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 George Klein

Address Sentinel Butte, N.D.

2. WELL LOCATION

Sketch map location must agree with written location.

NORTH

1 MILE

Sec. (1 mile)

County Golden Vally

NW ¼ NE ¼ NW ¼ Sec. 20 Twp. 139 N.Rg 103 W.

3. PROPOSED USE

- [x] Domestic
- [x] Stock
- [ ] Geothermal
- [ ] Irrigation
- [ ] Municipal
- [ ] Monitoring
- [ ] Industrial
- [ ] Test Hole

4. METHOD DRILLED

- [ ] Cable
- [x] Forward Rotary
- [ ] Reverse Rotary
- [ ] Jetted
- [ ] Bored
- [ ] Auger

If other, specify

5. WATER QUALITY

Was a water sample collected for:

Chemcial Analysis? [ ] Yes [x] No

Bacteriological Analysis? [ ] Yes [x] No

If so, to what laboratory was it sent? owner will comp.

6. WELL CONSTRUCTION

Diameter of hole 8 3/4 inches. Depth 210 feet.

Casing: [ ] Steel [x] Plastic [ ] Concrete [ ] Threaded [ ] Welded [ ] Other

If other, specify

Pipe Weight:	Diameter:	From:	To:
Sch. 40 lb/ft	4 inches	6 feet	210 feet
lb/ft	inches	feet	feet
lb/ft	inches	feet	feet

Was perforated pipe used? [x] Yes [ ] No

Perforated pipe set from 190 ft to 210 feet

Was casing left open end? [x] Yes [ ] No

Was a well screened installed? [ ] Yes [x] No

Material _____ Diameter _____ inches

Slot Size _____ set from _____ feet to _____ feet

Slot Size _____ set from _____ feet to _____ feet

Was packer or seal used? [ ] Yes [x] No

If so, what material _____ Depth _____ ft.

(stainless steel, bronze, etc.)

Type of well: Straight screen [ ] Gravel packed [x]

Depth grouted: From 6 To 170

Grouting Material: Cement X Other

If other explain:

Well head completion: Pitless unit yes

12" above grade _____ Other

If other, specify

Was pump installed: [x] Yes [ ] No

Was well disinfected upon completion? [x] Yes [ ] No

7. WATER LEVEL

Static water level 150 feet below 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 [x] Other

Pumping level below land surface:

190 ft. after 4 hrs. pumping 10 gpm

_____ ft. after _____ hrs. pumping _____ gpm

_____ ft. after _____ hrs. pumping _____ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
clay	0	15
gray shale	15	55
coal	55	60
gray shale	60	70
coal	70	75
Sandy shale	75	105
gray shale	105	130
coal	130	140
gray shale	140	160
coal	160	165
green shale	165	190
sand	190	210

(Use separate sheet if necessary)

10. DATE COMPLETED 7 - 24 - 1992

11. WAS WELL PLUGGED OR ABANDONED?

[ ] Yes [x] 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.

McDanold Well Drilling 68

Driller's or Firm's Name Certificate No.

Box 931 Beach ND 58621

Address

Merlin McDanold 7/25/92

Signed by Date

WHITE-DRILLER'S COPY YELLOW-BOARD'S COPY PINK-CUSTOMER'S COPY