINES:
1732 ft. from North Sec. line. and 2310 ft. from East Sec. line. OR
(north or south) (east or west)
SUBDIVISION: High Acres LOT 20 BLOCK FILING(UNIT)
STREET ADDRESS AT WELL LOCATION:

4. GROUND SURFACE ELEVATION _____ ft. DRILLING METHOD Air Rotary

DATE COMPLETED 5/2/97 . TOTAL DEPTH 440 ft. DEPTH COMPLETED 440 ft.

5. GEOLOGIC LOG:

Depth	Description of Material (Type, Size, Color, Water Location)
0-40	Loose gravel
40-60	Med quartz shale layers
60-120	Med to loose quartz
120-160	Loose quartz
160-240	Med quartz sand layers
240-260	Loose quartz
260-300	Fine to med quartz
300-340	Fine quartz shale layers
340-360	Loose quartz
360-440	Fine loose quartz

6. HOLE DIAM. (in.)	From (ft)	To (ft)
8 3/4	0	20
6 1/4	10	440

7. PLAIN CASING

OD (in)	Kind	Wall Size	From(ft)	To(ft)
6.5/8	Steel	.188	+1	20
4.5	PVC	.227	10	340

PERF. CASING: Screen Slot Size:

4.5	PVC	.227	340	440
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8. FILTER PACK:

Material Gravel
Size 1/4" Rock
Interval 20-320 & 340-440

9. PACKER PLACEMENT:

Type _____

Depth _____

10. GROUTING RECORD:

Material	Amount	Density	Interval	Placement
Cement	#94 X	6gal.	7-20	Poured
Cement	#188 X	12gal.	320-340	Pumped

REMARKS:

11. DISINFECTION: Type	HTH	Amt. Used	803
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12 WELL TEST DATA: ☐ Check box if Test Data is submitted on Form No. GWS 39 Supplemental Well Test.

TESTING METHOD Airlifted

Static Level 180 ft. Date/Time measured 5/2/97, Production Rate 25 gpm.

Pumping level 400 ft. Date/Time measured 5/2/97, Test length (hrs.) 4

Remarks

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

CONTRACTOR Can-America Drilling, Inc. Phone (719) 541-2967 Lic. No. 1149
Mailing Address P.O. Box 416 Simla, CO 80835

Name/Title (Please type or print)

Signature

Date _____

Wayne arde, v.p.

Edw. W. W. W. W.

5/2/97

OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES

818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

LIC

APPLICANT

WELL PERMIT NUMBER 198242
DIV. 8 CNTY. 21 WD 10 DES. BASIN 4 MD 12

Lot: 20 Block: Filing: Subdlv: HIGH ACRES

APPROVED WELL LOCATION
EL PASO COUNTY

SW 1/4 NE 1/4 Section 15
Twp 12 S RANGE 65 W 6th P.M.

DISTANCES FROM SECTION LINES

1732 Ft. from North Section Line
2310 Ft. from East Section Line

MARY K LEE
1410 PKWY DR
ROHNERT PARK CA 94928-4708

(707)584-3859

PERMIT TO CONSTRUCT A WELL

CONDITIONS OF APPROVAL

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of the permit does not assure the applicant that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-90-105.
- 4) Water from this well may be used for domestic purposes inside one (1) single family dwelling.
- 5) The maximum pumping rate shall not exceed 15 GPM.
- 6) The annual withdrawal of ground water from this well shall not exceed one (1) acre-feet.
- 7) The irrigated area shall not exceed one (1) acre (43,560 square feet) of lawn and garden.
- 8) Production is limited to the Dawson aquifer. Plain casing must be installed and sealed from ground surface to a minimum depth of 170 feet to prevent diversion of water from other zones. The depth of the well shall not exceed 890 feet, which is the estimated base of the Dawson aquifer.
- 9) This well must be constructed within 300 feet of the location specified on this permit.

NOTE: The ability of this well to withdraw its authorized amount of water from this non-renewable aquifer may be less than the 100 years upon which the amount of water in the aquifer is allocated, due to anticipated water level declines. SMR 9-17-96

APPROVED
SMR

State Engineer

Receipt No. 0404984

DATE ISSUED **SEP 17 1996**

By *[Signature]*
EXPIRATION DATE **SEP 17 1998**

COLORADO DIVISION OF WATER RESOURCES
DEPARTMENT OF NATURAL RESOURCES
1313 SHERMAN ST., RM. 818, DENVER CO 80203
phone - info: (303) 866-3587 main: (303) 866-3581

RESIDENTIAL * (Note: You may also use this form to apply for livestock watering)
Review instructions prior to completing form

