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: Lee A. Groot

Address: Lakeside Jamestown

2. WELL LOCATION

Sketch map location must agree with written location.

NORTH

1 MILE

Sec. (1 mile)

Fuller

Fried Township
E½SE¼

County: Stutsman

____¼____¼____¼ Sec. 31 Twp. 141 N.Rg 63 W.

3. PROPOSED USE

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

4. METHOD DRILLED

- [x] 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 85 feet.

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

If other, specify _____

Pipe Weight:	Diameter:	From:	To:
____lb/ft	____inches	____feet	____feet
____lb/ft	____inches	____feet	____feet
____lb/ft	____inches	____feet	____feet

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

Perforated pipe set from _____ft to _____ 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 [ ] 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: [x] Yes [ ] No

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

7. WATER LEVEL

Static water level 31 feet below surface

If flowing: closed-in pressure _____ psi

GPM flow 15 through 1 inch pipe

Controlled by: [ ] Valve [ ] Reducers [ ] Other

If other, specify _____

8. WELL TEST DATA

- [x] Pump
- [x] Bailer
- [ ] Other

Pumping level below land surface:

40 ft. after 2 hrs. pumping 15 gpm

_____ft. after _____hrs. pumping _____gpm

_____ft. after _____hrs. pumping _____gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
top soil	0	1
shale, dry	1	53
shale with water	53	85

(Use separate sheet if necessary)

10. DATE COMPLETED

11-15-1995

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.

Carlson Drilling — ND

Driller's or Firm's Name — Certificate No

3111 Hwy 20 S.E. Jamestown

Address

Gerald W. Carlson — 12-95

Signed by — Date

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