

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

WELL PERMIT NUMBER 259986
DIV. 8 WD 1 DES. BASIN 2 MD 7

APPLICANT

COMMANCHE CREEK LAND COMPANY LLC
9725 W 23RD AVE
LAKEWOOD, CO 80215-

(303) 462-1788

APPROVED WELL LOCATION

ARAPAHOE COUNTY
NE 1/4 NE 1/4 Section 9
Township 4 S Range 62 W Sixth P.M.

DISTANCES FROM SECTION LINES

1000 Ft. from North Section Line
900 Ft. from East Section Line

UTM COORDINATES (NAD83)

Easting: Northing:

PERMIT TO CONSTRUCT A WELL

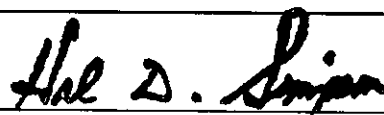
CONDITIONS OF APPROVAL

- 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 ensure 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 37-90-105.
- 4) Water from this well may be used for domestic purposes inside 1 single family dwelling(s), and the watering of the owner's own large non-commercial domestic animals.
- 5) The pumping rate of this well shall not exceed 15 GPM.
- 6) The annual withdrawal of ground water from this well shall not exceed 3 acre-feet.
- 7) The irrigated area shall not exceed 1 acre of lawn and garden.
- 8) Production is limited to the Arapahoe aquifer which is located 170 feet below land surface and extends to a depth of 715 feet. Plain casing must be installed and grouted to prevent the withdrawal of ground water from other aquifers and the movement of ground water between aquifers.
- 9) This well must be constructed within 300 feet of the location specified on this permit.

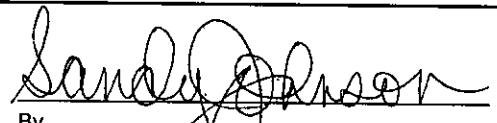
NOTE: The ability of this well to withdraw its authorized amount of water from this non-renewable aquifer may be less than the 100 years upon which the amount of water in the aquifer is allocated, due to anticipated water level declines.

NOTICE: This permit has been approved with a change to the permit application form from that applied for by the applicant. You are hereby notified that you have the right to appeal the issuance of this permit, by filing a written request with this office within sixty (60) days of the date of issuance, pursuant to the State Administrative Procedures Act. (See Section 24-4-104 through 106, C.R.S.)

APPROVED
SMJ



State Engineer



By

Receipt No. 0531274B

DATE ISSUED 10-26-2004

EXPIRATION DATE 10-26-2006

480²

Office Use Only

Form GWS-44 (1/2001)

OCT 22 2004

WATER RESOURCES
 STATE ENGINEER
 COLO.

RESIDENTIAL Note: Also use this form to apply for livestock watering

Water Well Permit Application

Review instructions on reverse side prior to completing form.
 The form must be completed in black ink.

1. Applicant Information

Name of applicant
Commanche Creek Land Company LLC

Mailing address
9725 west 23rd Av.

City Lake wood State CO. Zip code 80215

Telephone #
(303) 1462-1788

2. Type Of Application (check applicable boxes)

Construct new well Use existing well
 Replace existing well Change or increase use
 Change source (aquifer) Reapplication (expired permit)
 Other:

3. Refer To (if applicable)

Well permit # _____ Water Court case # _____

Designated Basin Determination # _____ Well name or # _____

4. Location Of Proposed Well

County Arapahoe SW 1/4 of the NE 1/4

Section 9 Township N or S 4 Range E or W 62 Principal Meridian 6th

Distance of well from section lines (section lines are typically not property lines)
1000 Ft. from N S 900 Ft. from E W

For replacement wells only - distance and direction from old well to new well
 _____ feet _____ direction

Well location address (if applicable) _____

Optional: GPS well location information in UTM format

Required settings for GPS units are as follows:
 Format must be UTM
 Zone must be 13
 Units must be Meters
 Datum must be NAD27 (CONUS)
 Unit must be set to true north
 Were points averaged? YES NO

