



WELL DRILLER'S REPORT  
NORTH DAKOTA BOARD OF WATER WELL CONTRACTORS  
STATE OF NORTH DAKOTA  
SFN 60273 (8/2023)

RECEIVED

JUN 04 2026

ND Board of Water Well Contractors • 1200 Memorial Highway • Bismarck, ND 58504  
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.

|                                                                                                                                                                                                                                                                                                                            |                  |                      |            |                                                                                                                                                             |  |                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------|--|
| <b>WELL OWNER</b>                                                                                                                                                                                                                                                                                                          |                  |                      |            | Was Pump Installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |  |                                       |  |
| Name<br>RYAN HENDRICKSON                                                                                                                                                                                                                                                                                                   |                  |                      |            | Was Well Disinfected Upon Completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                   |  |                                       |  |
| Address                                                                                                                                                                                                                                                                                                                    |                  |                      |            | <b>WATER LEVEL</b>                                                                                                                                          |  |                                       |  |
| <b>WELL LOCATION</b> Sketch map location must agree with written location.                                                                                                                                                                                                                                                 |                  |                      |            | Static Water Level (In Feet) Below Surface<br>P.S. 121'                                                                                                     |  |                                       |  |
|                                                                                                                                                                                                                                                                                                                            |                  | County<br>MORTON     |            | GPS<br>BOTTOM                                                                                                                                               |  | If Flowing, Closed-In Pressure In PSI |  |
|                                                                                                                                                                                                                                                                                                                            |                  | 1/4                  | 1/4        | 1/4                                                                                                                                                         |  |                                       |  |
|                                                                                                                                                                                                                                                                                                                            |                  | Township             | Range      | Section                                                                                                                                                     |  |                                       |  |
| <b>PROPOSED USE</b> 14008226 CBC                                                                                                                                                                                                                                                                                           |                  |                      |            | GPM Flow Through Inch Pipe                                                                                                                                  |  |                                       |  |
| <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Geothermal <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial<br><input checked="" type="checkbox"/> Stock <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Monitoring <input type="checkbox"/> Test Hole |                  |                      |            | Controlled By <input type="checkbox"/> Valve <input type="checkbox"/> Reducers <input type="checkbox"/> Other<br><input type="checkbox"/> If Other, Specify |  |                                       |  |
| <b>METHOD DRILLED</b>                                                                                                                                                                                                                                                                                                      |                  |                      |            | <b>WELL TEST DATA</b>                                                                                                                                       |  |                                       |  |
| <input checked="" type="checkbox"/> Cable <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Forward Rotary <input type="checkbox"/> Reverse Rotary<br><input type="checkbox"/> Bored <input type="checkbox"/> Auger <input type="checkbox"/> If Other, Specify                                           |                  |                      |            | <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Other                                                     |  |                                       |  |
| <b>WATER QUALITY</b> Was a water sample collected for                                                                                                                                                                                                                                                                      |                  |                      |            | Pumping Level Below Land Surface                                                                                                                            |  |                                       |  |
| Chemical Analysis? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                     |                  |                      |            | Feet After 140 Hrs. Pumping 2 hrs GPM 7                                                                                                                     |  |                                       |  |
| Bacteriological Analysis? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                              |                  |                      |            | Feet After Hrs. Pumping GPM                                                                                                                                 |  |                                       |  |
| If So, To What Laboratory Was It Sent? MVTL                                                                                                                                                                                                                                                                                |                  |                      |            | Feet After Hrs. Pumping GPM                                                                                                                                 |  |                                       |  |
| <b>WELL CONSTRUCTION</b>                                                                                                                                                                                                                                                                                                   |                  |                      |            | <b>WELL LOG</b>                                                                                                                                             |  |                                       |  |
| Diameter Of Hole In Inches<br>7 7/8                                                                                                                                                                                                                                                                                        |                  | Depth In Feet<br>178 |            | Formation                                                                                                                                                   |  | Depth (ft.)                           |  |
| Casing:<br><input type="checkbox"/> Steel <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Other<br><input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> If Other, Specify                                                     |                  |                      |            |                                                                                                                                                             |  | From To                               |  |
| Pipe Weight                                                                                                                                                                                                                                                                                                                | Diameter         | From                 | To         | TOP SOIL                                                                                                                                                    |  | 0 2                                   |  |
| lb/ft                                                                                                                                                                                                                                                                                                                      | inches           | feet                 | feet       | GREY CLAY                                                                                                                                                   |  | 2 9                                   |  |
| SCH 40                                                                                                                                                                                                                                                                                                                     | 4                | 0                    | 158        | ROCK / SHALE?                                                                                                                                               |  | 9 11                                  |  |
| lb/ft                                                                                                                                                                                                                                                                                                                      | inches           | feet                 | feet       | BROWN CLAY                                                                                                                                                  |  | 11 25                                 |  |
| lb/ft                                                                                                                                                                                                                                                                                                                      | inches           | feet                 | feet       | GREY CLAY                                                                                                                                                   |  | 25 39                                 |  |
