STATE OF WYOMING

OFFICE OF THE STATE ENGINEER HERSCHLER BUILDING CHEYENNE, WYOMING 82002 (307) 777-6163 SCANNED MAY 1 2 2014
SCANNED JUL 1 8 2006

MICRO FILMED

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STATEMENT OF COMPLETION AND DESCRIPTION OF WELL OR SPRING

	NOTE: Do not fold this form. Use typewriter or print neatly with black ink.					
PE	RMIT NO. U.W. 137102 NAME OF WELL (SPRING) CORRECT #Z					
1.	NAME OF OWNER HAVITAIN E CORRETT + CATHERINE E. WRISC					
2.	ADDRESS 227 HWY 14					
	ADDRESS 22+ 11W1 14 Please check if address has changed from that shown on permit City STERIDAN State Zip Code 6 2801 Phone No. 307-672-2762					
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): SE 1/4 SE 1/4 of Section, T N., R. 83 W., of the 6th P.M. (or W.R.M.),					
	Subdivision Name Lot Block					
	If surveyed, bearing, distance and reference point:					
5.	TYPE OF CONSTRUCTION: Drilled Dug Driven Dug Driven Other (Type of Rig)					
	Describe:					
6.	CONSTRUCTION: Total Depth of Well/Spring ft. Depth to Static Water Level ft. (Below land surface)					
	a. Diameter of borehole (Bit size) inches.					
	b. Casing Schedule New 🔀 Used 🗌					
	4" diameter from 0 ft. to 77 ft. Material GTLVXM 2F) Gage					
	diameter from ft. to ft. Material Gage					
	c. Was casing cemented: Yes No X Cemented Interval, From feet to feet.					
	d. Number of sacks of cement used type of cement					
	e. Perforations: Type of perforator used inches by inches.					
	Number of perforations and depths where perforated: perforations from ft. to feet. perforations from ft. to feet.					
	f. Was well screen installed? Yes No X					
	Diameter: slot size: set from feet to CHEVENNE, WO					
	from the same of t					
	g. Was well gravel packed? Yes X No Size of gravel UNC NOWN					
	h. Was surface casing used: Yes ☐ No ☒ Was it cemented in place? Yes ☐ No ☐					
7.	NAME & ADDRESS OF DRILLING COMPANY C.T. PED, DRILLER					
8.	Total Control of the					
9.	PUMP INFORMATION: Manufacturer Source of power ELECTRIC Horsepower 1/3 Depth of Pump Setting or intake Horsepower 1/3 Depth of Pump Setting or intake Amount of Water Being Pumped 25 Gallons Per Minute. (For Springs or flowing wells, see item 10.) Total Volumetric Gallons Used Per Calendar Year.					
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 islb./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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		constructed? (Some me	thod of artificial diversion,	i.e., spring box, cribbing	, etc., is necessary to
If so, by Yield:	whom C.	ump test made? Yes X T- PED gal./min. with gal./min. with	No Address _ foot drawdown after foot drawdown after	hours.	
Depth of Depth to Depth to	completed we first water be principal water	aring formation	neter of well $oldsymbol{\bot} oldsymbol{D} oldsymbol{\bot}$ incl		
RILL CUTT	INGS DESCF	RIPTION:			
From	To	Material	Remarks	Indicate Water Regging	Indicate Perforated
Feet	Feet		(Cementing, Shutoff)	Indicate Water Bearing Formation & Name	Casing Location
D	8	TOP SOIL	3,		Janes y Louis and
8	19	YELLOW (1)	+-/		
855	55	SAMO + BRE	7 EL		
5'5	63	SAMO + BRI	E		
63	권	SATIO			
7	77	BLUE SHATE	E		
Does a control of the state of	hemical and/onemical and/onemic	at chemical and bacterions well. (Contact Department the water as: Good	uality analysis accompany ologic water quality analysent of Agriculture, Analytica Acceptable S	ses be performed and that I Lab Services, Laramie, 7	t the report(s) be file
ue, correct a	and complete.	jury, I declare that I ha	ve examined this form ar	nd to the best of my known	wledge and belief it i
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