

Form No.
GWS-25

OFFICE OF THE STATE ENGINEER
COLORADO DIVISION OF WATER RESOURCES
818 Centennial Bldg., 1313 Sherman St., Denver, Colorado 80203
(303) 866-3581

1123

APPLICANT

WELL PERMIT NUMBER 221603
DIV. 1 WD 23 DES. BASIN MD

Lot: 43 Block: Filing: 13 Subdiv: INDIAN CREEK

JANE LOCKWOOD
1019 MARKET ST
CO SPRNGS, CO 80904-

(719) 575-9200

APPROVED WELL LOCATION

TELLER COUNTY
NE 1/4 NE 1/4 Section 29
Township 12 S Range 70 W Sixth P.M.

DISTANCES FROM SECTION LINES

1200 Ft. from North Section Line
400 Ft. from East Section Line

PERMIT TO CONSTRUCT A WELL

ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT
CONDITIONS OF APPROVAL

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of this permit does not assure the applicant that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-92-602(3)(b)(II)(A) as the only well on a residential site of 4.31 acre(s) described as lot 43, filing 13, Indian Creek Subdivision, Teller County.
- 4) The use of ground water from this well is limited to ordinary household purposes inside one single family dwelling. The ground water shall not be used for irrigation or other purposes.
- 5) The maximum pumping rate of this well shall not exceed 15 GPM.
- 6) The return flow from the use of this well must be through an individual waste water disposal system of the non-evaporative type where the water is returned to the same stream system in which the well is located.
- 7) This well shall be constructed not more than 200 feet from the location specified on this permit. *10/29/99*

APPROVED
JSG

Hal D. Simpson
State Engineer

[Signature]
By

Receipt No. 0451962

DATE ISSUED **OCT 29 1999**

EXPIRATION DATE **OCT 29 2001**

RECEIVED

OCT 08 1999

WATER RESOURCES
STATE ENGINEER
COLO

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

NEW HOUSEHOLD USE ONLY

Water Well Permit Application

Review instructions prior to completing form

Must be completed in black ink or typed

1. APPLICANT INFORMATION				6. USE OF WELL			
Name of applicant <i>Jane Lockwood</i>				ORDINARY HOUSEHOLD PURPOSES INSIDE ONE SINGLE FAMILY DWELLING (NO OUTSIDE USE)			
Mailing Address <i>1019 Market Street</i>							
City <i>Colorado Springs Colo.</i>		State <i>CO</i>					
Telephone Number (include area code) <i>719-575-9200</i>				7. WELL DATA			
2. TYPE OF APPLICATION				MAXIMUM PRODUCTION RATE OF THE WELL WILL NOT EXCEED 15 GPM			
CONSTRUCT A NEW HOUSEHOLD USE ONLY WELL ON LESS THAN 35 ACRES				8. TYPE OF RESIDENTIAL SEWAGE SYSTEM			
3. REFER TO (if applicable):				<input checked="" type="checkbox"/> Septic tank / absorption leach field			
Monitoring hole acknowledgment # MH- <i>N/A</i>				<input type="checkbox"/> Central system			
4. LOCATION OF WELL				District name: _____			
County <i>Teller</i>		Quarter/quarter <i>NE 1/4</i>		Quarter <i>NE 1/4</i>		<input type="checkbox"/> Vault	
Section <i>29</i>		Township N or S <i>12</i>		Range E or W <i>70</i>		Location sewage to be hauled to: _____	
Principal Meridian <i>64h</i>		Distance of well from section lines <i>1200</i> ft. from <input checked="" type="checkbox"/> N <input type="checkbox"/> S <i>400</i> ft. from <input checked="" type="checkbox"/> E <input type="checkbox"/> W		9. PROPOSED WELL DRILLER (optional)		<input type="checkbox"/> Other (attach copy of engineering design)	
Well location address, if different from applicant address (if applicable) <i>40 Black Hawk Creek</i>				Name <i>Y. Woods Drilling Inc</i>		License number <i>1123</i>	
5. TRACT ON WHICH WELL WILL BE LOCATED				10. SIGNATURE of applicant(s) or authorized agent			
A. You must check one of the following - see instructions				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(13)(a). I have read the statements herein, know the contents thereof and state that they are true to my knowledge.			
<input checked="" type="checkbox"/> Subdivision: Name <i>Indian Creek</i>				Must be original signature <i>Jane Lockwood</i>			
Lot # <i>43</i> Block # _____ Filing/Unit # <i>13</i>				Title <i>Owner</i>		Date <i>10-6-99</i>	
<input type="checkbox"/> County Exemption (copy of county approval & survey must be attached)				Office Use Only <i>AL</i>		DWR Map No.	
Exempt. name/# _____ Tract # _____				<i>PresBSS</i>		<i>60.00</i>	
<input type="checkbox"/> Mining claim (attach copy of deed or survey)				<i>(Huo)</i>		CO <i>60</i>	
Claim name/# _____				CHECKS TRN451962 1000000 DIV		WD <i>23</i>	
<input type="checkbox"/> Other (attach legal description to application)				DIV OF WATER RESOURCES		BA _____	
B. STATE PARCEL				USE		MD _____	
ID# (optional): <i>N/A</i>							
C. # of acres in tract <i>4.31</i>							
D.							
THIS WILL BE THE ONLY WELL ON THIS TRACT							

