

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 110 748-A

2. OWNER NAME(S) BILL & LINDA BUCKHANAN
Mailing Address PO Box 601
City, St. Zip Cripple Creek, Co 80813
Phone (719) 689-2342

3. WELL LOCATION AS DRILLED: SE 1/4 NW 1/4, Sec. 33 Twp. 14 S, Range 69 W
DISTANCES FROM SEC. LINES:
2515 ft. from North Sec. line. and 1650 ft. from WEST Sec. line.
(north or south) (east or west)
SUBDIVISION: _____ LOT _____ BLOCK _____ FILING(UNIT) _____
STREET ADDRESS AT WELL LOCATION: 12654 Hwy 67 Cripple Creek Co 80813.

4. PUMP DATA: Type SUBMERSIBLE Installation Completed 20 Sept 97
Pump Manufacturer RED JACKET Pump Model No. 0825833
Design GPM 5 GPM at RPM _____, HP 1, Volts 230, Full Load Amps _____
Pump Intake Depth 390' 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 9-20-97 9-20-97 9-20-97 9-20-97
Total Well Depth 400' Time 12:15 12:25 1:15 1:55
Static Level 50' Rate (GPM) 1 9/10 GPM 1 9/10 GPM 1 9/10 GPM 1 9/10 GPM
Date Measured 20 Sept 97 Pumping Lvl. 390' 390' 390' 390'

7. DISINFECTION: Type HTH Amt. Used 2 CUPS

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 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 WOODLANDS Pump Supply Co Inc Phone (719) 687-9364 Lic. No. 1288
Mailing Address _____

Name/Title (Please type or print) James A Whitehead Signature J A Whitehead Date 9-29-97

1. WELL PERMIT NUMBER 110748-A

2. OWNER NAME(S) William & Linda Buckhanan
 Mailing Address Box 601
 City, St. Zip Cripple Creek, Colo 80813
 Phone (719) 689-2342

3. WELL LOCATION AS DRILLED: SE 1/4 NW 1/4, Sec. 33 Twp. 14 S, Range 69 W
 DISTANCES FROM SEC. LINES:
2515 ft. from North Sec. line. and 1650 ft. from West Sec. line. OR
(north or south) (east or west)
 SUBDIVISION: LOT BLOCK FILING(UNIT)
 STREET ADDRESS AT WELL LOCATION:

4. GROUND SURFACE ELEVATION _____ ft. DRILLING METHOD air percussion
 DATE COMPLETED 10-5-96 TOTAL DEPTH 400 ft. DEPTH COMPLETED 400 ft.

5. GEOLOGIC LOG:

Depth	Description of Material (Type, Size, Color, Water Location)
0	10 Decomposed
10	120 Soft rose granite TW 120
120	340 Gray granite Tw 340
340	400 Rose granite

REMARKS:

6. HOLE DIAM. (in.) From (ft) To (ft)

<u>9 1/2</u>	<u>0</u>	<u>20</u>
<u>6</u>	<u>20</u>	<u>400</u>

7. PLAIN CASING

OD (in)	Kind	Wall Size	From(ft)	To(ft)
<u>5/8</u>	<u>steel</u>	<u>188</u>	<u>+1</u>	<u>20</u>
<u>4</u>	<u>pvc</u>	<u>200</u>	<u>10</u>	<u>300</u>
<u>4</u>	<u>pvc</u>	<u>200</u>	<u>320</u>	<u>360</u>
<u>4</u>	<u>pvc</u>	<u>200</u>	<u>380</u>	<u>400</u>

PERF. CASING: Screen Slot Size:

<u>4</u>	<u>pvc</u>	<u>300</u>	<u>320</u>
<u>4</u>	<u>pvc</u>	<u>360</u>	<u>380</u>

8. FILTER PACK:
 Material NA
 Size _____
 Interval _____

9. PACKER PLACEMENT:
 Type NA
 Depth _____

10. GROUTING RECORD:

Material	Amount	Density	Interval	Placement
<u>portland</u>	<u>2 sack</u>	<u>5gps</u>	<u>20-5</u>	<u>Hand pour & vibrate</u>