Water Well Permit Application
Must be completed in black ink or typed

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AUG 14 1996

1. APPLICANT INFORMATION				6. USE OF WELL (check appropriate entry or entries)			
Name of applicant MARY K. LEE				See instructions to determine use(s) for which you may qualify - <input type="checkbox"/> A. Ordinary household use in one single-family dwelling (NO outside use) <input checked="" type="checkbox"/> B. Ordinary household use in 1 to 3 single-family dwellings: Number of dwellings: <u>1</u> <input checked="" type="checkbox"/> Home garden/lawn irrigation, not to exceed 1 acre: area irrigated <u>1.0</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acre <input checked="" type="checkbox"/> Domestic animal watering - (non-commercial) <input type="checkbox"/> C. Livestock watering (on farm/ranch/range/pasture)			
Mailing Address 1410 PARKWAY DRIVE							
City ROHNERT PARK, CA 94928-4708		State CA		Zip code 94928-4708			
Telephone Number (include area code) 1-707-584-3859							
2. TYPE OF APPLICATION (check applicable box(es))				7. WELL DATA			
<input checked="" type="checkbox"/> Construct new well		<input type="checkbox"/> Use existing well		Maximum pumping rate 15 gpm		Annual amount to be withdrawn 1.0 acre-feet	
<input type="checkbox"/> Replace existing well		<input type="checkbox"/> Change / Increase Use		Total depth 400 feet		Aquifer Dawson	
<input type="checkbox"/> Change (source) aquifer		<input type="checkbox"/> Reapplication (expired permit)					
<input type="checkbox"/> Other:							
3. REFER TO (if applicable):				8. TYPE OF RESIDENTIAL SEWAGE SYSTEM			
Water court case # n/a		Permit # n/a		<input checked="" type="checkbox"/> Septic tank / absorption leach field <input type="checkbox"/> Central system District name: _____ <input type="checkbox"/> Vault Location sewage to be hauled to: _____ <input type="checkbox"/> Other (attach copy of engineering design)			
Verbal # n/a -VE-		Monitoring hole acknowledgment # MH- n/a		9. PROPOSED WELL DRILLER (optional)			
Well name or # n/a				Name Licensed Licensee number			
4. LOCATION OF WELL				10. SIGNATURE of applicant(s) or authorized agent			
County El Paso		Quarter/quarter SW NE		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.			
Section 15		Township N or S 12		Range E or W 65		Principal Meridian 6th	
Distance of well from section lines 1732 ft. from <input checked="" type="checkbox"/> N <input type="checkbox"/> S 2310 ft. from <input checked="" type="checkbox"/> E <input type="checkbox"/> W				Must be original signature Mary Kay Lee			
Well location address, if different from applicant address (if applicable) 9390 Hardin Road				Title owner Date 08/11/96			
For replacement wells only - distance and direction from old well to new well n/a feet direction				OPTIONAL INFORMATION			
5. TRACT ON WHICH WELL WILL BE LOCATED				USGS map name DWR map no. 57-0 Surface elev. 7530			
A. You must check one of the following - see instructions <input checked="" type="checkbox"/> Subdivision: Name <u>High Acres</u> Lot no. <u>20</u> Block no. <u> </u> Filing/Unit <u> </u> <input type="checkbox"/> County exemption (attach copy of county approval & survey) Name/no. <u> </u> Tract no. <u> </u> <input type="checkbox"/> Mining claim (attach copy of deed or survey) Name/no. <u> </u> <input type="checkbox"/> Other (attach legal description to application)				Office Use Only CHECKS DIV OF WATER RESOURCES KW 170-890 DIV 8 CO 21 WD 10 BA 4 MD 12			
B. STATE PARCEL ID# (optional): <u> </u>				Best Copy Available			
C. # acres in tract 5.18		D. Are you the owner of this property? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if no - see detailed inst.)					
E. Will this be the only well on this tract? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if other wells are on this tract - see detailed inst.)				USE MD 12			

15FD, 1AC, 1RR.
A, D, J, K, K, K

TO

EXEMPT WELL DATA SHEET - DENVER BASIN, COLORADO

APPLICANT: LEE RECEIPT NO. 404984

LOCATION: SW1/4 OF NE1/4 OF SEC. 15, T.12S., R.65W. (1732 NSL, 2310 ESL)

LOCATION IS WITHIN THE UPPER BLACK SQUIRREL DESIGNATED GROUND WATER BASIN

PROPOSED AQUIFER:

SURFACE ELEVATION: 7530

NUMBER OF ACRES IN TRACT: 5.18

IS PROPERTY WITHIN SERVICE BOUNDARIES OF MUNICIPALITY S.B.5 CONSENT MAPS? NO ☐ YES ☐

IF SUBDIVISION IS UNDER AUGMENTATION PLAN, CASE NO. IS _____, DIV. _____

IF SUBDIVISION WAS RECOMMENDED FOR APPROVAL BY THE WATER MANAGEMENT BRANCH, DATE OF LETTER IS _____

INFORMATION ON SUBDIVISION OR TRACT OF LAND/SPECIAL RESTRICTIONS:

evaluated by SMR on SEPTEMBER 16, 1996

AQUIFER	ELEVATION		NET SAND	DEPTH TO		ANNUAL APPROP A-F	STATUS
	BOT.	TOP		BOT.	TOP		
→ UPPER DAWSON	6638	7362	362	892	168	3.750	NNT
LOWER DAWSON	----	----	----	----	----	----	---
DENVER	5734	6611	333	1796	919	2.924	NNT
UPPER ARAPAHOE	5185	5676	251	2345	1854	2.202	NT
LOWER ARAPAHOE	----	----	----	----	----	----	---
LARAMIE-FOX HILLS	4623	4927	192	2907	2603	1.492	NT

note: E indicates location is at aquifer boundary and values may be more approximate.

* indicates the proposed aquifer.

All values are interpolated from the S.B.5 data base assembled in November of 1986.