

STATE OF NORTH DAKOTA
BOARD OF WATER WELL CONTRACTORS
900 E. BOULEVARD • BISMARCK, NORTH DAKOTA 58501

WELL DRILLER'S REPORT

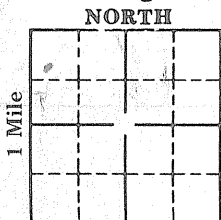
State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

1. WELL OWNER

Name Wendel Brown
Address 7880 52nd st SE Moorhead
7/10
58472

2. WELL LOCATION

Sketch map location must agree with written location.



Sec. [1 Mile] 3

County Stutsman
NW 1/4 1/4 1/4 Sec. 3 Twp. 137 N. Rg. 65 W.

3. PROPOSED USE

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

4. METHOD DRILLED

☒ Cable ☐ Reverse Rotary ☐ Bored
☒ Forward Rotary ☐ Jetted ☐ Auger
If other, specify _____

5. WATER QUALITY

Was a water sample collected for:
Chemical Analysis? ☐ Yes ☒ No
Bacteriological Analysis? ☐ Yes ☐ No
If so, to what laboratory was it sent _____

6. WELL CONSTRUCTION

Diameter of hole 4 inches. Depth 143 feet.
Casing: ☒ Steel ☐ Plastic ☐ Concrete
☐ Threaded ☐ Welded ☐ Other
If other, specify _____

Pipe Weight: Diameter: From: To:
11 lb/ft. 4 1/2 inches _____ feet _____ 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 _____ Diameter _____ inches
(stainless steel, bronze, etc.)

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 _____ Depth _____ Ft.

Type of well: Straight screen ☐ Gravel packed ☐

Depth grouted: From _____ To _____

Grouting Material: Cement _____ Other _____

Other explain: _____

Well head completion: Pitless unit yes

_____ above grade _____ Other _____

Other, specify _____

Is pump installed: ☒ Yes ☐ No

Is well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL

Static water level 70 ft feet below land surface

If flowing: closed-in pressure _____ psi

GPM flow 15 through _____ inch pipe

Controlled by: ☐ Valve ☐ Reducers ☐ Other

If other, specify _____

8. WELL TEST DATA

☒ Pump ☐ Bailer ☐ Other

Pumping level below land surface:

90 ft. after 12 hrs. pumping 12 gpm

_____ ft. after _____ hrs. pumping _____ gpm

_____ ft. after _____ hrs. pumping _____ gpm

9. WELL LOG

Formation	Depth (ft.)	
	From	To
top soil	0	1 ft
yellow clay		35
blue clay		100
		125
sandy hard pan	125	131
shale	131	143

(Use separate sheet if necessary.)

10. DATE COMPLETED 6-17-96

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.

Carlson Well Drilling 114
Driller's or Firm's Name Certificate No.

3111 Hwy 20 S.E.
Address

D.W. Carlson 6-24-96
Signed by Date