11. DISINFECTION: Type chlorine tablets Amt. Used 2 cups

12. WELL TEST DATA: Check box if Test Data is submitted on Form No. GWS 39 Supplemental Well Test.
 TESTING METHOD air
 Static Level 75 ft. Date/Time measured 10-5-96, Production Rate 2 gpm.
 Pumping level 399 (air) ft. Date/Time measured 10-5-96, Test length (hrs.) 2
 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 Woods Drilling, Inc Phone (719) 687-2384 Lic. No. 1123
 Mailing Address Box 211 Woodland Park, Colo 80866

Name/Title (Please type or print)	Signature	Date
<u>William D Woods / Vice Pres</u>	<u>William D Woods</u>	<u>10/11/96</u>

OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES

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

WELL PERMIT NUMBER	<u>110748</u>	-	<u>A</u>
DIV. 2	CNTY. 60	WD 12	DES. BASIN MD

APPLICANT

WILLIAM & LINDA BUCKHANAN
BOX 601
CRIPPLE CREEK CO 80813-

(719)689-2342

APPROVED WELL LOCATION

TELLER COUNTY

SE 1/4 NW 1/4 Section 33
Twp 14 S RANGE 69 W 6th P.M.

DISTANCES FROM SECTION LINES

2515 Ft. from North Section Line
1650 Ft. from West Section Line

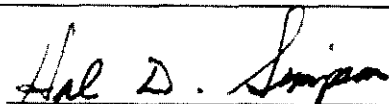
PERMIT TO CONSTRUCT A WELL

ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT

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 37-92-602(3)(c) for the relocation of an existing well, permit no. 110748-A. The old well must be plugged and sealed according to the Water Well Construction Rules within ninety (90) days of completion of the new well. **The enclosed Well Abandonment Report form must be completed and submitted to affirm that the old well was properly plugged and sealed.**
- 4) The use of ground water from this well is limited to ordinary household purposes inside one (1) single family dwelling, the watering of domestic animals, and the irrigation of not more than one acre of home gardens and lawns.
- 5) This well shall be constructed not more than 200 feet from the location specified on this permit.
- 6) The maximum pumping rate shall not exceed 15 GPM.

APPROVED
SMR


State Engineer

Receipt No. 0400145

DATE ISSUED JUN 24 1996


By

EXPIRATION DATE JUN 24 1998

110748A

MAY 12 1996

WATER RESOURCES STATE ENGINEER

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

1. APPLICANT INFORMATION			6. USE OF WELL (check appropriate entry or entries)		
Name of applicant <i>William G & Linda Buchanan</i>			See instructions to determine use(s) for which you may qualify --		
Mailing Address <i>PO Box 601</i>			<input type="checkbox"/> A. Ordinary household use in one single-family dwelling (NO outside use)		
City <i>Cripple Creek Co</i>	State <i>CO</i>	Zip code <i>80813</i>	<input checked="" type="checkbox"/> B. Ordinary household use in 1 to 3 single-family dwellings: Number of dwellings: <u>1</u>		
Telephone Number (include area code) <i>719 689 2342</i>			<input checked="" type="checkbox"/> Home garden/lawn irrigation, not to exceed 1 acre: area irrigated <u>1</u> sq. ft. <input checked="" type="checkbox"/> acre		
2. TYPE OF APPLICATION (check applicable box(es))			<input checked="" type="checkbox"/> Domestic animal watering -- (non-commercial)		
<input type="checkbox"/> Construct new well			<input type="checkbox"/> Use existing well		
<input checked="" type="checkbox"/> Replace existing well			<input type="checkbox"/> Change / Increase Use		
<input type="checkbox"/> Change (source) aquifer			<input type="checkbox"/> Reapplication (expired permit)		
<input type="checkbox"/> Other:			<input type="checkbox"/> C. Livestock watering (on farm/ranch/range/pasture)		
3. REFER TO (if applicable) 0			7. WELL DATA		
Water court case # <i>N/A</i>	Permit # <i>110748-A</i>		Maximum pumping rate <i>15</i> gpm	Annual amount to be withdrawn <i>ONE</i> acre-feet	
Verbal # <i>-VE-</i>	Monitoring hole acknowledgment # <i>MH- N/A</i>		Total depth <i>150</i> feet	Aquifer <i>DECOMPOSED GRANITE</i>	
Well name or # <i>NO EXISTING PERMIT #</i>			8. TYPE OF RESIDENTIAL SEWAGE SYSTEM		
4. LOCATION OF WELL			<input checked="" type="checkbox"/> Septic tank / absorption leach field		
County <i>Teller</i>	Quarter/quarter <i>SE 1/4</i>	Quarter <i>NW 1/4</i>	<input type="checkbox"/> Central system		
Section <i>33</i>	Township N or S <i>14</i>	Range E or W <i>69</i>	District name: _____		
Principal Meridian <i>6th</i>			<input type="checkbox"/> Vault		
Distance of well from section lines <i>2515</i> ft. from <input checked="" type="checkbox"/> N <input type="checkbox"/> S <i>1650</i> ft. from <input type="checkbox"/> E <input checked="" type="checkbox"/> W			Location sewage to be hauled to: _____		
Well location address, if different from applicant address (if applicable) <i>12654 Hwy 67 CRIPPLE CREEK.</i>			<input type="checkbox"/> Other (attach copy of engineering design)		
For replacement wells only - distance and direction from old well to new well <i>15</i> feet <i>SOUTH EAST</i> direction			9. PROPOSED WELL DRILLER (optional)		
5. TRACT ON WHICH WELL WILL BE LOCATED			Name <i>Woods Drilling, INC</i>		
A. You must check one of the following - see instructions			License number <i>1123</i>		
<input type="checkbox"/> Subdivision: Name _____			10. SIGNATURE of applicant(s) or authorized agent		
Lot no. _____ Block no. _____ Filing/Unit _____			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.		
<input type="checkbox"/> County exemption (attach copy of county approval & survey)			Must be original signature <i>Linda Buchanan</i>		
Name/no. _____ Tract no. _____			Title <i>owner</i>		
<input type="checkbox"/> Mining claim (attach copy of deed or survey)			Date <i>4-15-96</i>		
Name/no. _____			OPTIONAL INFORMATION		
<input checked="" type="checkbox"/> Other (attach legal description to application)			USGS map name _____		
B. STATE PARCEL			DWR map no. _____		
ID# (optional): <i>N/A</i>			Surface elev. _____		
C. # acres in tract <i>10</i>			Office Use Only		
D. Are you the owner of this property?			DIV <u>2</u>		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if no - see instructions)			CO <u>60</u>		
E. Will this be the only well on this tract?			WD <u>12</u>		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if other wells are on this tract- see instructions)			BA _____		
			USE _____ MD _____		

