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.

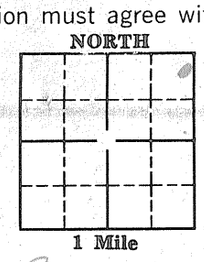
**1. WELL OWNER**

Name: Randy Sagvold

Address: Lisbon, N.D.

**2. WELL LOCATION**

Sketch map location must agree with written location.




12-E
2-S of
Lisbon on
Hwy. 27

County: Ransom

____ ¼ ____ ¼ NE ¼ Sec. 21 Twp. 134 N. Rg. 54 W.

**3. PROPOSED USE**

☒ Domestic ☒ Stock ☐ Geothermal ☐ Irrigation ☐ Municipal ☐ Industrial ☐ 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: N.D. State Lab.

**6. WELL CONSTRUCTION**

Diameter of hole: 2 3/4 inches. Depth: 25 feet.

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

If other, specify: ____

| Pipe Weight: | Diameter: | From: | To: |
|---|---|---|---|
| 200 lb/ft. | 4 inches | 0 feet | 25 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: 5 feet

Was casing left open end? ☒ Yes ☐ No

Was a well screened installed? ☐ Yes ☐ No

Material: ____ Diameter: ____ inches
(stainless steel, bronze, etc.)

Slot size ____ set from ____ feet to ____ 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? 10 feet

Material used in grouting: Neat Cement

Well head completion: Pitless adapter X

12" above grade ____ Other ____

If other, specify: ____

Was well disinfected upon completion? ☒ Yes ☐ No

**7. WATER LEVEL**

Static water level: 11 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:

11 ft. after 24 hrs. pumping 20 gpm

____ ft. after ____ hrs. pumping ____ gpm

____ ft. after ____ hrs. pumping ____ gpm

**9. WELL LOG**

| Formation | Depth (ft.) From | Depth (ft.) To |
|---|---|---|
| Limestone | 0 | 4 |
| Clay | 4 | 9 |
| Gravelly Sand | 9 | 13 |
| Sand & gravel 1/16-3/8" | 13 | 25 |
| Blue Clay | 25 | |

(Use separate sheet if necessary.)

**10. DATE COMPLETED** 8-31-88

**11. WAS WELL PLUGGED OR ABANDONED?**

☐ Yes ☒ No

If so, how: ____

**12. REMARKS:**

well 20 ft North of TRAILER

**13. DRILLER'S CERTIFICATION**

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

Rockers Well Drilling 99
Driller's or Firm's Name — Certificate No.

RR1 Box E-12 Lisbon N.D.
Address

Robert Rocker 5-3-88
Signed by — Date

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