## For Office Use Only WELL CONSTRUCTION AND YIELD ESTIMATE REPORT Form No. State of Colorado, Office of the State Engineer **GWS-31** 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: 317813 Receipt Number: 10004062 2. Owner's Well Designation: 3. Well Owner Name: Vince & Christina Oddo 4. Well Location Street Address: 8684 Armadillo Trail Evergreen, CO 80439 5. As Built GPS Well Location (required): Zone 12 Tone 13 Easting: 473839 Northing: 4378754 6. Legal Well Location: NW 1/2, SE 1/4, Sec., 2 Twp. 6 N or S (1), Range 71 DE or W (1), 6 County: JEFFERSON Subdivision: EVERGREEN MEADOWS \_\_\_\_\_\_, Lot $\frac{32}{}$ , Block \_\_\_\_\_\_, Filing (Unit) $\frac{7}{}$ feet Date Completed: 10/20/2022 Drilling Method: Air Percussion 7. Ground Surface Elevation: 8239 8. Completed Aquifer Name: unnamed Type II Depth Completed: 500 Total Depth: 500 feet feet 9. Advance Notification: Was Notification Required Prior to Construction? Tyes No, Date Notification Given: n/a Laramie-Fox Hills Type I (One Confining Layer) Type I (Multiple Confining Layers) 10. Aquifer Type: Type II (Not overlain by Type III) Type II (Overlain by Type III) Type III (alluvial/colluvial) (Check one) 12. Hole Diameter (in.) 11. Geologic Log: From (ft) To (ft) Λ 40 Depth Grain Size Color Water Loc. Type 500 0-25 6.5 40 granite, decompose gravel pink,rose 25-325 granite, gtz bedrock grey, pink 1gpm: 170' 325-500 granite, gneiss, qtz gr/bl/pink 2gpm: 410' 13. Plain Casing To (ft) Wall Size (in) From (ft) OD (in) Kind 40 steel .188 +1 400 PVC. 20 4.5 Sch 40 420 460 480 500 Perforated Casing .032" Slot To (ft) OD (in) Kind Wall Size (in) From (ft) **PVC** Sch 40 400 420 4.5 480 460 14. Filter Pack: 15. Packer Placement: Material Type Size Interval Depth 16. Grouting Record Material Amount Density Interval Method Cement 7 bags 15# 10-40 pour Remarks: 17. Disinfection: Type hth Amt. Used 60 ppm Check box if Test Data is submitted on Form Number GWS-39, Well Yield Test Report 18. Well Yield Estimate Data: Well Yield Estimate Method: Air Lift Estimated Yield (gpm) 3 Static Level: 60' 10/21/2022, 10:15am Estimate Length (hrs) $\frac{4}{}$ 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. Per UCC 1-308: Phone w/area code: (303) 838-4558 Company Name: License Number: info@livingwatersystemsinc.com LIVING WATER Mailing Address: PO BOX 630 PINE, CO 80470 Sign (or enter name if filing online) Print Name and Title Date: GRANT HARRISON GOBLE Grant Harrison Goble, Authorized Individual 11/14/2022