CHECKS TR#400145 050296 DIV OF WATER RESOURCES

STATE OF COLORADO

OFFICE OF THE STATE ENGINEER
Division of Water Resources
Department of Natural Resources
1313 Sherman Street, Room 818
Denver, Colorado 80203
Phone (303) 866-3581
FAX (303) 866-3589

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MAY 07 '96



WATER RESOURCES
STATE ENGINEER
COLO

Roy Romo
Governor
James S. Lochhead
Executive Director
Hal D. Simpson
State Engineer

REQUEST FOR WELL PERMIT APPLICATIONS, FEES & RELATED DOCUMENTS

We are returning the attached document(s) and your remittance, if included, since the material(s) cannot be processed without receiving the proper documents and /or the correct fee.

TO AVOID ADDITIONAL DELAYS, PLEASE REVIEW YOUR APPLICATION TO ASSURE THAT ALL ITEMS ARE COMPLETE AND CORRECT. INCOMPLETE APPLICATIONS CANNOT BE FULLY EVALUATED AND WILL BE RETURNED FOR CORRECTION.

APPLICATIONS FOR WELL PERMIT - \$60 EACH TOTAL DUE - \$ _____

APPLICATIONS TO REGISTER AND REPLACE AN EXISTING EXEMPT (DOMESTIC) WELL PERMIT - \$60 EACH TOTAL DUE - \$ _____

APPLICATIONS TO REPLACE AN EXISTING PERMITTED EXEMPT WELL - \$20 EACH TOTAL DUE - \$ 20.00

APPLICATIONS TO REPLACE AN EXISTING REGISTERED NON-EXEMPT WELL PERMIT - \$60 EACH TOTAL DUE - \$ _____

NON-EXEMPT CORRECTION OF LOCATION - \$60 EACH TOTAL DUE - \$ _____

EXEMPT CORRECTION OF LOCATION - \$20 EACH TOTAL DUE - \$ _____

MONITORING WELL APPLICATIONS - \$60 EACH TOTAL DUE - \$ _____

OTHER: _____

TOTAL FEE = \$ 20.00

Please make your check payable to the State Engineer and submit these documents with the required filing fee.

