Form No. **GWS-31** 

## WELL CONSTRUCTION AND YIELD ESTIMATE REPORT

For Office Use Only

State of Colorado, Office of the State Engineer 1313 Sherman St., Room 821, Denver, CO 80203 303.866.3581 02/2017 www.water.state.co.us and dwrpermitsonline@state.co.us 1. Well Permit Number: 330508 Receipt Number: 10028069 2. Owner's Well Designation: 3. Well Owner Name: Removed for Advertising 4. Well Location Street Address: 11988 Andreson Ave, Franktown 80116 5. As Built GPS Well Location (required): Zone 12 Tone 13 Easting: 528899.0 Northing: 4350430 6. Legal Well Location: NE 1/4, NE 1/4, Sec., 4 Twp. 9 Nor S , Range 65 E or W , 6th P.M. County: Douglas Subdivision: \_ \_\_, Lot \_\_ \_, Block \_\_\_\_\_ ——, Filing (Unit) \_ 7. Ground Surface Elevation: feet Date Completed: 06/03/2024 Drilling Method: Air Rotary 8. Completed Aquifer Name: Upper Dawson Total Depth: 340 feet Depth Completed: 340 feet 9. Advance Notification: Was Notification Required Prior to Construction? Tyes No., Date Notification Given: Type I (One Confining Layer) Type I (Multiple Confining Layers) 10. Aguifer Type: Laramie-Fox Hills ■ Type II (Not overlain by Type III) Type II (Overlain by Type III) Type III (alluvial/colluvial) (Check one) 11. Geologic Log: 12. Hole Diameter (in.) From (ft) To (ft) Grain Size Color Water Loc. 43 Depth Type 0 Brown 43 340 0-6 6.12 Silt Sand 6-18 13. Plain Casing 18-34 Clay Gray To (ft) OD (in) Kind Wall Size (in) From (ft) 34-66 Sandstone 6 5/8 Steel .188 43 66-94 Clay Yellow **PVC** 220 94-117 Loam Yellow 4 1/2 .237 Sand 117-168 168-178 Clay Yellow Perforated Casing Screen Slot Size (in): \_\_.030 178-198 Sand To (ft) OD (in) Kind Wall Size (in) 198-213 Clay Yellow From (ft) **PVC** 4 1/2 .237 340 213-333 220 Sand 333-340 Clav Green 340 Bottom 14. Filter Pack: 15. Packer Placement: Sand Material Type Size 6-9 Interval 220'-340' Depth 16. Grouting Record Material **Amount** Density Interval Method Pos Disp Remarks: Cement 6 bags 36 gals 8'-43' 17. Disinfection: Type HTH Amt. Used .75 18. Well Yield Estimate Data: Check box if Test Data is submitted on Form Number GWS-39, Well Yield Test Report Well Yield Estimate Method: Air Test Estimated Yield (gpm) 225gpm@340 Static Level: 130' 06/03/2024 Estimate Length (hrs) 4 Date/Time measured: \_ Remarks: 19. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed (or name entered if filing online) and certified in accordance with Rule 17.4 of the Water Well Construction Rules, 2 CCR 402 2. The filing of a document that contains false statements is a violation of section 37 91 108(1)(e), C.R.S., and is punishable by fines up to \$1,000 and/or revocation of the contracting license. If filing online the State Engineer considers the entry of the licensed contractor's name to be compliance with Rule 17.4. Company Name: Email: Phone w/area code: License Number: ldtrehal71@gmail.com (303) 688-3012 1476 Hier Drilling Co. Mailing Address: PO Box 250 Castle Rock, Co. 80104 Sign (or enter name if filing online) Print Name and Title Date: Lake D. Trehal, Well Driller 06/05/2024