

WELL PERMIT NUMBER 75033-F

RECEIPT NUMBER 9304761

08-22-2024	CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO KRISTY L. LUCAS
08-22-2024	CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO MICHAEL E. LUCAS
09-26-2017	CHANGE IN OWNER NAME/MAILING ADDRESS

FORM NO.
GWS-32
05/2011

PUMP INSTALLATION AND TEST REPORT
STATE OF COLORADO, OFFICE OF THE STATE ENGINEER
1313 Sherman St., Room 821, Denver, CO 80203
Main (303) 866-3581 Fax (303) 866-3589

For Office Use Only

RECEIVED

AUG 26 2011

WATER RESOURCES
STATE ENGINEER
COLO.

1. WELL PERMIT NUMBER: 75033 - F

2. WELL OWNER INFORMATION
NAME OF OWNER: RAY H. GODFREY
EDITH M ARMSTRONG

MAILING ADDRESS: P.O. BOX 725

CITY: GERRARDSTOWN STATE: WV ZIP CODE: 25420

TELEPHONE # () - () - ()

3. WELL LOCATION AS DRILLED: NW 1/4, SE 1/4 Sec. 28, Twp. 29 N or S, Range 70 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 Easting: 0480220 must be **meters**, Datum must be **NAD83**, Unit must be set to **true N**, Zone 12 or Zone 13 Northing: 4150031

STREET ADDRESS AT WELL LOCATION: _____

4. PUMP DATA: Type: SUBMERSIBLE Date Installed: 23 AUG 11

Pump Manufacturer: Goulds Pump Model No. 10LS05422

Design GPM: 10 at RPM 3450 HP 1/2 Volts 230 Full Load Amps 3.7

Pump Intake Depth: 80 Feet, Drop/Column Pipe Size 1 inches, Kind of Drop Pipe SCH 80 PVC

ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 50 GPM: Turbine Driver Type: Electric Engine Other _____

Design Head	feet	Number of Stages	Shaft size	inches
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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.

Date:	<u>23 AUG 11</u>	<u>23 AUG 11</u>	_____	_____
Total Well Depth:	<u>133</u> ft.	Time:	<u>1200</u>	<u>1300</u>
Static Level:	<u>32</u> ft.	Rate (gpm):	<u>12</u>	<u>12</u>
Date Measured:	<u>23 AUG 11</u>	Pumping Level (ft):	<u>32</u>	<u>41</u>

7. DISINFECTION: Type HTH Amt. Used 10 02

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: DALBY PUMP SERVICE, LLC Phone: (817) 754-3260 License Number: 1342

Mailing Address: P.O. BOX 460 CENTER, CO 81125

Signature: [Signature] Print Name and Title: KENNETH A. DALBY / INSPECTOR Date: 24 AUG 11