

STATE OF WYOMING
OFFICE OF THE STATE ENGINEER
HERSCHLER BLDG., 4-E
CHEYENNE, WYOMING 82002
(307) 777-6163

SCANNED SEP 05 2014

SCANNED AUG 01 2007

STATEMENT OF COMPLETION AND DESCRIPTION OF WELL OR SPRING

NOTE: Do not fold this form. Use typewriter or print neatly with black ink.

162148

PERMIT NO. U.W. _____ NAME OF WELL (SPRING) DELANCEY 04-01

1. NAME OF OWNER CINDY AND DAVE DELANCEY

2. ADDRESS 1191 Granite Springs Rd

Please check if address has changed from that shown on permit. ☐

City Cheyenne State WY Zip Code 82009 Phone No. 307-760-4942

3. USE OF WATER ☒ Domestic ☒ Stock Watering ☐ Irrigation ☐ Municipal ☐ Industrial ☐ Miscellaneous
☐ Monitor or Test ☐ Coal Bed Methane Explain proposed use (Example: One single family dwelling) _____

4. LOCATION OF WELL (SPRING): SW 1/4 NE 1/4 of Section 21, T. 14 N., R. 70 W., of the 6th P.M. (or W.R.M.)
Subdivision Name Mountain Meadows Lot 76 Block per plat

If surveyed, bearing, distance and reference point: _____

Longitude (degrees, minutes, seconds) _____ Latitude (degrees, minutes, seconds) _____

Datum: ☐ 1927 ☐ 1983 Source: ☐ GPS ☐ Map ☐ Survey

5. TYPE OF CONSTRUCTION: DRILLED ☒ AIR PERCUSSION Dug ☐ Driven ☐ Other ☐
(type of rig, and fluid used if any)

Describe: _____

6. CONSTRUCTION: Total Depth of Well/Spring 600 ft.

Depth to Static Water Level 87 ft. (Below land surface) Casing Height above ground (ft.) 1 ft

a. Diameter of borehole (Bit size) 6.25 inches.

b Casing Schedule: New ☒ Used ☐ Joint type: ☐ threaded ☒ glued ☒ welded
6.625 diameter from 0 ft. to 20 ft. Material Steel Gage .188
4.50 diameter from 10 ft. to 600 ft. Material PVC Gage .237

c. Grouted interval, from 0 ft. to 20 ft.
Amount of grout used: 6BGS type: I II Portland
(example: 10 sacks) (example: bentonite pellets)

d. Type of completion: ☒ factory screen ☐ open hole ☐ customized perforations

Perforation: Type of perforator used Mill Slot

Size of perforations .030 inches by 1 inches.

Number of perforations and depths where perforated:

60 ft perforations from 540 ft. to 600 ft.

_____ perforations from _____ ft. to _____ ft.

Open hole from _____ ft. to _____ ft.

Well screen details:

Diameter 4.50 slot size: .030 set from 540 ft. to 600 ft.

Diameter _____ slot size: _____ set from _____ ft. to _____ ft.

e. Well development method Air Lift How long did development last? 2 Hrs

f. Was a filter pack installed? Yes ☐ No ☒ Size of sand/gravel _____
Filter pack installed from _____ ft. to _____ ft.

g. Was surface casing used? Yes ☒ No ☐ Was it cemented in place? Yes ☒ No ☐
Surface casing installed from 0 ft. to 20 ft.

7. NAME AND ADDRESS OF DRILLING COMPANY Ingram Drilling, Inc. P.O. BOX 342 ESTES PARK, CO. 80517

8. DATE OF COMPLETION OF WELL (including pump installation) OR SPRING (first used) 2-22-05

9. PUMP INFORMATION: Manufacturer Goould Type Submersible

Source of power Elect Horsepower 1 1/2 Depth of Pump Setting or intake 565 ft.

Amount of Water Being Pumped 2-1.5 Gallons Per Minute. (For Springs or flowing wells, see item 10.)

Total Volumetric Amount Used Per Calendar Year. Remarks on pump test results. 325,000 gallons per UWS

10. FLOWING WELL OR SPRING (Owner is responsible for control of flowing well).

If well yields artesian flow or if spring, yield is _____ gal./min. Surface pressure is _____ lb./sq.inch, or _____ feet of water.

The flow is controlled by: valve ☐ cap ☐ plug ☐

Does well leak around casing? Yes ☐ No ☐

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1187

Book No. _____

110

Page No. _____

SEE REVERSE SIDE

12 PUMP TEST: Was a pump test made? Yes ☒ No ☐

Free by whom:	gal./min. with	foot drawdown after	hours.
Yield:	gal./min. with	foot drawdown after	hours.

Land surface elevation (ft. above mean sea level) _____ Datum: ☐ 1929 ☐ 1988
How determined: ☐ map ☐ altimeter ☐ survey ☐ other

[illegible]

Does a chemical and/or bacteriological water quality analysis accompany this form? Yes ☐ No ☐
It is recommended that chemical and bacteriologic water quality analyses be performed and that the report(s) be filed with the records of this well. (Contact Department of Agriculture, Analytical Lab Services, Laramie, 742-2984.)
If not, do you consider the water as: Good ☐ Acceptable ☐ Poor ☐ Unusable ☐

Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge and belief it is true, correct and complete.

Signature of Owner or Authorized Agent

Date _____

FOR STATE ENGINEER'S USE ONLY

Permit No. U.W.

162148

Date of Receipt JUL 26 2005 . 20

Date of Priority **9/7/2004**, 20

Date of Approval 8/17, 2005

for State Engineer