| Was A Well Screen Installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                           |                  |                      |            | SHALE                                                                                                                                                       |  | 39 40                                 |  |
| Was Perforated Pipe Used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                              |                  |                      |            | GREY CLAY                                                                                                                                                   |  | 40 85                                 |  |
| Screen Or Perforation Interval                                                                                                                                                                                                                                                                                             |                  | From In Feet         | To In Feet | HARD SANDY CLAY                                                                                                                                             |  | 85 91                                 |  |
| 16 SLOT                                                                                                                                                                                                                                                                                                                    |                  |                      |            | SAND STONE                                                                                                                                                  |  | 91 93                                 |  |
| Was Casing Left Open End? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                              |                  |                      |            | SANDY CLAY / DARK GREY                                                                                                                                      |  | 93 109                                |  |
| Material                                                                                                                                                                                                                                                                                                                   |                  | Diameter In Inches   |            | SAND STONE                                                                                                                                                  |  | 109 110                               |  |
| PVC                                                                                                                                                                                                                                                                                                                        |                  | 4                    |            | GREY CLAY                                                                                                                                                   |  | 110 141                               |  |
| Slot Size                                                                                                                                                                                                                                                                                                                  | Set From In Feet | To In Feet           |            | SAND STONE                                                                                                                                                  |  | 141 143                               |  |
| 16                                                                                                                                                                                                                                                                                                                         | 158              | 178                  |            | GREY SANDY CLAY                                                                                                                                             |  | 143 161                               |  |
| Slot Size                                                                                                                                                                                                                                                                                                                  | Set From In Feet | To In Feet           |            | SAND STONE                                                                                                                                                  |  | 161 163                               |  |
| Was Packer Or Seal Used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                               |                  |                      |            | GREY CLAY                                                                                                                                                   |  | 163 170                               |  |
| If So, What Material                                                                                                                                                                                                                                                                                                       |                  | Depth In Feet        |            | BLUE BLACK SAND / FINE                                                                                                                                      |  | 170 177                               |  |
|                                                                                                                                                                                                                                                                                                                            |                  |                      |            | CASED                                                                                                                                                       |  | 177 178                               |  |
| Type Of Well <input type="checkbox"/> Straight Screen <input checked="" type="checkbox"/> Gravel Packed #40                                                                                                                                                                                                                |                  |                      |            | Use Separate Sheet If Necessary                                                                                                                             |  |                                       |  |
| Depth Grouted                                                                                                                                                                                                                                                                                                              |                  | From                 | To         | <b>DATE COMPLETED</b>                                                                                                                                       |  |                                       |  |
|                                                                                                                                                                                                                                                                                                                            |                  | 30                   | 0          | <b>WAS WELL PLUGGED OR ABANDONED?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No                                                              |  |                                       |  |
| Grouting Material                                                                                                                                                                                                                                                                                                          |                  | Cement               | Other      | If So, How                                                                                                                                                  |  |                                       |  |
| MEDIUM CHIPS                                                                                                                                                                                                                                                                                                               |                  |                      |            | <b>REMARKS</b>                                                                                                                                              |  |                                       |  |
| If Other, Explain:                                                                                                                                                                                                                                                                                                         |                  |                      |            | GPS 46° 54' 43.9" N<br>101° 00' 24.4" W                                                                                                                     |  |                                       |  |
| Well Head Completion: Pitless Unit YES                                                                                                                                                                                                                                                                                     |                  |                      |            | <b>DRILLER'S CERTIFICATION</b>                                                                                                                              |  |                                       |  |
| 12" Above Grade YES                                                                                                                                                                                                                                                                                                        |                  | Other (Specify)      |            | This well was drilled under my jurisdiction and this report is true to the best of my knowledge.                                                            |  |                                       |  |
| It Other, Specify                                                                                                                                                                                                                                                                                                          |                  |                      |            | Driller's Or Firm's Name<br>Northern Plains Drilling                                                                                                        |  | Certificate Number<br>127             |  |
|                                                                                                                                                                                                                                                                                                                            |                  |                      |            | Address<br>4807 STATE ST SUITE 40                                                                                                                           |  | Date<br>5/27/2026                     |  |
|                                                                                                                                                                                                                                                                                                                            |                  |                      |            | Signed By<br>[Signature]                                                                                                                                    |  |                                       |  |