

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

STATEMENT OF COMPLETION AND DESCRIPTION OF WELL OR SPRING

NOTE: Do not fill this space. Use typewriter
or print clearly with black ink.

PERMIT NO. U.W. 175488 NAME OF WELL/SPRING _____ WYMAN #1

1. NAME OF OWNER JOHN R. WYMAN

2. ADDRESS Box 6916

City Ranchester State WY Zip Code 82829 Phone No. 1658-9774

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) Single Family Home

4. LOCATION OF WELL/SPRING SE 1/4 SE 1/4 of Section 5, T. 27 N., R. 26 W., of the 6th P.M. (or W.R.M.)
GPS coordinates UTM Zone _____ Easting _____ Northing _____
Subdivision name _____
If surveyed, bearing, distance, and reference point _____ Lot _____ Block _____
Longitude (degrees, minutes, seconds) _____ Latitude (degrees, minutes, seconds) _____
Datum: ☐ 1927 ☐ 1983 Source: ☐ GPS ☐ Map ☐ Survey

5. TYPE OF CONSTRUCTION Cased ☒ Extended Entry ☐ Plug ☐ Driven ☐ Other
Describe Set Surface w/ mab (Type of plug and cased used, if any) Delayed Plug + Ann. Hole w/ Air - 2 1/2" from top

6. CONSTRUCTION Total depth of well/spring 155 ft.
Depth to static water level 46 ft. (below land surface) Casing height 2 ft. above ground
a. Diameter of borehole (inches) 8 3/4 inches
b. Casing schedule ☒ New ☐ Used Job type ☐ Threaded ☒ Glued ☐ Welded
8 3/4" diameter from ±2 ft. to 155 ft. Material PVC Gauge GDC-21
c. Cemented/grouted interval, from 85 ft. to 100 ft. * From 65 ft to 100 ft
Amount of grout used 11 sacks (example: 10 bags) type 3A Portland Cement
d. Type of completion ☒ Factory screen ☐ Open hole ☐ Customized perforations
Type of perforator used _____
Size of perforations _____ inches by _____ inches
Number of perforations and depths where perforated
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
Open hole from _____ ft. to _____ ft.
Well screen details
Diameter 5 1/2" slot size .025" set from 125 ft. to 135 ft.
e. Well development method _____
f. Was a filter/gravel pack installed? ☒ Yes ☐ No How long did development last? _____
Filter pack/gravel installed from 100 ft. to 155 ft. Size of sand/gravel 40 mesh + cleaned chert
g. Was surface casing used? ☒ Yes ☐ No Was it cemented in place? ☒ Yes ☐ No
Surface casing installed from ±2 ft. to 20 ft. (P.O. BOX 170, BUFFALO, WY 82534, (307) 634-9022)

7. NAME AND ADDRESS OF DRILLING COMPANY _____

8. DATE OF COMPLETION OF WELL (including pump installation) OR SPRING (first used) 7-20-06

9. PUMP INFORMATION Manufacturer SMA-RITE Type Submersible
Source of power Public Util Horsepower 1/2 Depth of pump setting or intake 148 ft.
Amount of water being pumped 8 gal./min. (For springs or flowing wells, see item 10)
Total volumetric quantity used per calendar year 500,000 Gal

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

11. IF SPRING, HOW WAS IT CONSTRUCTED? (Some method of artificial diversion, i.e., springbox, cribbing, etc., is necessary to qualify for a water right) RA

12. PUMP TEST Was a pump test conducted? ☒ Yes. ☐ No

If so, by whom Robert A. Williams

Yield 0 gal./min. with _____ ft. drawdown after _____ hours

Yield _____ gal./min. with 80 ft. drawdown after 4 hours

13. LOG OF WELL. Total depth drilled 160 ft.
Depth of completed well 155 ft. Diameter of well 5 inches.
Depth to first water bearing formation 134 ft.
Depth to principal water bearing formation top 124 ft. to bottom 133 ft.
Land surface elevation (ft. above mean sea level)
How determined ☒ Map ☐ Altimeter ☐ Survey ☐ Datum ☒ 1929 ☐ 1988
Other _____

DRILL CUTTING DESCRIPTION:

[illegible]

14. DOES A GEOPHYSICAL LOG ACCOMPANY THIS FORM? ☐ Yes ☒ No

15. QUALITY OF WATER INFORMATION

Does a chemical and/or bacteriological water quality analysis accompany this form? ☐ Yes ☒ No
It is recommended that chemical and bacteriological 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, 742-2584.)
If not, do you consider the quality of water as ☒ Good ☐ Acceptable ☐ Poor ☐ Unusable

REMARKS

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. 175488

Date of Receipt _____, 20____

Date of Approval: _____, 20____

Date of Priority 7/6/2006

for State Employees

STATE OF WYOMING
OFFICE OF THE STATE ENGINEER
HERSCHLER BLDG., 4-E
CHEYENNE, WYOMING 82002

(307) 777-6163

STATEMENT OF COMPLETION AND DESCRIPTION OF WELL OR SPRING

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

PERMIT NO. U.W. 175488 W NAME OF WELL/SPRING WYMAN #1

1. NAME OF OWNER John R. Wyman

2. ADDRESS Box 696

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

City Ranchester State WY Zip Code 82839 Phone No. 307-855-9774

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)
1 single family home

4. LOCATION OF WELL/SPRING SW $\frac{1}{4}$ SW $\frac{1}{4}$ of Sec. 5 T. 57 N. R. 86 W., of the 6th P.M. (or W.R.M.)

Subdivision Name _____ Lot _____ Block _____

Resurvey Location Tract _____ Or Lot _____ Datum ☐ NAD27 ☐ NAD83

Geographic Coordinates: Latitude 44 58' 15.7" N Longitude 107 16' 36.7" W (degrees, minutes, seconds)