Northing _____
 Easting _____

5. Parcel On Which Well Will Be Located

A. You must check and complete *one* of the following:

Subdivision: Name _____
 Lot _____ Block _____ Filing/Unit _____

County exemption (attach copy of county approval & survey):
 Name/# _____ Lot # _____

Parcel less than 35 acres, not in a subdivision, attach a deed with metes and bounds description recorded prior to June 1, 1972

Mining claim (attach a copy of the deed or survey):
 Name/# _____

Square 40 acre parcel as described in Item 4

Parcel of 35 or more acres (attach a metes and bounds description or survey)

Other (attach metes & bounds description or survey and supporting documents)

B. # of acres in parcel 67.24 C. Are you the owner of this parcel?
 YES NO (if no - see instructions)

D. Will this be the only well on this parcel? YES NO (if no - list other wells)
10379 - F

E. State Parcel ID# (optional): _____

6. Use Of Well (check applicable boxes)

See instructions to determine use(s) for which you may qualify

A. Ordinary household use in one single-family dwelling (no outside use)

B. Ordinary household use in 1 to 3 single-family dwellings:
 Number of dwellings: 1

Home garden/lawn irrigation, not to exceed one acre:
 area irrigated 1 sq. ft. acre

Domestic animal watering - (non-commercial)

C. Livestock watering (on farm/ranch/range/pasture)

7. Well Data (proposed)

Maximum pumping rate 15 gpm Annual amount to be withdrawn 3 acre-feet

Total depth 500 feet Aquifer Arapahoe

8. Water Supplier

Is this parcel within boundaries of a water service area? YES NO
 If yes, provide name of supplier: _____

9. Type Of Sewage System

Septic tank / absorption leach field
 Central system: District name: _____
 Vault: Location sewage to be hauled to: _____
 Other (attach copy of engineering design and report)

10. Proposed Well Driller License #(optional): 1229

11. Signature Of Applicant(s) Or Authorized Agent

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.

Sign here (Must be original signature) _____ Date 10-22-04

Print name & title
Donald R. Coyle Manager

Office Use Only

USGS map name Strasburg DWR map no. 33K Surface elev. 5405

Receipt area only

Invoice # 531274-8
10/25/2004 -- 15:24:09
 Cashier ID: 01
\$720.00
 Check Purchase- #2585

WE
 WR
 CWCB
 TOPO
 MYLAR
 SB5

DIV 8 WD 1 BA 2 MD 7

NE 1/4, DE 1/4

FORM NO. GWS-31 02/2005	WELL CONSTRUCTION AND TEST REPORT STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 818, Denver, CO 80203 Phone - Info (303) 866-3587 Main (303) 866-3581 Fax (303) 866-3589 http://www.water.state.co.us	For Office Use Only RECEIVED SEP 12 2005 <small>WATER SOURCES STATE ENGINEER COLORADO</small>
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1. WELL PERMIT NUMBER: 259986

2. WELL OWNER INFORMATION

NAME OF WELL OWNER: Commanche Creek Land Company, LLC

MAILING ADDRESS: 9725 W 23rd Ave

CITY: Lakewood STATE: CO ZIP CODE: 80215

TELEPHONE NUMBER: (303) 462-1788

3. WELL LOCATION AS DRILLED: NE 1/4, NE 1/4, Sec. 9, Twp. 4 N or S, Range 62 E or W

DISTANCES FROM SEC. LINES: 1000 ft. from N or S section line and 900 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 must be meters, Datum must be NAD83, Unit must be set to true N, Zone 12 or Zone 13

