

WELL DRILLER'S REPORT

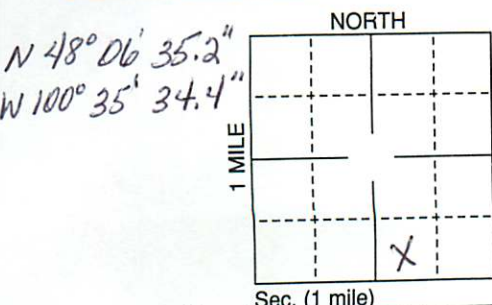
State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

1. WELL OWNER

Name Kasowski Group
Address 194 49th ST N
Karlsruhe, ND 58794

2. WELL LOCATION

Sketch map location must agree with written location.



County Mc Henry
SE 1/4 SW 1/4 SE 1/4 Sec. 32 Twp. 154 N. Rg. 77 W.

3. PROPOSED USE

☒ Domestic ☐ Geothermal ☐ Monitoring
☐ Stock ☐ Irrigation ☐ Industrial
☐ 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 8 inches. Depth 40 feet.

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

If other, specify _____

Pipe Weight: 2.094 lb/ft Diameter: 4 inches From: 0 feet To: 37 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 Stainless Steel Diameter 4 inches

Slot Size 18 set from 33 feet to 37 feet

Slot Size _____ set from _____ feet to _____ feet

Was packer or seal used? ☐ Yes ☐ No

If so, what material #4 Red Flint Depth _____ ft.

Type of well: Straight screen ☐ Gravel packed ☒

Depth grouted: From 0 To 25

Grouting Material: Cement _____ Other Bentonite

If other, explain: E2 Seal Grout

Well head completion: Pitless unit _____

12" above grade yes Other _____

If other, specify _____

Was pump installed? ☐ Yes ☒ No

Was well disinfected upon completion? ☒ Yes ☐ No

7. WATER LEVEL

Static water level 17 feet below surface

If flowing: closed-in pressure _____ psi

GPM flow 20 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 20 gpm

_____ ft. after _____ hrs. pumping _____ gpm

_____ ft. after _____ hrs. pumping _____ gpm

9. WELL LOG

Formation

Depth (ft.)

From To

Top Soil Brn

0 1

Sand Brn

1 37

Clay Gry

37 40

(Use separate sheet if necessary)

10. DATE COMPLETED 4-13-16

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.

Mark J Trout Wills, Inc. 195
Driller's or Firm's Name Certificate No.

141 28th Ave S, Waite Park, MN 56387
Address

Dan Trout 6-2-16
Signed by Date