IF YOU HAVE QUESTIONS CONCERNING THIS MATTER, PLEASE CALL THE GROUND WATER INFORMATION DESK OF THIS OFFICE AT (303) 866-3587.

COLORADO DIVISION OF WATER RESOURCES
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203

RECEIVED
SEP 07 1979
Am. 9/11/79
WATER RESOURCES
STATE ENGINEER
COLO.

PERMIT APPLICATION FORM

RECEIVED
SEP 19 1979

Application must be complete where applicable. Type or print in BLACK INK. No overstrikes or erasures unless initialed.

- A PERMIT TO USE GROUND WATER
 - A PERMIT TO CONSTRUCT A WELL
 - FOR A PERMIT TO INSTALL A PUMP
 - REPLACEMENT FOR NO. NO EXISTING NUMBER
 - OTHER _____
- WATER COURT CASE NO. _____

(1) APPLICANT - mailing address

NAME WILLIAM G. BUCKHANAN

STREET P.O. BOX 601

CITY CRIPPLE CREEK CO. 80813
(State) (Zip)

TELEPHONE NO. _____

FOR OFFICE USE ONLY: DO NOT WRITE IN THIS COLUMN

Receipt No. 110945

Basin _____ Dist. _____

CONDITIONS OF APPROVAL

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) LOCATION OF PROPOSED WELL

County TELLER

SE 1/4 of the NW 1/4 Section 33

Twp. 14 S Rng. 69 W. 6TH P.M.
(N.S.) (W.)

APPROVED AS A REPLACEMENT OF WELL NO. 110748

THE EXISTING WELL MUST BE PLUGGED AND ABANDONED ACCORDING TO THE REVISED AND AMENDED RULES AND REGULATIONS FOR WATER WELL AND PUMP INSTALLATION CONTRACTORS. THE ENCLOSED AFFIDAVIT MUST BE SUBMITTED WITHIN SIXTY (60) DAYS AFTER THE CONSTRUCTION OF THE NEW WELL, AFFIRMING THAT WELL NO. 110748 WAS PLUGGED AND ABANDONED.

(3) WATER USE AND WELL DATA

Proposed maximum pumping rate (gpm) 15

Average annual amount of ground water to be appropriated (acre-feet): ONE

Number of acres to be irrigated: ONE

Proposed total depth (feet): 150'

Aquifer ground water is to be obtained from:
DECOMPOSED GRANITE

Owner's well designation DOMESTIC

EXPIRED
DATE Oct 2, 1981

GROUND WATER TO BE USED FOR:

HOUSEHOLD USE ONLY - no irrigation (0)

DOMESTIC (1) INDUSTRIAL (5)

LIVESTOCK (2) IRRIGATION (6)

COMMERCIAL (4) MUNICIPAL (8)

OTHER (9) _____

DETAIL THE USE ON BACK IN (11)

APPLICATION APPROVED

PERMIT NUMBER 110748-A

DATE ISSUED OCT 02 1979

EXPIRATION DATE OCT 02 1981

Bruce E. DeBriens
DEPUTY (STATE ENGINEER)

BY DeWayne R. Shonka

LD 2-12 COUNTY 60

(4) DRILLER

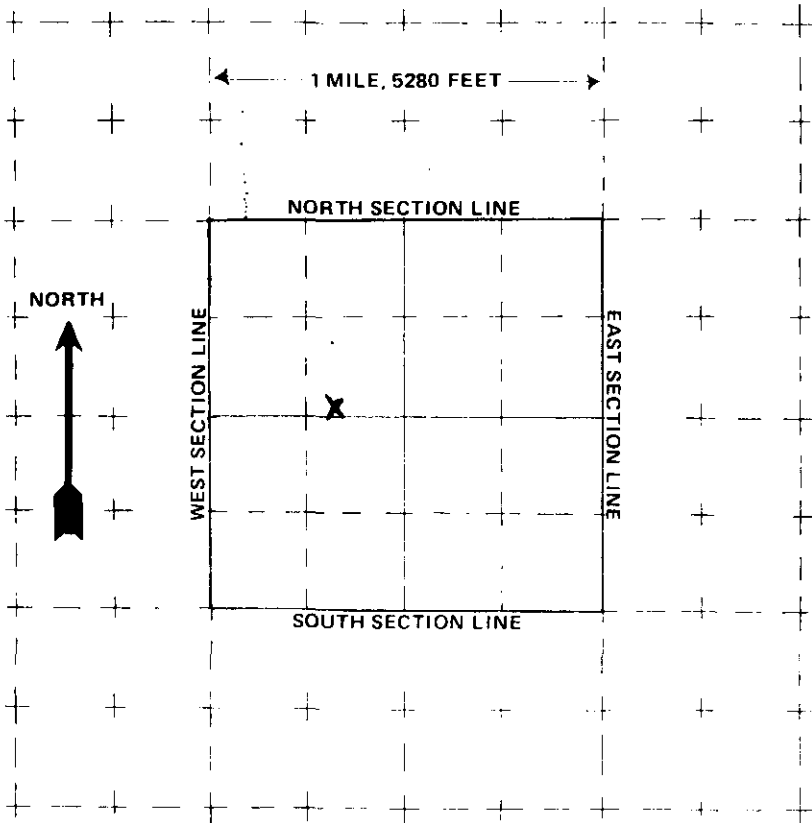
Name ALCRO DRILLING, INC.