STREET ADDRESS AT WELL LOCATION: _____ Northing: _____

4. GROUND SURFACE ELEVATION _____ feet DRILLING METHOD Rotary Mud

DATE COMPLETED 8-19-2005 TOTAL DEPTH 410 feet DEPTH COMPLETED 900 feet

5. GEOLOGIC LOG:

Depth	Type	Grain Size	Color	Water Loc.
0-2	Topsoil			
2-15	sandy clay			
15-40	sand & gravel			
40-120	shale			
120-170	sand			
170-220	shale			
220-290	sand			✓
290-300	shale			
300-410	shale			

6. HOLE DIAM (in.)

	From (ft)	To (ft)
9"	0	300
6"	0	410

7. PLAIN CASING:

OD (in)	Kind	Wall Size (in)	From (ft)	To (ft)
6 5/8"	steel	.188	+1	20
6 5/8"	P.V.C.	.40	20	220

PERFORATED CASING: Screen Slot Size (in): .030

OD (in)	Kind	Wall Size (in)	From (ft)	To (ft)
6 5/8"	P.V.C	Sch 40	220	300

8. FILTER PACK: Material Silica Sand type _____

Size 10-12

Interval 300'-220' Depth _____

9. PACKER PLACEMENT: _____

10. GROUTING RECORD

Material	Amount	Density	Interval	Placement
Cement	7 SACK	49 gal	5-40	tremie pipe
Cement	7 SACK	49 gal	160-180	tremie pipe

Remarks: 6" Hole Drilled & Cased to 410'
Best Sand Ends at 300' - 9" Hole Drilled to 300'
& Well Completed

11. DISINFECTION: Type Chlorine Amt. Used 2gal

12. WELL TEST DATA: Check box if Test Data is submitted on Form Number GWS 39 Supplemental Well Test.

TESTING METHOD Air Lift

Static Level 65 ft. Date/Time measured: 8-19-05 Production Rate 50 gpm.

Pumping Level 300 ft. Date/Time measured 8-19-05 Test Length (hrs) 2

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 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: Crandall Drilling & Pump Service, LLC Phone: (303) 622-4820 License Number: 1229

Mailing Address: P.O. Box 357 Strasburg, CO 80136

Signature: Howard H. Crandall Print Name and Title: Howard H. Crandall - Owner Date: 8-30-05

FORM NO.
GWS-32
02/2005

PUMP INSTALLATION AND TEST REPORT
STATE OF COLORADO, OFFICE OF THE STATE ENGINEER
1313 Sherman St., Room 818, Denver, CO 80203
Info (303) 866-3587 Main (303) 866-3581
Fax (303) 866-3589 http://www.water.state.co.us

For Office Use Only

1. WELL PERMIT NUMBER: 259986

2. WELL OWNER INFORMATION

NAME OF OWNER
Comanche Creek Land Company LLC

MAILING ADDRESS
9725 W. 23rd Ave

CITY Lakewood STATE CO ZIP CODE 80215

TELEPHONE #
(303) 462-1788

RECEIVED
SEP 12 2005
WATER DIVISION
STATE ENGINEER
COLO

3. WELL LOCATION AS DRILLED: NE 1/4, NE 1/4 Sec. 9, Twp. 4 N or S, Range 62 E or W

DISTANCES FROM SEC. LINES: 1000 ft from N or S section line and 900 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: _____
must be meters, Datum must be NAD83, Unit must be set to true N, Zone 12 or Zone 13 Northing: _____

STREET ADDRESS AT WELL LOCATION: _____

4. PUMP DATA: Type: Submersible Date Installed: 8-23-05

Pump Manufacturer: Sta-Rite Pump Model No. 10P4G02H

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

Pump Intake Depth: 220 Feet, Drop/Column Pipe Size 1 1/4 Inches, Kind of Drop Pipe P.V.C

ADDITIONAL INFORMATION FOR PUMPS GREATER THAN 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: 8-23-05

Total Well Depth: 300 ft. Time: 3:30

Static Level: 65 ft. Rate (gpm): 15

Date Measured: 8-19-05 Pumping Level (ft): 180

7. DISINFECTION: Type Chlorine Amt. Used 2gal

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.]

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