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MAR 14 2014

WATER RIGHTS  
STATE ENGINEER

1. WELL PERMIT NUMBER: 2512 - A

2. WELL OWNER INFORMATION

NAME OF WELL OWNER: JOHNNIE & PATRICIA ZWEYGARDT

MAILING ADDRESS: 158 VISTA DRIVE

CITY: WESTCLIFFE STATE: CO ZIP CODE: 81252

TELEPHONE NUMBER w/area code: 719-275-9525

3. WELL LOCATION AS DRILLED: SW 1/4, NW 1/4, Sec., 29 Twp 21 N or S, Range 72 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) \_\_\_\_\_  
Owner's Well Designation: \_\_\_\_\_  
Easting: 459566

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

Northing: 4227950

STREET ADDRESS AT WELL LOCATION: \_\_\_\_\_

4. GROUND SURFACE ELEVATION \_\_\_\_\_ feet DRILLING METHOD AIR PERCUSSION  
DATE COMPLETED 12/10/13 TOTAL DEPTH 200 feet DEPTH COMPLETED 200 feet

5. GEOLOGIC LOG:

Depth	Type	Grain Size	Color	Water Loc.
0-5	TOP SOIL		BROWN	
6-50	DECOMP GRANITE		PINK	
50-200	GRANITE		PINK/BLACK	SS

6. HOLE DIAM (in.)

	From (ft)	To (ft)
8 5/8	0	39
6	39	200

7. PLAIN CASING:

OD (in)	Kind	Wall Size (in)	From (ft)	To (ft)
6 5/8	IRON	.188	+1	39
4 1/2	PVC 20C		20	120

PERFORATED CASING: Screen Slot Size (in):

4 1/2	PVC 20C	120	200
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8. FILTER PACK:

Material	Size	Interval
_____	_____	_____

9. PACKER PLACEMENT:

Type	Depth
_____	_____

10. GROUTING RECORD

Material	Amount	Density	Interval	Placement
CEMENT	6 BAGS	6:1	0-39	POURED VIBRATED

11. DISINFECTION: Type LIQUID CLOROX Amt. Used 7.25 CUPS

12. WELL TEST DATA:  Check box if Test Data is submitted on Form Number GWS 39 Supplemental Well Test.  
TESTING METHOD AIR PERCUSSION  
Static Level 110 ft. Date/Time measured: 12/11/13 Production Rate 3 gpm.  
Pumping Level \_\_\_\_\_ ft. Date/Time measured \_\_\_\_\_ Test Length (hrs) \_\_\_\_\_

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 (or name entered if filing online) 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. If filing online the State Engineer considers entering of licensed contractor name to be compliance with Rule 17.4

Company Name: FINNEY DRILLING & EXCAVATING, INC Phone w/area code: 719-275-9525 License Number: 1358

Mailing Address: 1124 EAGLES NEST CT., CANON CITY, CO 81212

Sign (or enter name if filing online) \_\_\_\_\_ Print Name and Title \_\_\_\_\_ Date \_\_\_\_\_