

FORM NO. GWS-31 04/2005	WELL CONSTRUCTION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 818, Denver, CO 80203 Phone - Info (303) 866-3587 Main (303) 866-3581 Fax (303) 866-3589 http://www.water.state.co.us	RECEIVED JUL 06 2006 WATER RESOURCES STATE ENGINEER COLO.												
1. WELL PERMIT NUMBER: 64014-F														
2. WELL OWNER INFORMATION NAME OF WELL OWNER: RAPP, DR BARRY														
MAILING ADDRESS: 1305 LIBERTY POINT BLVD														
CITY: PUEBLO WEST STATE: CO ZIP CODE: 81007														
TELEPHONE NUMBER: (719) -														
3. WELL LOCATION AS DRILLED: NW1/4, NW1/4, Sec. 21 Twp. 23 ☐ N or X S, Range 71 ☐ E or X W DISTANCES FROM SEC. LINES: 1023 ft. from X N or ☐ S section line and 341 ft. from ☐ E or X W section line. SUBDIVISION: CUERNO VERDE PINES LOT 4 BLOCK 17 FILING (UNIT) 3 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 STREET ADDRESS AT WELL LOCATION: Northing:														
4. GROUND SURFACE ELEVATION feet DATE COMPLETED 6/13/06 TOTAL DEPTH 250 feet DEPTH COMPLETED 250 feet														
5. GEOLOGIC LOG:														
Depth	Type	Grain Size	Color	Water Loc.	6. HOLE DIAM (in.)	From (ft)	To (ft)							
0-1	TOP SOIL		BROWN		8 3/4	0	39							
1-10	GRANITE		BR/ORANG		6 1/8	39	250							
10-95	GRANITE		PINK		7. PLAIN CASING:									
95-115	GRANITE		PINK/GRAY		OD (in)	Kind	Wall Size (in)	From (ft)	To (ft)					
115-127	GRANITE		BR/GRAY		6 5/8	STEEL	.188	+1	39					
127-135	GRANITE		WHITE/GRA		4 1/2	PVC	.214	30	170					
135-170	GRANITE		GRAY/TAN		4 1/2	PVC	.214	190	210					
170-210	GRANITE		PINK/ORAN	190 - 200	4 1/2	PVC	.214	230	250					
210-215	GRANITE		GRAY		PERFORATED CASING: Screen Slot Size (in): .030									
215-230	GRANITE		RED		4 1/2	PVC	.214	170	190					
230-250	GRANITE		GRAY		4 1/2	PVC	.214	210	230					
					4 1/2	PVC	.214							
					4 1/2	PVC	.214							
8. FILTER PACK: Material Size Interval					9. PACKER PLACEMENT: Type Depth									
										10. GROUTING RECORD				
										Material	Amount	Density	Interval	Placement
Remarks:					CEMENT	6 BAGS	15.3	9-39	POURED					
11. DISINFECTION: Type CHLORINE BLEACH					Amt. Used 6 CUPS WATER INJECTION OVERNIGHT									
12. WELL TEST DATA: ☐ Check box if Test Data is submitted on Form Number GWS 39 Supplemental Well Test.														
TESTING METHOD AIR LIFT Static Level 100 ft. Date/Time measured: 6/13/06 2:00 PM Production Rate 10 gpm. Pumping Level 250 ft. Date/Time measured 6/13/06 4:00 PM Test Length (hrs) 2 Remarks:														
13. 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: YOUNG'S DRILLING & PUMP SERVICES					Phone: (719) 275-5482		License Number: 592							
Mailing Address: PO BOX 2123 CANON CITY, CO 81215														
Signature: <i>Robert Young</i>					Print Name and Title ROBERT YOUNG / OWNER			Date 7-5-06						