Street BOX 211

City WOODLAND PARK, CO. 80863
(State) (Zip)

Telephone No. 687-2384 Lic. No. 996

(5) **THE LOCATION OF THE PROPOSED WELL**, and the area on which the water will be used must be indicated on the diagram below. Use the CENTER SECTION (1 section, 640 acres) for the well location.



The scale of the diagram is 2 inches = 1 mile
Each small square represents 40 acres.

WATER EQUIVALENTS TABLE (Rounded Figures)

An acre-foot covers 1 acre of land 1 foot deep
1 cubic foot per second (cfs) . . . 449 gallons per minute (gpm)
A family of 5 will require approximately 1 acre-foot of water per year.
1 acre-foot . . . 43,560 cubic feet . . . 325,900 gallons.
1,000 gpm pumped continuously for one day produces 4.42 acre-feet.

(6) **THE WELL MUST BE LOCATED BELOW** by distances from section lines.

2515 ft. from NORTH sec. line
(north or south)

1650 ft. from WEST sec. line
(east or west)

LOT _____ BLOCK _____ FILING # _____

SUBDIVISION NOT A SUBDIVISION

(7) **TRACT ON WHICH WELL WILL BE LOCATED** Owner: APPLICANT

No. of acres 10 Will this be the only well on this tract? YES

(8) **PROPOSED CASING PROGRAM**

Plain Casing

6 5/8 in. from 0 ft. to 20 ft.

4 in. from 10 ft. to 100 ft.
Perforated casing

4 in. from 100 ft. to 150 ft.
_____ in. from _____ ft. to _____ ft.

(9) **FOR REPLACEMENT WELLS** give distance and direction from old well and plans for plugging it:

65' g.w.
OLD WELL IS APPROX. 20' NORTH OF NEW WELL. OLD WELL WILL BE FILLED WITH SAND & GRAVEL & TOP 5' PLUGGED WITH CEMENT.

(10) **LAND ON WHICH GROUND WATER WILL BE USED:**

Owner(s): WILLIAM G. BUCKHANAN No. of acres: 10

Legal description: SE 1/4 OF THE NW 1/4 SEC. 33 TWP. 14S. RNG. 69W 6TH P.M.

(11) **DETAILED DESCRIPTION** of the use of ground water: Household use and domestic wells must indicate type of disposal system to be used. DOMESTIC USE COUNTY APPROVED SEPTIC SYSTEM & LEACH FIELD

(12) **OTHER WATER RIGHTS** used on this land, including wells. Give Registration and Water Court Case Numbers.

Type or right	Used for (purpose)	Description of land on which used
NA		

(13) **THE APPLICANT(S) STATE(S) THAT THE INFORMATION SET FORTH HEREON IS TRUE TO THE BEST OF HIS KNOWLEDGE.**

X William G. Buckhanan
SIGNATURE OF APPLICANT(S)

COLORADO DIVISION OF WATER RESOURCES
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203

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SEP 19 1979

WATER RESOURCES
STATE ENGINEER
COLO.

OWNER'S COPY

RECEIVED

SEP 19 1979

Application must be complete where applicable. Type or print in BLACK INK. No overstrikes or erasures unless initiated.

