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 RON DISRUD
Address 4944 100 TH ST NE ROLLA
PO BOX 36 ROLLA ND 58367

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

NORTH

1 MILE

Sec. (1 mile)_____

County Rolette

SW 1/4 NE 1/4 NW 1/4 Sec. 17 Twp. 162 N. Rg. 69 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: BY OWNER
Chemical Analysis? ☒ Yes ☐ No
Bacteriological Analysis? ☐ Yes ☐ No
If so, to what laboratory was it sent? _____

6. WELL CONSTRUCTION
Diameter of hole 7 7/8 inches. Depth 75 feet.

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

If other, specify _____

Pipe Weight:	Diameter:	From:	To:
200 lb/ft	5 inches	+ 2' feet	55 feet
____ lb/ft	____ inches	____ feet	____ feet
____ lb/ft	____ inches	____ feet	____ feet

Was perforated pipe used? ☒ Yes ☐ No
Perforated pipe set from 55 ft. to 75 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 0 To 30
Grouting Material: Cement _____ Other _____
If other, explain: BENTONITE CHIPS
Well head completion: Pitless unit NO
12" above grade _____ Other _____
If other, specify WELL SEAL
Was pump installed? ☒ Yes ☐ No
Was well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL
Static water level + 1'6" 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:
50 ft. after 6 hrs. pumping 4 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
GRAVELY	1	5
CLAY YELLOW	5	10
CLAY BLUE	10	18
SAND	18	20
CLAY BLUE	20	45
GRAVELY SHALE	45	73
SHALE	73	75

(Use separate sheet if necessary)

10. DATE COMPLETED 9-14-14

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.

BURSINGER DRILLING 30
Driller's or Firm's Name Certificate No.
PO BOX 113 BISBEE ND 58317
Address
Charles Bursinger 11-18-14
Signed by Date

YELLOW DRILLER'S COPY PINK CUSTOMER'S COPY