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

579 4463

Name JAMES MELLMER

Address NEW ENGLAND

2. WELL LOCATION

Sketch map location must agree with written location.

321 5th AVE

NORTH

1 MILE

3

135-97-3B ?

Sec. (1 mile)

County HETTINGER COUNTY

LOTS 1 AND 2 135 N 97

___¼___¼___¼ Sec. 3 Twp. ___ N.Rg ___ W.

Block 8 of BABB EAST ADDITION

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 4 inches. Depth 100 feet.

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

If other, specify

Pipe Weight:	Diameter:	From:	To:
200 lb/ft	4 inches	feet	100 feet
lb/ft	inches	feet	feet
lb/ft	inches	feet	feet

Was perforated pipe used? ☒ Yes ☐ No

Perforated pipe set from 70 ft to 30 feet

Was casing left open end? ☒ Yes ☐ No

Was a well screened installed? ☒ Yes ☐ No

Material ___ Diameter ___ inches

Slot Size ___ set from ___ feet to ___ 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 ___ To ___

Grouting Material: Cement ___ Other ___

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 ___ 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 ☐ 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
Clay	10	20
"	20	40
"	50	60
sandy clay	60	80
sandy	80	90
sandy	90	100

(Use separate sheet if necessary)

10. DATE COMPLETED 7/30/94

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.

Kruger drilling 34

Driller's or Firm's Name Certificate No

Dickinson ND 58

Address

Dickinson ND 58

Signed by W M Kruger Date

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