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DEC 21 2018

STATE WATER COMMISSION

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 _____ Address _____	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 _____																																																																	
2. WELL LOCATION Sketch map location must agree with written location. NORTH Sec. (1 mile) County _____ _____ 1/4 _____ 1/4 _____ 1/4 Sec. _____ Twp. _____ N.Rg _____ W.	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																																																																	
3. PROPOSED USE ☐ Geothermal ☐ Monitoring ☒ Domestic ☐ Irrigation ☐ Industrial ☐ Stock ☐ Municipal ☐ Test Hole	9. WELL LOG <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th rowspan="2">Formation</th><th colspan="2">Depth (ft.)</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>Sand - brown, some loam</td><td>0</td><td>15</td></tr><tr><td>sandy clay brown</td><td>15</td><td>30</td></tr><tr><td>clay brown</td><td>30</td><td>60</td></tr><tr><td>sand brown</td><td>60</td><td>70</td></tr><tr><td>sand-gray</td><td>70</td><td>80</td></tr><tr><td>sand-silty gray</td><td>80</td><td>90</td></tr><tr><td>rocky sand silty</td><td>90</td><td>106</td></tr><tr><td>Clay</td><td>106</td><td>122</td></tr><tr><td>Sand - fine limed dark brown</td><td>122</td><td>147</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td>(Use separate sheet if necessary)</td><td> </td><td> </td></tr></tbody></table>	Formation	Depth (ft.)		From	To	Sand - brown, some loam	0	15	sandy clay brown	15	30	clay brown	30	60	sand brown	60	70	sand-gray	70	80	sand-silty gray	80	90	rocky sand silty	90	106	Clay	106	122	Sand - fine limed dark brown	122	147																															(Use separate sheet if necessary)		
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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 _____ inches. Depth _____ feet. Casing: ☐ Steel ☒ Plastic ☐ Concrete ☐ Threaded ☐ Welded ☐ Other If other, specify _____ Pipe Weight: Diameter: From: To: SDR21 lb/ft- 5 inches 1 foot 150 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 chips 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	10. DATE COMPLETED June 7 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. 81 K&K Well Drilling Driller's or Firm's Name Certificate No. Fryman Address Signed by Date																																																																	