130-59-23 NE

STATE OF NORTH DAKOTA

BOARD OF WATER WELL CONTRACTORS

900 E. BOULEVARD • BISMARCK, NORTH DAKOTA 58501

WELL DRILLER'S REPORT

State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

1. WELL OWNER

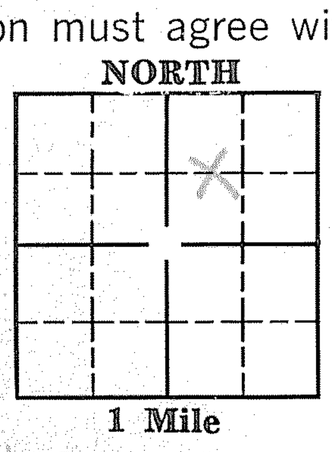
Name John Hokana

Address Oakes, ND. 58474

2. WELL LOCATION

Sketch map location must agree with written location.

NORTH



1 Mile

County Dickey

____ ¼ ____ ¼ NE ¼ Sec. 23 Twp. 130 N. Rg. 59 W.

3. PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Industrial
☐ Stock ☐ Municipal ☐ Test Hole

4. METHOD DRILLED

☐ Cable ☒ Reverse Rotary ☐ Bored
☐ Forward Rotary ☐ Jetted ☐ Other

If other, specify

5. WATER QUALITY

Was a water sample collected for chemical analysis?

☐ Yes ☒ No

If so, to what laboratory was it sent

6. WELL CONSTRUCTION

Diameter of hole 30 inches. Depth 50 feet.

Casing: ☒ Steel ☐ Plastic ☐ Concrete
☐ Threaded ☒ Welded ☐ Other

If other, specify

Pipe Weight:	Diameter:	From:	To:
____ lb/ft.	12 inches	0 feet	20 feet
____ lb/ft.	____ inches	____ feet	____ feet
____ lb/ft.	____ inches	____ feet	____ feet
____ lb/ft.	____ inches	____ feet	____ feet

Was perforated pipe used? ☐ Yes ☐ No

Length of pipe perforated ____ feet

Was casing left open end? ☐ Yes ☒ No

Was a well screened installed? ☒ Yes ☐ No

Material S. Steel Diameter 12 inches
(stainless steel, bronze, etc.)

Slot size ____ set from 20 feet to 50 feet

Slot size ____ set from ____ feet to ____ feet

Slot size ____ set from ____ feet to ____ feet

Slot size ____ set from ____ feet to ____ feet

Was a packer or seal used? ☐ Yes ☐ No

If so, what material

Type of well: Straight screen ☐ Gravel packed ☒

Was the well grouted? Yes ☐ No ☐

To what depth? ____ feet

Material used in grouting

Well head completion: Pitless adapter

12" above grade ____ Other ____

If other, specify

Was well disinfected upon completion? ☐ Yes ☒ No

7. WATER LEVEL

Static water level ____ feet below land surface

If flowing: closed-in pressure ____ psi

GPM flow ____ through ____ inch pipe

Controlled by: ☐ Valve ☐ Reducers ☐ Other

If other, specify

8. WELL TEST DATA

☒ Pump ☐ Bailer ☐ Other

Pumping level below land surface:

____ ft. after ____ hrs. pumping ____ gpm

____ ft. after ____ hrs. pumping ____ gpm

____ ft. after ____ hrs. pumping ____ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
top soil	0	1
sand + coal	1	39
blue clay	39	49

(Use separate sheet if necessary.)

10. DATE COMPLETED 11-3-76

11. WAS WELL PLUGGED OR ABANDONED?

☐ Yes ☒ No

If so, how

12. REMARKS:

13. DRILLER'S CERTIFICATION

This well was drilled under my jurisdiction and this report is true to the best of my knowledge.

Empire Irrigation Drilling Co.

Driller's or Firm's Name Certificate No.

Frankfort, SD 57440

Address

Paul W. King 11-23-76

Signed by Date

DUPLICATE — BOARD'S COPY