

WELL DRILLER'S REPORT

1. WELL OWNER

2. WELL LOCATION

3. PROPOSED USE

4. METHOD DRILLED

5. WATER QUALITY

6. WELL CONSTRUCTION

Was well disinfected upon completion? ☐ Yes ☒ No

7. WATER LEVEL

8. WELL TEST DATA

9. WELL LOG

[illegible]

(Use separate sheet if necessary.)

10. DATE COMPLETED

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.

Porter Moll Co	106
Driller's or Firm's Name	Certificate No.
410 4th St. Park River N. D.	
Address	
Charles Porter	Mar. 28, 1938
Signed by	☒ Date