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

WELL DRILLER'S REPORT

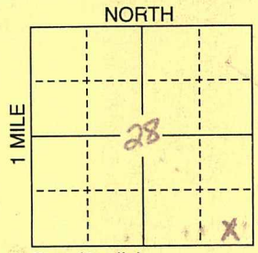
State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

1. WELL OWNER

Name: U.S. Fish & Wildlife Service
Address: 1 First St.
Kulm, ND 58456

2. WELL LOCATION

Sketch map location must agree with written location.



Sec. (1 mile)_____

County: LaMoure

SE 1/4 SE 1/4 ____ 1/4 Sec. 28 Twp. 133 N. Rg. 66 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 3½ inches. Depth 200 feet.

Casing: ☐ Steel ☐ Plastic ☐ Concrete
☐ 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 ☐ No
Perforated pipe set from _____ ft. to _____ feet
Was casing left open end? ☐ Yes ☐ No
Was a well screen installed? ☐ Yes ☐ 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.
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? ☐ Yes ☐ No
Was well disinfected upon completion? ☐ Yes ☐ No

7. WATER LEVEL

Static water level _____ 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:
____ ft. after ____ hrs. pumping ____ gpm
____ ft. after ____ hrs. pumping ____ gpm
____ ft. after ____ hrs. pumping ____ gpm

9. WELL LOG

Formation	Depth (ft.) From	Depth (ft.) To
Top Soil Black	0	2
Clay / Rocky	2	30
Silt	30	100
Blue Clay	100	200
Occationally Rocky		

(Use separate sheet if necessary)

10. DATE COMPLETED 11-8-12

11. WAS WELL PLUGGED OR ABANDONED?

☐ Yes ☐ No
If so, how _____

12. REMARKS:

8 wells

13. DRILLER'S CERTIFICATION

This well was drilled under my jurisdiction and this report is true to the best of my knowledge. TW Drilling

LENIUS WELL DRILLING 118
Driller's or Firm's Name Certificate No.

BRITTON, S.D. 57430
Address

Walter Lenius 11-15-12
Signed by Date

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