STATE OF NORTH DAKOTA
BOARD OF WATER WELL CONTRACTORS
900 E. BOULEVARD AVE., DEPT. 770 • BISMARCK, NORTH DAKOTA 58505-0850

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: Kathleen Jones
Address: 4380 Wildwood st
Bismarck

2. WELL LOCATION
Sketch map location must agree with written location.

NORTH

1 MILE

Well is at this location

Sec. (1 mile) _____

County: Burleigh

_____ 1/4 _____ 1/4 SE 1/4 Sec. 14 Twp. 139 N. Rg. 81 W.

3. PROPOSED USE
☒ Domestic Yard ☐ 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
Bacteriological Analysis? ☐ Yes ☒ No
If so, to what laboratory was it sent? owners discretion

6. WELL CONSTRUCTION
Diameter of hole 8 inches. Depth 70 feet.

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

If other, specify _____

Pipe Weight:	Diameter:	From:	To:
200 lb/ft	4 inches	0 feet	70 feet
lb/ft	inches	feet	feet
lb/ft	inches	feet	feet

Was perforated pipe used? ☒ Yes ☐ No
Perforated pipe set from 30 ft. to 70 feet
Was casing left open end? ☐ Yes ☒ No
Was a well screen installed? ☒ Yes ☐ No
Material PVC Diameter 4 inches
Slot Size .020 set from 40 feet to 70 feet
Slot Size _____ set from _____ feet to _____ feet
Was packer or seal used? ☒ Yes ☐ No
If so, what material chips Depth 0-34 ft.
Type of well: Straight screen ☐ Gravel packed ☒
Depth grouted: From 0 To 34
Grouting Material: Cement _____ Other chips
If other, explain: Hydrated chips
Well head completion: Pitless unit 4x1¼ well seal
12" above grade 16 Other _____
If other, specify _____
Was pump installed? ☒ Yes ☐ No
Was well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL
Static water level 14 feet below 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:
26 ft. after 2 hrs. pumping 15 gpm
35 ft. after 4 hrs. pumping 25 gpm
_____ ft. after _____ hrs. pumping _____ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
Brown sandy clay	0	11
Brown sand	11	16
fine gray sand	16	36
Med gray sand	36	47
gray sandy clay	47	51
med sand + gravel	51	70

(Use separate sheet if necessary)

10. DATE COMPLETED 5-16-08

11. WAS WELL PLUGGED OR ABANDONED?
☐ Yes ☒ No
If so, how _____

12. REMARKS:
Well is east of House + for watering Yard

13. DRILLER'S CERTIFICATION
This well was drilled under my jurisdiction and this report is true to the best of my knowledge.

Schaff + Son's Repair Inc. 14
Driller's or Firm's Name — Certificate No.
PO Box 339 Mandan
Address
Bill Schaff 2-24-09
Signed by — Date

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