

200207912

**Colorado  
Oil & Gas Conservation Commission****Division of Water Resources Well Information**

<b>Receipt:</b> 0415957B	<b>Permit Rcvd:</b> 05/20/1997
<b>Well Name:</b>	
<b>Division:</b> 1	<b>County:</b> 62
<b>PermitNo:</b> 204246	<b>Permit Date:</b> 07/31/1997
<b>PermitRpl:</b> A	<b>PermitSuf:</b>
<b>ActCode:</b> NP	<b>WD:</b> 2
<b>Basin:</b> 00	<b>MD:</b> 00
<b>Name:</b> STANER DARREL & PAM	<b>Phone:</b> 3035364904
<b>Address:</b> 21000 HWY 52 BOX 653	
<b>City:</b> HUDSON, CO 80642	
<b>Meridian:</b> S	<b>Range:</b> 65 W
<b>Township:</b> 1 N	<b>Section:</b> 4
<b>S of Ute Line:</b>	<b>QTRQTR:</b> NESE
<b>CoordSNS:</b> 2625 S	<b>CoordSEW:</b> 850 E
<b>SubDiv:</b>	<b>Lot:</b>
<b>Block:</b>	<b>Filing:</b>
<b>Aquifer 1:</b> KLF	<b>Aquifer 2:</b>
<b>Elevation:</b>	<b>Depth:</b> 920
<b>Top Perf:</b> 680	<b>Bottom Perf:</b> 920
<b>Level:</b> 473	<b>Yield:</b> 12.0
<b>Case:</b>	<b>Irrigated Area:</b> acres
<b>Abdmt Req:</b> 0	<b>Acre Ft:</b>
<b>Use Codes:</b> 8 , 9	<b>Driller:</b> 827
<b>Pump Inst:</b> 715	<b>PI Date:</b> 08/24/1998
<b>Statute:</b>	<b>Statute Code:</b> AR
<b>Statute Date:</b> 07/22/1997	<b>Report Rcvd:</b> 06/06/1997
<b>Meter:</b> 0	<b>Related Well:</b>
<b>Well Suffix:</b>	<b>Repl Xref:</b>
<b>Well Const Rpt:</b>	<b>Beneficial Use:</b>
<b>Well Cmpl Date:</b> 06/06/1997	<b>Pump Inst Date:</b> 06/03/1998
<b>Logged:</b> 0	<b>Water Quality Data:</b> 0
<b>Proposed Depth:</b> 950	<b>Prop Yield:</b> 15.0
<b>Prop Yrly Appr:</b> 1.5	<b>Well Type:</b> E
<b>Valid Permit:</b> 0	<b>Prmt Exp Notice:</b>

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Information  
Permitno  
204246  
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Report a Problem

COLORADO DIVISION OF WATER RESOURCES  
DEPARTMENT OF NATURAL RESOURCES  
1313 SHERMAN ST., RM. 818, DENVER CO 80203  
phone - info: (303) 866-3587 main: (303) 866-3581

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JUL 22 1997

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MAY 20 1997

**RESIDENTIAL** (Note: You may also use this form to apply for livestock watering)  
Review instructions prior to completing form

