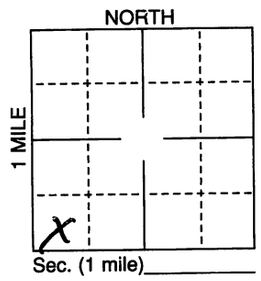
STATE OF NORTH DAKOTA
BOARD OF WATER WELL CONTRACTORS
900 E. BOULEVARD AVE., DEPT. 770 • BISMARCK, NORTH DAKOTA 58505-0850

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 David Allmaras
Address 2333 81st Av NE
New Rockford, ND.

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



Sec. (1 mile)_____
County Eddy
SW 1/4 SW 1/4 ____ 1/4 Sec. 3 Twp. 149 N. Rg. 64 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
17 gp hard
1 ppm iron
0 - Nitrate
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 8 inches. Depth 50 feet.
Casing: ☐ Steel ☒ Plastic ☐ Concrete ☐ Threaded ☐ Welded ☐ Other
If other, specify _____

Pipe Weight:	Diameter:	From:	To:
2.8 lb/ft	5 inches	+1 feet	50 feet
____ lb/ft	____ inches	____ feet	____ feet
____ lb/ft	____ inches	____ feet	____ feet

Was perforated pipe used? ☒ Yes ☐ No
Perforated pipe set from 30 ft. to 50 feet
Was casing left open end? ☐ Yes ☒ No
Was a well screen installed? ☐ Yes ☒ No
Material PVC Diameter 5 inches
Slot Size 16 set from 30 feet to 50 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 8 To 26
Grouting Material: Cement _____ Other X
If other, explain: Enviroplug
Well head completion: Pitless unit _____
12" above grade X Other _____
If other, specify _____
Was pump installed? ☐ Yes ☒ No
Was well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL
Static water level 23' 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:
30 ft. after 1 hrs. pumping 12 gpm
____ ft. after ____ hrs. pumping ____ gpm
____ ft. after ____ hrs. pumping ____ gpm

9. WELL LOG

Formation	Depth (ft.) From	To
gravely yellow clay	0	5
sandy yellow clay	5	14
hard yellow clay	14	30
shaley sand & gravel	30	36
Gray clay	36	43
very fine gray sand	43	46
Blue Clay	46	50

(Use separate sheet if necessary)

10. DATE COMPLETED 6-17-14

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.
Holbek Well Serv. 701
Driller's or Firm's Name Certificate No.
8353 Hwy 2 Devils Lake
Address
Leo Johnson 6-19-14
Signed by Date

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