HOUSEHOLD USE ONLY - GENERAL INSTRUCTIONS

There are a variety of uses for ground water in Colorado. This form (GWS-49) is to be used when applying for a permit for a NEW well that would be USED FOR ORDINARY HOUSEHOLD USE IN ONE SINGLE-FAMILY DWELLING. This type of well CANNOT be used for outside uses such as the watering of domestic animals and the watering of home gardens and lawns.

This form should not be used in the following cases:

REPLACEMENT of an existing well - Use form GWS-44

~~If OUTSIDE use is proposed-- Use form GWS-44~~

FEES The application must be submitted with the required \$60 non-refundable filing fee. Checks should be payable to the COLORADO DIVISION OF WATER RESOURCES.

Applications are evaluated in chronological order. Please allow approximately six weeks for processing.

APPLICATIONS must be completed clearly, and legibly, in BLACK INK or typed. ALL ITEMS in the application must be completed. Incomplete applications may be returned to the applicant for more information. Do not change or alter this application in any way.

THE LOCATION of the well in item 4 must be correctly and accurately described. The county, quarter/quarter, section, township, range, principal meridian, and distance from section lines must be provided.

NOTE: Distances are not necessarily the same distances as the distances from (your) property lines.

For additional assistance in describing the location of your well review the publication entitled "How to Determine Well Locations" which was provided with your packet, or can be requested from any Colorado Division of Water Resource office.

A LEGAL DESCRIPTION of your lot or parcel of land is required in item 5. If your lot is not in a recorded subdivision, attach a copy of a deed or legal description that shows your tract was split from a larger tract prior to June 1, 1972.

An ORIGINAL signature must be on each application. The applicant's authorized agent may sign the application, if a letter signed by the applicant is submitted with the application authorizing them to act as agent for the purpose of obtaining a well permit.

IF YOU HAVE ANY QUESTIONS regarding any item on the application form, please call the Division of Water Resources Ground Water Information Desk (303-866-3587), or the nearest Division of Water Resources Field Office located in Greeley (970-352-8712), Pueblo (719-542-3368), Alamosa (719-589-6683), Montrose (970-249-6622), Glenwood Springs (970-945-5665), Steamboat Springs (970-879-0272), or Durango (970-247-1845).

DETAILED INSTRUCTIONS ARE AVAILABLE UPON REQUEST

FORM NO. CWS-31 01/93

WELL CONSTRUCTION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use only RECEIVED 0457962

MAY 07 2001

WATER RESOURCES STATE ENGINEER COLO.

1. WELL PERMIT NUMBER 221603

2. OWNER NAME(S) JANE LOCKWOOD Mailing Address T019 MARKET STREET City, St. Zip COLORADO SPRINGS, CO 80904 Phone (719) 575-9200

3. WELL LOCATION AS DRILLED: NE 1/4 NE 1/4, Sec. 29 Twp. 12 SOUTH, Range 70 WEST DISTANCES FROM SEC. LINES: 1200 ft. from NORTH Sec. line. and 400 ft. from EAST Sec. line. OR SUBDIVISION: INDIAN CREEK LOT 43 BLOCK FILING(UNIT) 13 STREET ADDRESS AT WELL LOCATION:

4. GROUND SURFACE ELEVATION ft. DRILLING METHOD Air Percussion DATE COMPLETED 4/18/01 TOTAL DEPTH 320 ft. DEPTH COMPLETED 320 ft.

