				Manager Carles Class of Article and Article Co.	Matarian a 17 km and	respective and the second
	PUMP INSTALLATI	ION AND PRODUCTION E	QUIPMENT TEST	REPORT	For Oil	ffice Use Only
Form No.	State of Colorado, Office of the State Engineer					4
GWS-32	1313 Sherman St., Room 821, Denver, CO 80203 303.866.3581					
10/2016	1/2016 dwr.colorado.gov and dwrpermitsonline@state.co.us					
1 Well Permit	Number: 15370 - R - 1	Receipt Num	ber: 1000 70	46	Į.	Art and a state of the state of
	Il Designation:		, , , , , , , , , , , , , , , , , , , ,		-	are charge
		WATTS		Dataman (* 2 16 6) is d istabled his min. a. se	1	red months to
	on Street Address:				1.	
	cation: Zone 12	ne 13 Fasting: 495977	7 i Northing: 42	'518'34'-5 Cou	ntv: FRE	70 AJ 7"
6 Legal Well I	ocation: NE 1/4, NW	1/4 Sec. '7 Two.	19.0 Nor	S C Range le	3 FIE	WX
	Section Lines:					
				, Block		
					-	
	llation Type: Initial Pu				the boundary of Albert William Property of the Con-	
8. Pump Data:	Type:		Date Installe	ed(mm/dd/yyyy):		
Pump Manufact	turer:		Pump Model	No		779
Design GPM:	at RPM	HP\	Volts	Full Load Ar	mps	
Pump Intake De	epth: Feet, Drop/G	Column Pipe Size Inches,	, Kind of	Drop Pipe		
	rmation for Pumps Greater	Than 50 GPM: Turbine Dr	iver Type: Elect	tric [_]Engine [_	_ Other	
Design Head: _	feet	Number of Stages:		· Shaft size:		ir cnes
9. Other Equip	ment:		***************************************		designation of restricts down in the set of	
Airline Installe	d: Yes No, Orifice	Depth ft	Monitor Tube Ins	talled: Yes	No, Depth	ft
Flow Meter Mfg	3.		Meter Seria	al No		The state of the s
Meter Readout	: []Gallons, []Thousand (Gallons, 🔲 Acre feet 🐃	Beginning Rea	ding:		in the second
10. Cistern Inf	formation: Material:	Capaci	ity: ga	illons Date Insta	lled:	
1	r Equipment Test Data:					eid Test Report.
· · · · · · · · · · · · · · · · · · ·	5 15t 1	te:				
Total Well Dep	th:ft. Tin					
	ft. Ra					
		mping Level (ft):				
12. Disinfection	n: Type:			Amt. Used:	MARKET MARKET PARTIES OF PERSONS AND ADDRESS OF THE PERSONS AND ADDRESS AND AD	
	n: Was Advanced Notifica	tion Required Prior to Ins	stallation? Ye	s No, Date No	tification G	dwen:
	ality analysis available:		lease submit wit			
de Domarke	WELL IS AN ART	GEIAN WEST THE			15 042	WING TE
15. Kelliai Ks.		UMP 15 NEEDE		o be dances		
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	02-2. The filing of a docum					
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	entry of the licensed contra	1			A WELLOW BELLEVILLE TO THE TOTAL OF	1
Company Name	3.	Email:	1	Phone w/area co		License Number:
		KEN WATTS 7	7 E. VAINOD, CON	719-344-	3544	
Mailing Address	s: 26 mINDEN C			Commence of the Party of the Pa	80906	1
		Print Name and Title		The state of the s	Date:	V. dia travele de de ser ser ser ser ser ser ser ser ser se
R - 95	name if filing online)	KENNETH WAT	· · · · · · · · · · · · · · · · · · ·	152		12021
formett ?	TIMEN	KENNZIN WAT	15 - OWN	6- 14	1 4. 4	(control of

kevinwatts@q.com

Fw: Well permit 15370-R-R

From: Megan Taunton < megant@canamericadrilling.com>

Mon, Nov 22, 2021 03:50 PM

Subject: Fw: Well permit 15370-R-R

To: kevinwatts@q.com, kenwatts77@yahoo.com

Cc: Lance Nelson < lance.nelson@canamericadrilling.com>

See the response from the State regarding compliance for the pump report.

From: douglas.stephenson@state.co.us <douglas.stephenson@state.co.us>

Sent: Monday, November 22, 2021 2:20 PM

To: Megan Taunton < megant@canamericadrilling.com>

Subject: Well permit 15370-R-R

Megan, You will need to submit the GWS-32 and leave the pump information blank, Put in the notes that the well is an artesian well and no pump is needed. Include the flow rate of the well.

Thanks, Doug