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.

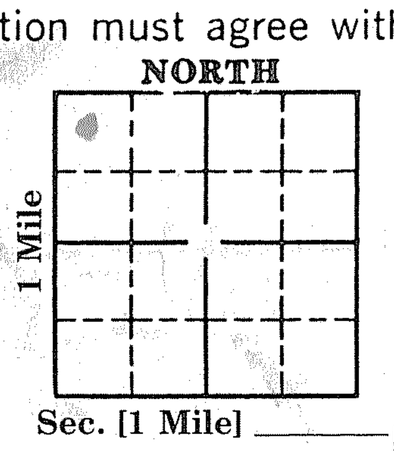
1. WELL OWNER

Name: Silver Liberty

Address: Scranton N.D.

2. WELL LOCATION

Sketch map location must agree with written location.



County: Bowman

___ ¼ NW ¼ NW ¼ Sec. 33 Twp. 131 N. Rg. 100 W.

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 chemical analysis?

☐ Yes ☒ No

If so, to what laboratory was it sent ____

6. WELL CONSTRUCTION 4E-5246

Diameter of hole 6¼ inches. Depth 123 feet.

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

If other, specify ____

Pipe Weight:	Diameter:	From:	To:
Sch 40 lb/ft.	4 1/2 inches	0 feet	126 feet
___ lb/ft.	___ inches	___ feet	___ feet
___ lb/ft.	___ inches	___ feet	___ feet

Was perforated pipe used? ☒ Yes ☐ No

Perforated pipe set from 63 ft to 103 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 30 set from 63 feet to 103 feet

Was a packer or seal used? ☒ Yes ☐ No

If so, what material PVC Depth 124 Ft.

Type of well: Straight screen ☐ Gravel packed ☒

Depth grouted: From 0 To 24

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 Surface feet below land surface

If flowing: closed-in pressure 0 psi

GPM flow 1gal through ____ inch pipe

Controlled by: ☐ Valve ☐ Reducers ☐ Other

If other, specify ____

8. WELL TEST DATA

☐ Pump ☒ Bailer ☐ Other

Pumping level below land surface:

80 ft. after 3 hrs. pumping 5 gpm

___ ft. after ___ hrs. pumping ___ gpm

___ ft. after ___ hrs. pumping ___ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
Topsoil Sd	0	10
Fine B.W + B Sd	10	58
Coarse Coal & Sand	58	62
Green Clay W Sd + coal	62	115
Gray Clay	115	127
Gray Sd Clay + Sd	127	245
& Rock	245	246
Gray Clay	246	267

(Use separate sheet if necessary.)

10. DATE COMPLETED Aug 8, 88

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.

Dependable Drlg — 202

Driller's or Firm's Name — Certificate No.

Box 136 Bowman N.D.

Address

Lodestrom Aug 8, 88

Signed by — Date

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