- (X) A PERMIT TO USE GROUND WATER
- (X) A PERMIT TO CONSTRUCT A WELL
- FOR: (X) A PERMIT TO INSTALL A PUMP
- (X) REPLACEMENT FOR NO. NO EXISTING NUMBER
- () OTHER _____
- WATER COURT CASE NO. _____

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NAME WILLIAM G. BUCKHANAN
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(State) (Zip)
 TELEPHONE NO. _____

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 Proposed total depth (feet): 150'
 Aquifer ground water is to be obtained from:
DECOMPOSED GRANITE
 Owner's well designation DOMESTIC

GROUND WATER TO BE USED FOR:

- () HOUSEHOLD USE ONLY - no irrigation (0)
- (X) DOMESTIC (1) () INDUSTRIAL (5)
- () LIVESTOCK (2) () IRRIGATION (6)
- () COMMERCIAL (4) () MUNICIPAL (8)
- () OTHER (9) _____

DETAIL THE USE ON BACK IN (11)

(4) DRILLER

Name ALCRO DRILLING, INC.
 Street BOX 211
 City WOODLAND PARK, CO. 80863
(State) (Zip)
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APPLICATION APPROVED

PERMIT NUMBER 110748-A

DATE ISSUED OCT 02 1979

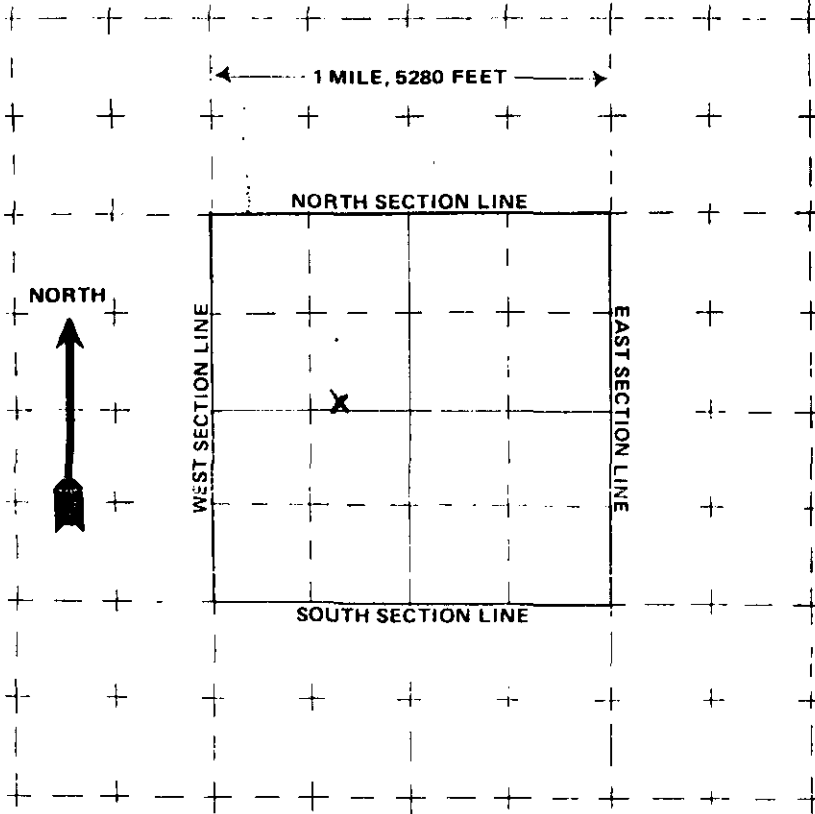
EXPIRATION DATE OCT 02 1981

Bruce E. DeBevoise
 DEPUTY (STATE ENGINEER)

BY *Lewayne R. Schwardt*

I.D. 2-12 COUNTY 60

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LOT _____ BLOCK _____ FILING # _____

SUBDIVISION NOT A SUBDIVISION

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Owner(s): WILLIAM G. BUCKHANAN No. of acres: 10

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Type or right	Used for (purpose)	Description of land on which used
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(13) THE APPLICANT(S) STATE(S) THAT THE INFORMATION SET FORTH HEREON IS TRUE TO THE BEST OF HIS KNOWLEDGE.

X William G. Buchanan
SIGNATURE OF APPLICANT(S)

April 14, 1996

RECEIVED

MAY 02 '96

WATER RESOURCES
STATE ENGINEER
COLO

Dear Sir:

Due to personal injury
of my wife Linda, we were
not in a position to drill
this well. My wife had
a serious accident during
the permit time and I was
unable to complete my plans
at that time. We are
re applying for the permit.

Thanks!

Bill Buckhavan