5. GEOLOGIC LOG: Depth Description of Material (Type, Size, Color, Water Location) 0 - 320 GRANITE, PINK, TAN, GREY LAYERS

Table with 3 columns: HOLE DIAM. (in.), From (ft), To (ft). Rows: 8 5/8, 0, 40; 6 1/8, 40, 320

Table with 5 columns: OD (in), Kind, Well Size, From(ft), To(ft). Rows: 6 5/8, Steel, .188, +1, 41; 4, PVC, CLS200, 10, 260; 4, PVC, CLS200, 300, 320. Includes PERF. CASING: Screen Slot Size: .035, 4, PVC, CLS200, 260, 300

8. FILTER PACK: Material N/A Size Interval

9. PACKER PLACEMENT: Type N/A Depth

Table with 5 columns: Material, Amount, Density, Interval, Placement. Row: Portland, 5 sack, 15#pg, 9-41, pour/vibrate

REMARKS:

11. DISINFECTION: Type Granular Chlorine Amt. Used 100 ppm

12. WELL TEST DATA: TESTING METHOD Air lift Static Level 130 ft. Date/Time measured 4/18/01 Production Rate 15+ gpm. Pumping level 320 ft. Date/Time measured 4/18/01 Test length (hrs.) 2

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 Black Mountain Drilling Phone (719) 687-5708 Lic. No. 1281 Mailing Address P. O. Box 844, Divide, CO 80814

Name/Title (Please type or print) David D. Wiley, Contractor Signature Date 4/30/01

FORM NO.
GWS-32
10/84

PUMP INSTALLATION AND TEST REPORT
STATE OF COLORADO, OFFICE OF THE STATE ENGINEER

For Office Use only 0451962
RECEIVED

AUG 17 2001

WATER RESOURCES
STATE ENGINEER
COLO.

1. WELL PERMIT NUMBER 221603

2. OWNER NAME(S) AUTUMN DREAMERS
Mailing Address 886 KUTSU RIDGE ROAD
City, St. Zip FLORISSANT, CO 80816
Phone (719) 748-1250

3. WELL LOCATION AS DRILLED: NE 1/4 NE 1/4, Sec. 29 Twp. 12 SOUTH, Range 70 WEST
DISTANCES FROM SEC. LINES:
1200 ft. from NORTH Sec. line. and 400 ft. from EAST Sec. line.
(north or south) (east or west)
SUBDIVISION: INDIAN CREEK LOT 43 BLOCK _____ FILING(UNIT) 13
STREET ADDRESS AT WELL LOCATION: _____

4. PUMP DATA: Type SUBMERSIBLE Installation Completed 06/27/01
Pump Manufacturer GOULDS Pump Model No. 7GS07
Design GPM 7 at RPM _____, HP 3/4, Volts 230, Full Load Amps 8.4
Pump Intake Depth 288' Feet, Drop/Column Pipe Size 1" Inches, Kind SCH 80 PVC

ADDITIONAL INFORMATION FOR PUMPS GREATER THAT 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.
Date 04/16/01
Total Well Depth 320' Time 2 HOURS
Static Level 40' Rate (GPM) 15+ GPM
Date Measured 06/27/01 Pumping Lvl. 320'

7. DISINFECTION: Type GRANULAR CHLORINE Amt. Used 100 PPM

8. Water Quality analysis available. Yes No

9. Remarks _____

10. 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 BLACK MOUNTAIN PUMP SERVICE, INC. Phone (719) 687-7210 Lic. No. 1344
Mailing Address 815 CANDLE LAKE DRIVE, DIVIDE, CO 80814

Name/Title (Please type or print) <u>MICKEY L. BATES, OWNER/OPERATOR</u>	Signature <u>Mickey L. Bates</u>	Date <u>08/15/01</u>
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ORIGINAL PERMIT APPLICANT(S)

JANE LOCKWOOD

APPROVED WELL LOCATION

Water Division: 1 Water District: 23
 Designated Basin: N/A
 Management District: N/A
 County: TELLER
 Parcel Name: INDIAN CREEK
 Lot: 43 Block: Filing: 13
 Physical Address: 40 BLACKHAWK CREEK DRIVE
 FLORISSANT, CO 80816
 NE 1/4 NE 1/4 Section 29 Township 12.0 S Range 70.0 W Sixth P.M.

UTM COORDINATES (Meters, Zone: 13, NAD83)

Easting: 479642.2 Northing: 4314916.2

ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT

CONDITIONS OF APPROVAL

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- 7) This well shall be constructed not more than 200 feet from the location specified on this permit.

See Original Permit

Date Issued: 10/29/1999

Issued By _____

Expiration Date: 10/29/2001

PERMIT HISTORY

12-31-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO ERIKA D VIDA
 12-31-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO CHARLES E OMDAHL
 06-15-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO BRIAN TISDALL
 06-15-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO MARIEGRACE TISDALL