

FORM NO. GWS-32 10/84		PUMP INSTALLATION AND TEST REPORT		For Office Use only 0451962	
		STATE OF COLORADO, OFFICE OF THE STATE ENGINEER		RECEIVED	
1. WELL PERMIT NUMBER		221603		AUG 17 2001 WATER RESOURCES STATE ENGINEER COLO.	
2. OWNER NAME(S)		AUTUMN DREAMERS			
Mailing Address		886 KUTSU RIDGE ROAD			
City, St. Zip		FLORISSANT, CO 80816			
Phone (719)		748-1250			
3. WELL LOCATION AS DRILLED:		NE 1/4 NE 1/4, Sec. 29 Twp. 12 SOUTH Range 70 WEST			
DISTANCES FROM SEC. LINES:		1200 ft. from NORTH Sec. line. and 400 ft. from EAST Sec. line.			
SUBDIVISION:		INDIAN CREEK LOT 43 BLOCK		FILING(UNIT) 13	
STREET ADDRESS AT WELL LOCATION:					
4. PUMP DATA: Type		SUBMERSIBLE		Installation Completed 06/27/01	
Pump Manufacturer		GOULDS		Pump Model No. 7GS07	
Design GPM		7 at RPM		HP 3/4 Volts 230 Full Load Amps 8.4	
Pump Intake Depth		288' Feet, Drop/Column Pipe Size 1" Inches, Kind SCH 80 PVC			
ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 50 GPM:					
TURBINE DRIVER TYPE: <input type="checkbox"/> Electric <input type="checkbox"/> Engine <input type="checkbox"/> Other					
Design Head feet, Number of Stages Shaft size inches.					
5. OTHER EQUIPMENT:					
Airline Installed <input type="checkbox"/> Yes <input type="checkbox"/> No, Orifice Depth ft. Monitor Tube Installed <input type="checkbox"/> Yes <input type="checkbox"/> No, Depth ft.					
Flow Meter Mfg. Meter Serial No.					
Meter Readout <input type="checkbox"/> Gallons, <input type="checkbox"/> Thousand Gallons, <input type="checkbox"/> Acre feet, <input type="checkbox"/> Beginning Reading					
6. TEST DATA: <input type="checkbox"/> Check box if Test data is submitted on Supplemental Form.					
Date 04/16/01					
Total Well Depth		320'		Time 2 HOURS	
Static Level		40'		Rate (GPM) 15+ GPM	
Date Measured		06/27/01		Pumping Lvl. 320'	
7. DISINFECTION: Type GRANULAR CHLORINE Amt. Used 100 PPM					
8. Water Quality analysis available. <input type="checkbox"/> Yes <input type="checkbox"/> 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		BLACK MOUNTAIN PUMP SERVICE, INC.		Phone (719) 687-7210	
Mailing Address		815 CANDLE LAKE DRIVE, DIVIDE, CO 80814		Lic. No. 1344	
Name/Title (Please type or print)		Signature		Date	
MICKEY L. BATES, OWNER/OPERATOR		Mickey L. Bates		08/15/01	