**Water Well Permit Application**  
Must be completed in Black Ink or typed

<b>1. APPLICANT INFORMATION</b> Name of applicant <u>DARREL &amp; PAM STANER</u> Mailing Address <u>21000 Hwy 52 P.O. Box 653</u> City <u>Hudson, CO</u> State <u>80642</u> Telephone Number (Include area code) <u>303-536-4904</u>		<b>6. USE OF WELL</b> (check appropriate entry or entries) See instructions to determine use(s) for which you may qualify - <input type="checkbox"/> A. Ordinary household use in one single-family dwelling (NO outside use) <input checked="" type="checkbox"/> B. Ordinary household use in 1 to 3 single-family dwellings: Number of dwellings: <u>1</u> <input checked="" type="checkbox"/> Home garden/lawn irrigation, not to exceed 1 acre: area irrigated <u>2500</u> sq. ft. <input type="checkbox"/> acre <input checked="" type="checkbox"/> C. Livestock watering (on farm/ranch/range/pasture) Domestic animal watering - (non-commercial)	
<b>2. TYPE OF APPLICATION</b> (check applicable box(es)) <input type="checkbox"/> Construct new well <input type="checkbox"/> Use existing well <input checked="" type="checkbox"/> Replace existing well <input type="checkbox"/> Change / Increase Use <input type="checkbox"/> Change (source) aquifer <input type="checkbox"/> Reapplication/supplied permits <input type="checkbox"/> Other:		<b>7. WELL DATA</b> Maximum pumping rate <u>15</u> gpm Annual amount to be withdrawn <u>1.5</u> acre-feet Total depth <u>950</u> feet Depth <u>Foxhill Sands</u>	
<b>3. REFER TO (if applicable)</b> Water count meter # _____ Permit # _____ Vertical # <u>97-VE-163</u> Monitoring hole acknowledgment # <u>MH-</u> Well name or # _____		<b>8. TYPE OF RESIDENTIAL SEWAGE SYSTEM</b> <input checked="" type="checkbox"/> Septic tank / absorption leach field <input type="checkbox"/> Central system District name: _____ <input type="checkbox"/> Vault Location sewage to be hauled to: _____ <input type="checkbox"/> Other (attach copy of engineering design)	
<b>4. LOCATION OF WELL</b> County <u>WEID</u> Quarter/Quarter <u>NE 1/4</u> Section <u>SE 1/4</u> Section <u>4</u> Township N or S <u>1</u> Range E or W <u>65</u> Principal Meridian <u>6</u> Distance of well from section lines <u>2625</u> ft. from <u>N</u> <u>850</u> ft. from <u>E</u> <u>W</u> Well location address, if different from applicant address (if applicable): For replacement wells only - distance and direction from old well to new well: <u>25</u> feet <u>N</u> direction		<b>9. PROPOSED WELL DRILLER (optional)</b> Name <u>Lloyd John</u> License number <u>827</u>	
<b>5. TRACT ON WHICH WELL WILL BE LOCATED</b> A. You must check one of the following - see instructions <input type="checkbox"/> Subdivision: Name _____ Lot no. _____ Block no. _____ Filing/Unit _____ <input type="checkbox"/> County exemption (attach copy of county approval & survey) Name/no. _____ Tract no. _____ <input type="checkbox"/> Mining claim (attach copy of deed or survey) Name/no. _____ <input type="checkbox"/> Other (attach legal description to application) <u>SEE ATT Legal</u>		<b>10. SIGNATURE of applicant(s) or authorized agent</b> The making of false statements herein constitutes perjury in the second degree, which is punishable as a class 1 misdemeanor pursuant to C.R.S. 24-4-104(1)(a). I have read the statements herein, know the contents thereof and state that they are true to my knowledge. Signature <u>Darrel A. Staner</u> Title <u>Owner</u> Date <u>5-19-97</u>	
<b>B. STATE PARCEL</b> ID# (optional) _____ C. # acres in tract <u>20.0</u> D. Are you the owner of this property? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if no - see instructions) E. Will this be the only well on this tract? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (if other wells are on this tract see instructions)		<b>OPTIONAL INFORMATION</b> USGS map name _____ DWR map no. _____ Surface elev. _____ Office Use Only USE EXISTING WELL/SAME SOURCE DIV <u>1</u> CO <u>62</u> WD <u>02</u> BA _____ CHECKS TRN415957 052097 DIV OF WATER RESOURCES USE MD	

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Form GWS-44 (11/95)

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FORM NO. GWS-31 12-94		WELL CONSTRUCTION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER		For Office Use only	
1. WELL PERMIT NUMBER		204246-A		RECEIVED JUN 06 1997 STATE ENGINEER C.O.D.	
2. OWNER NAME(S)		Darrel Staner			
Mailing Address		P.O. Box 653			
City, St. Zip		Hudson, Co. 80642			
Phone ( )		536-4904			
3. WELL LOCATION AS DRILLED:		NE 1/4 SE 1/4, Sec. 4 Twp. N, Range 65 W			
DISTANCES FROM SEC. LINES:		2625 ft. from S Sec. line. and 850 ft. from E Sec. line. OR			
SUBDIVISION:		LOT BLOCK FILING(UNIT)			
STREET ADDRESS AT WELL LOCATION:		2400 Highway 52			
4. GROUND SURFACE ELEVATION		ft. DRILLING METHOD Rotary			
DATE COMPLETED		5-22-97 TOTAL DEPTH 920 ft. DEPTH COMPLETED 920 ft.			
5. GEOLOGIC LOG:		6. HOLE DIAM. (in.) From (ft) To (ft)			
Depth	Description of Material (Type, Size, Color, Water Location)	8 3/4	0	37	
0-29	Brown sand	6 1/4	37	920	
29-70	Brown sandy clay				
70-250	Blue shale				
250-360	Blue shale/thin layers of sand				
360-590	Blue shale/layers of coal				
590-650	Blue shale				
650-920	Pox Mill sands Water				
		7. PLAIN CASING			
		OD (in) Kind Wall Size From (ft) To (ft)			
		6 5/8 Steel .188 .188 37 680			
		4 1/2 Steel .188 .188 37 680			
		PERF. CASING: Screen Slot Size: 3/16" torch cuts			
		4 1/2 Steel .188 .188 680 920			
		8. FILTER PACK:			
		Material N/A			
		Size placed at			
		Interval Depth 680'			
		9. PACKER PLACEMENT:			
		Type cementing basket			
		Depth 680'			
		10. GROUTING RECORD:			
		Material Amount Density Interval Placement			
		cement 450gal 7 gal/bag 0-680 Pump			
		6lb bags			
REMARKS: 5% Bentonite, 2% calcium chloride added to cement					
Owner to plug old well					
11. DISINFECTION: Type Granular Chlorine Amt. Used 3 cup dissolved in 5 gallons of water					
12. WELL TEST DATA:		poured through drill pipe, and agitated through zone with air			
TESTING METHOD Air		Check box if Test Data is submitted on Form No. GWS 39 Supplemental Well Test.			
Static Level 475 ft. Date/Time measured 5-22-97 3:00pm		Production Rate 20 gpm.			
Pumping level Jetting ft. Date/Time measured		Test length (hrs.) 2:0hrs			
Remarks at 920'					
13. 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 John's Drilling Inc.		Phone (803) 423-5246		Lic. No. 827	
Mailing Address 8000 Indiana Street		Arvada, CO. 80007			
Name/Title (Please type or print)		Signature		Date	
Lloyd John Owner/President		[Signature]		6-6-97	