UTM: Zone _____ Northing _____ Easting _____ (meters)

State Plane Coordinates: Zone _____ Northing _____ Easting _____ (feet)

Land surface elevation (ft. above mean sea level) _____ Datum ☐ NAVD29 ☐ NAVD88

Source ☒ GPS ☐ Map ☐ Survey ☐ Unknown ☐ Other ☐ Altimeter (for elevation only)

5. TYPE OF CONSTRUCTION ☒ Drilled Rotary ☐ Dug ☐ Driven ☐ Other
Describe _____

6. CONSTRUCTION Total depth of well/spring 155 ft.
Depth of static water level 48 ft. (below land surface) Casing height 2 ft. above ground

a. Diameter of borehole (bit size) 8 3/4 inches

b. Casing schedule ☒ New ☐ Used Joint Type ☐ Threaded ☒ Glued ☐ Welded
5 1/2" diameter from +2 ft. to 155 ft. Material SDR-21 Gage _____
_____ diameter from _____ ft. to _____ ft. Material _____ Gage _____

c. Cemented/grouted interval, from 85 ft. to 100 ft. and from 0.5 ft. to 10 ft.
Amount of cement/grout used 11 type 3/8" Bentonite Chips
(example: 10 sacks) (example: bentonite pellets)

d. Type of completion ☐ Customized perforation ☐ Open hole ☒ Factory screen

Type of perforator used _____

Size of perforations _____ inches by _____ inches

Number of perforations and depths where perforated

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

Open hole from _____ ft. to _____ ft.

Well screen details

Diameter 5 1/2" slot size .025 set from 125 ft. to 135 ft.

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

e. Well development method _____ How long was well developed? _____

f. Was a filter/gravel pack installed? ☒ Yes ☐ No Size of sand/gravel 1/4" washed & chlorinated chips
Filter/gravel pack installed from 100 ft. to 155 ft.

g. Was surface casing used? ☒ Yes ☐ No Was it cemented in place? ☒ Yes ☐ No
Surface casing installed from +2 ft. to 20 ft.

7. NAME AND ADDRESS OF DRILLING COMPANY Verplancke Drilling Co., PO Box 179, Buffalo, WY 82834

8. DATE OF COMPLETION OF WELL (including pump installation) OR SPRING (first used) 7/20/2006

9. PUMP INFORMATION Manufacturer Sta-Rite Type Submersible

Source of power Electric Horsepower 1/2 Depth of pump setting or intake 148 ft.

Amount of water being pumped 8 gal./min.* (For springs or flowing wells, see item 10)

Total volumetric quantity used per calendar year.* _____

*If these amounts exceed permitted amount, an enlargement is required.

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

11. IF SPRING, HOW WAS IT CONSTRUCTED? (Some method of artificial diversion, i.e., spring box, cribbing, etc., is necessary to qualify for a water right) _____

12. PUMP TEST Was a pump test conducted? ☒ Yes ☐ No

If so, by whom? Verplancke Drilling

Yield 8 gal./min. with 80 ft. drawdown after 4 hours

Yield _____ gal./min. with _____ ft. drawdown after _____ hours

13. LOG OF WELL Total depth drilled 160 ft.

Depth of completed well 155 ft. Diameter of well 58 inches

Depth to first water bearing formation 124 ft.

Depth to principal water bearing formation Top 124 ft. to Bottom 133 ft.

DRILL CUTTINGS DESCRIPTION

From Feet	To Feet	Rock Type Or Description	Formation	Water Bearing? (Yes or no)
Surface	20	Set 10 3/4" PVC Surface Casing		
0	1	Topsoil		
1	4	Grey Sand		
4	15	Gravel		
15	33	Sticky Clay		
33	50	Silty Shale		
50	124	Blue Shale		
124	133	Firm Silty Sand w/coal streaks		
133	160	Shale		

14. DOES A GEOPHYSICAL LOG ACCOMPANY THIS FORM? ☐ Yes ☒ No

15. QUALITY OF WATER INFORMATION

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

REMARKS The location of the well was misdescribed on the permit application. It is in the SWSW of S-5, 57-86.

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.

John R Wyman
Signature of Owner or Authorized Agent

3-3 20 14
Date

The State of Wyoming
County of Sheridan

I hereby certify that the foregoing statement was signed in my presence and sworn to before me by John R. Wyman this 3rd day of March, 2014.

Deborah L. Reed
Notary Public

My Commission expires: 7/6/2014



FOR STATE ENGINEER'S USE ONLY

Permit No. U.W. _____

Date of Receipt _____, 20 _____

Date of Approval _____, 20 _____

Date of Priority _____, 20 _____

for State Engineer