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 Dale Raum Corp.

Name Dale Raum - 701-834-2387

Address Ft. Tuma North Dakota 58844

2. WELL LOCATION

Sketch map location must agree with written location.

NORTH

W 1 MILE E

Sec. (1 mile) _____

County Divide

___ 1/4 SE 1/4 NE 1/4 Sec. 8 Twp. 101 N.Rg 162 W.

3. PROPOSED USE

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

4. METHOD DRILLED

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

If other, specify _____

5. WATER QUALITY

Was a water sample collected for:

Chemcial Analysis? ☐ Yes ☒ No

Bacteriological Analysis? ☐ Yes ☒ No

If so, to what laboratory was it sent? _____

6. WELL CONSTRUCTION

Diameter of hole 9 inches. Depth 183 feet.

Casing: 701-834-2387 ☐ Steel ☒ Plastic ☐ Concrete ☐ Threaded ☐ Welded ☐ Other

If other, specify _____

Pipe Weight:	Diameter:	From:	To:
200 lb/ft	5 inches	12 feet	168 feet
___ lb/ft	___ inches	___ feet	___ feet
___ lb/ft	___ inches	___ feet	___ feet

Was perforated pipe used? ☐ Yes ☒ No

Perforated pipe set from _____ ft to _____ feet

Was casing left open end? ☒ Yes ☐ No

Was a well screened installed? ☒ Yes ☐ No

Material PVC Diameter 5 inches

Slot Size 20 set from 168 feet to 183 feet

Slot Size _____ set from _____ feet to _____ feet

Was packer or seal used? ☐ Yes ☒ No

If so, what material _____ Depth _____ ft.

(stainless steel, bronze, etc.)

Type of well: Straight screen ☒ Gravel packed ☐

Depth grouted: From 0 To 20

Grouting Material: Cement _____ Other EnviroPlug

If other explain: _____

Well head completion: Pitless unit _____

12" above grade _____ Other _____

If other, specify _____

Was pump installed: ☒ Yes ☐ No

Was well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL

Static water level 4/2 feet below surface

If flowing: closed-in pressure _____ psi

GPM flow 5 through 1 inch pipe

Controlled by: ☒ Valve ☐ Reducers ☐ Other

If other, specify _____

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Other Air

Pumping level below land surface:

140 ft. after 3 hrs. pumping 15 gpm

___ ft. after ___ hrs. pumping ___ gpm

___ ft. after ___ hrs. pumping ___ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
Topsoil	0	1
Clay	1	10
Sands	10	30
Glacial Till	30	168
Sand & Gravel	168	183

(Use separate sheet if necessary)

10. DATE COMPLETED 6-12-00

11. WAS WELL PLUGGED OR ABANDONED?

☐ Yes ☒ No

If so, how _____

12. REMARKS: New well

13. DRILLER'S CERTIFICATION

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

Mark Adair Drilling — 194

Driller's or Firm's Name — Certificate No

418 Nichols Rd. Box 525 Plentywood Mt. 59254

Address

Mark Adair — 6-12-00

Signed by — Date

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