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ND DEPT. OF WATER RESOURCES

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>Ronald Ryglund</u> Address <u>2931 39th Ave. S.E.</u> <u>Mandan, N.D. 58554</u>	7. WATER LEVEL Static water level <u>54</u> 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. GPS _____ EL _____ County <u>McIntosh</u> 1/4 _____ 1/4 <u>NW</u> Sec. <u>32</u> Twp. <u>152</u> N. Rg. <u>89</u> W. NORTH 1 MILE Sec. (1 mile) _____	8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Other <u>Air</u> Pumping level below land surface: <u>80</u> ft. after <u>1</u> hrs. pumping <u>7</u> gpm _____ ft. after _____ hrs. pumping _____ gpm _____ ft. after _____ hrs. pumping _____ gpm																																									
3. PROPOSED USE ☐ Domestic ☐ Geothermal ☐ Monitoring ☐ Stock ☐ Irrigation ☐ Industrial ☒ Municipal ☐ Test Hole	9. WELL LOG <table border="1"><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>Surface</td><td>0</td><td>1</td></tr><tr><td>Yellow clay + Rocks</td><td>1</td><td>27</td></tr><tr><td>Blue clay + Rocks</td><td>27</td><td>57</td></tr><tr><td>COAL</td><td>57</td><td>58</td></tr><tr><td>Clay</td><td>58</td><td>60</td></tr><tr><td>COAL</td><td>60</td><td>61</td></tr><tr><td>Grey clay</td><td>61</td><td>111</td></tr><tr><td>COAL</td><td>111</td><td>114</td></tr><tr><td>Grey clay</td><td>114</td><td>127</td></tr><tr><td>COAL</td><td>127</td><td>132</td></tr><tr><td>Sand</td><td>132</td><td>136</td></tr><tr><td>Grey clay</td><td>136</td><td></td></tr></tbody></table>	Formation	Depth (ft.)		From	To	Surface	0	1	Yellow clay + Rocks	1	27	Blue clay + Rocks	27	57	COAL	57	58	Clay	58	60	COAL	60	61	Grey clay	61	111	COAL	111	114	Grey clay	114	127	COAL	127	132	Sand	132	136	Grey clay	136	
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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 <u>8 3/4</u> inches. Depth <u>136</u> feet. Casing: ☐ Steel ☒ Plastic ☐ Concrete ☐ Threaded ☐ Welded ☐ Other If other, specify _____ Pipe Weight: <u>260</u> lb/ft Diameter: <u>5</u> inches From: <u>Top</u> feet To: <u>136</u> feet ____ lb/ft _____ inches _____ feet _____ feet ____ lb/ft _____ inches _____ feet _____ feet Was perforated pipe used? ☒ Yes ☐ No Perforated pipe set from <u>126</u> ft. to <u>136</u> feet Was casing left open end? ☐ Yes ☒ No Was a well screen installed? ☒ Yes ☐ No Material <u>Plastic</u> Diameter <u>5</u> inches Slot Size <u>1025</u> set from <u>126</u> feet to <u>136</u> 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 <u>2</u> To <u>22</u> Grouting Material: Cement _____ Other <u>Bestonite Chips</u> If other, explain: _____ Well head completion: Pitless unit <u>NO</u> 12" above grade <u>4-5</u> Other _____ If other, specify _____ Was pump installed? ☐ Yes ☒ No Was well disinfected upon completion? ☒ Yes ☐ No																																										
	10. DATE COMPLETED <u>7-12-22</u>																																									
	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. <u>Ilana Mariner Waterwell Service #102</u> Driller's or Firm's Name _____ Certificate No. _____ <u>8810 City Rd 15 W, Minot</u> Address _____ <u>J. L. M.</u> <u>7-30-22</u> Signed by _____ Date _____																																									