FORM NO. GWS-32 02/2005

PUMP INSTALLATION AND TEST REPORT

STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

1313 Sherman St., Room 818, Denver, CO 80203
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OCT 29 2009

WATER RESOURCES STATE ENGINEER COLO

1. **WELL PERMIT NUMBER:** 273107

2. **WELL OWNER INFORMATION**
NAME OF OWNER: George Pigg
MAILING ADDRESS: 5380 I25 S.
CITY: Pueblo STATE: Co. ZIP CODE: 81004
TELEPHONE #: (719) 676-7444

3. **WELL LOCATION AS DRILLED:** SW 1/4, SE 1/4 Sec. 3, Twp. 23 ☐ N or ☒ S, Range 66 ☐ E or ☒ W
DISTANCES FROM SEC. LINES: _____ ft. from ☐ N or ☐ S section line and _____ ft. from ☐ E or ☐ W section line.
SUBDIVISION: _____ LOT ____, BLOCK ____, FILING (UNIT) ____
Optional GPS Location: GPS Unit must use the following settings: Format must be **UTM**, Units must be **meters**, Datum must be **NAD83**, Unit must be set to true **N**, ☐ Zone 12 or ☐ Zone 13 Easting: _____ Northing: _____
STREET ADDRESS AT WELL LOCATION:

4. **PUMP DATA:** Type: Submersible Date Installed: 9-25-09
Pump Manufacturer: Pumps & more Pump Model No. 2P/M 10-10
Design GPM: 10 at RPM 3450 HP 1 Volts 230 Full Load Amps 9
Pump Intake Depth: 105 Feet, Drop/Column Pipe Size 1.25 Inches, Kind of Drop Pipe Pve Sch 120
ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 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.

Total Well Depth: 141 ft.	Date: 9-25-09			
Static Level: 40 ft.	Time: 12:00 PM			
Date Measured: 9-25-09	Rate (gpm): 10			
	Pumping Level (ft): 105			

7. **DISINFECTION:** Type Clorine Amt. Used 1 quart

8. Water Quality analysis available: ☐ Yes ☒ No If yes, please submit with this report.

9. Remarks: _____

10. I have read the statements made herein and know the contents thereof, and they are true to my knowledge. This document is signed 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 $5000 and/or revocation of the contracting license.]

Company Name	Phone	License Number
Daves Pump Service	719 589 2296	1424

Mailing Address: PO Box 3 Rye, Co. 81069

Signature	Print Name and Title	Date
D. Valentine	David Valentine / owner	10-27-09