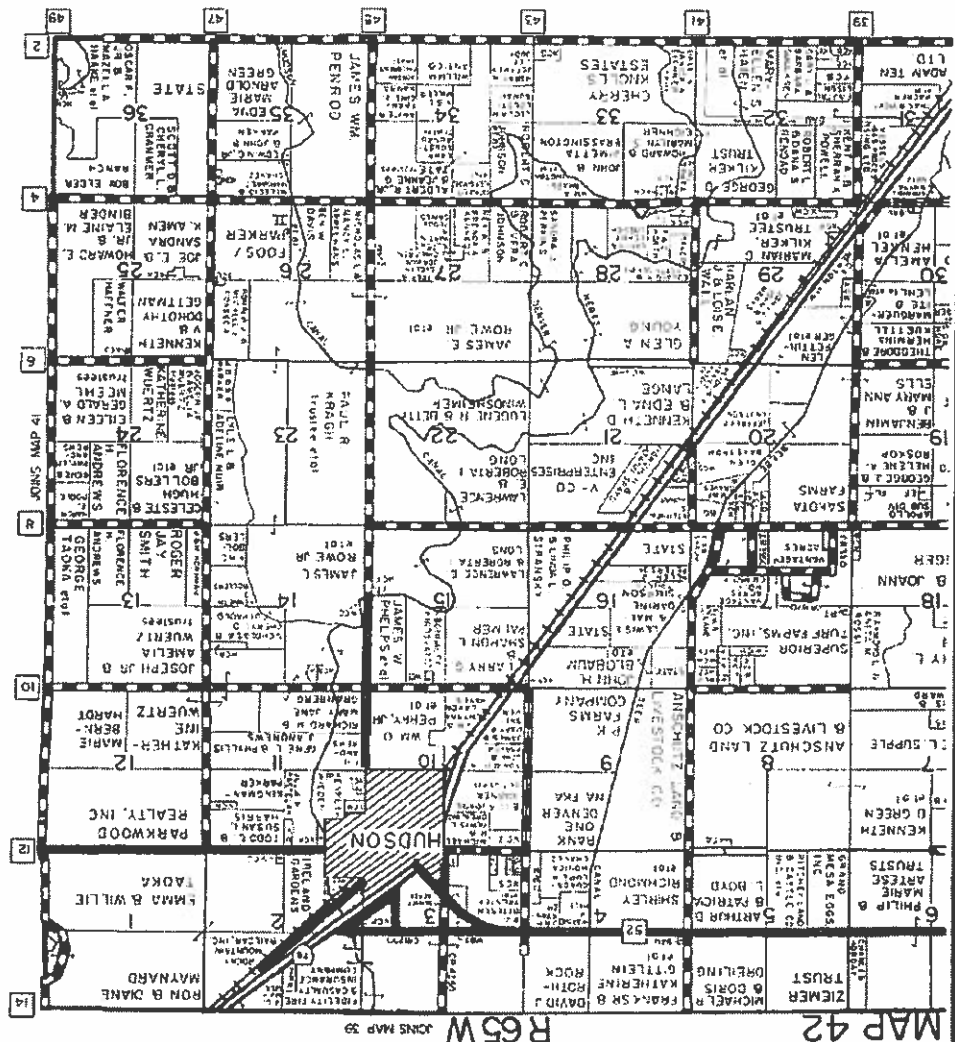
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