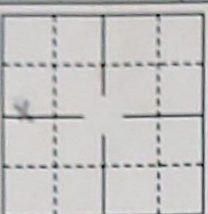




WELL DRILLER'S REPORT
 NORTH DAKOTA BOARD OF WATER WELL CONTRACTORS
 STATE OF NORTH DAKOTA
 SFN 60273 (6/2020)

ND Board of Water Well Contractors • 900 E. Boulevard Ave. - Dept. 770 • Bismarck, ND, 58505-0850
 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.

WELL OWNER		Was Pump Installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																											
Name <u>State of North Dakota</u>		Was Well Disinfected Upon Completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																											
Address <u>Bismarck, ND 58505</u>		WATER LEVEL																											
WELL LOCATION Sketch map location must agree with written location.		Static Water Level (In Feet) Below Surface <u>17</u>																											
	County <u>McLean</u>	GPS																											
	1/4 <u>SW</u>	1/4 <u>SW</u>	1/4 <u>NW</u>																										
	Township <u>150</u>	Range <u>81</u>	Section <u>26</u>																										
PROPOSED USE		WELL TEST DATA																											
<input type="checkbox"/> Domestic <input type="checkbox"/> Geothermal <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Monitoring <input type="checkbox"/> Test Hole		<input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Other <u>Air</u>																											
METHOD DRILLED		Pumping Level Below Land Surface																											
<input type="checkbox"/> Cable <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Forward Rotary <input type="checkbox"/> Reverse Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Auger <input type="checkbox"/> If Other, Specify _____		Feet After <u>45</u>	Hrs. Pumping <u>3</u>																										
WATER QUALITY Was a water sample collected for		Feet After	Hrs. Pumping																										
Chemical Analysis? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			GPM <u>14</u>																										
Bacteriological Analysis? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			GPM																										
If So, To What Laboratory Was It Sent?			GPM																										
WELL CONSTRUCTION		WELL LOG																											
Diameter Of Hole In Inches <u>7 7/8</u>	Depth In Feet <u>47</u>	<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><u>top soil</u></td> <td><u>0</u></td> <td><u>1</u></td> </tr> <tr> <td><u>silt & gravel</u></td> <td><u>1</u></td> <td><u>6</u></td> </tr> <tr> <td><u>tan silt</u></td> <td><u>6</u></td> <td><u>14</u></td> </tr> <tr> <td><u>gray silt</u></td> <td><u>14</u></td> <td><u>18</u></td> </tr> <tr> <td><u>sand & gravel</u></td> <td><u>18</u></td> <td><u>37</u></td> </tr> <tr> <td><u>sand & gravel - washed</u></td> <td><u>37</u></td> <td><u>47</u></td> </tr> <tr> <td><u>gray silt</u></td> <td><u>47</u></td> <td><u>60</u></td> </tr> </tbody> </table>		Formation	Depth (ft.)		From	To	<u>top soil</u>	<u>0</u>	<u>1</u>	<u>silt & gravel</u>	<u>1</u>	<u>6</u>	<u>tan silt</u>	<u>6</u>	<u>14</u>	<u>gray silt</u>	<u>14</u>	<u>18</u>	<u>sand & gravel</u>	<u>18</u>	<u>37</u>	<u>sand & gravel - washed</u>	<u>37</u>	<u>47</u>	<u>gray silt</u>	<u>47</u>	<u>60</u>
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Casing: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Other		Use Separate Sheet If Necessary																											
<input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> If Other, Specify _____																													
Pipe Weight	Diameter	From	To																										
lb/ft <u>5.640</u>	inches <u>4 1/2</u>	feet <u>0</u>	feet <u>37</u>																										
lb/ft <u>5.617</u>	inches <u>4 1/2</u>	feet <u>37</u>	feet <u>47</u>																										
lb/ft	inches	feet	feet																										
Was A Well Screen Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No																													
Was Perforated Pipe Used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																													
Screen Or Perforation Interval	From In Feet	To In Feet																											
	<u>37</u>	<u>47</u>																											
Was Casing Left Open End? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																													
Material <u>P.V.C</u>	Diameter In Inches <u>4 1/2</u>																												
Slot Size <u>020</u>	Set From In Feet <u>37</u>	To In Feet <u>47</u>																											
Slot Size <u>020</u>	Set From In Feet	To In Feet																											
Was Packer Or Seal Used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		DATE COMPLETED <u>7-22-2022</u>																											
If So, What Material	Depth In Feet	WAS WELL PLUGGED OR ABANDONED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																											
		If So, How																											
Type Of Well <input type="checkbox"/> Straight Screen <input checked="" type="checkbox"/> Gravel Packed	REMARKS																												
Depth Grouted	From	To																											
	<u>top</u>	<u>27</u>																											
Grouting Material	Cement	Other																											
If Other, Explain:		DRILLER'S CERTIFICATION																											
Well Head Completion: Pitless Unit		This well was drilled under my jurisdiction and this report is true to the best of my knowledge.																											
12" Above Grade <u>X</u>	Other (Specify)	Driller's Or Firm's Name <u>David Stumvoll</u>	Certificate Number <u>52</u>																										
If Other, Specify		Address <u>2919 17th St NW Cole Harbor, ND 58331</u>	Signed By <u>[Signature]</u>																										
		Date <u>7-22-2022</u>																											

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

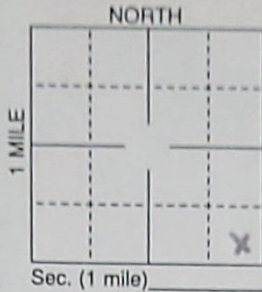
Name David Wilkner
 Address 274 Ave NW
59778

2. WELL LOCATION

Sketch map location must agree with written location.

GPS _____

EL _____



Sec. (1 mile) _____

County McLean
 1/4 SE 1/4 SE 1/4 Sec. 10 Twp. 150 N. Rg. 8 W.

3. PROPOSED USE

- Domestic Geothermal Monitoring
 Stock Irrigation Industrial
 Stock 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 7 7/8 inches. Depth 162 feet.

- Casing: Steel Plastic Concrete
 Threaded Welded Other

If other, specify _____

Pipe Weight: Diameter: From: To:
5.440 lb/ft 4 1/2 inches 0 feet 162 feet
 _____ lb/ft _____ inches _____ feet _____ feet
 _____ lb/ft _____ inches _____ feet _____ feet

Was perforated pipe used? Yes No

Perforated pipe set from 145 ft. to 162 feet

Was casing left open end? Yes No

Was a well screen installed? Yes No

Material P.V.C Diameter 4 1/2 inches

Slot Size 1020 set from 145 feet to 162 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 top To 52

Grouting Material: Cement _____ Other _____

If other, explain: Bentonite clay chips

Well head completion: Pitless unit _____

12" above grade + Other _____

If other, specify _____

Was pump installed? Yes No

Was well disinfected upon completion? Yes No

7. WATER LEVEL

Static water level 113 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 Air

Pumping level below land surface:

_____ ft. after 3 hrs. pumping 142 gpm

_____ ft. after _____ hrs. pumping _____ gpm

_____ ft. after _____ hrs. pumping _____ gpm

9. WELL LOG

Formation	Depth (ft.)	
	From	To
topsoil	0	1
tan till	1	52
Gravel-sand-till	52	78
Gray till	78	147
Broken shale Rock	147	152
Gray clay	152	158
coal	158	159
Gray clay	159	2

(Use separate sheet if necessary)

10. DATE COMPLETED 6-13-2019

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.

Stumvoll Drilling LLC 52
 Driller's or Firm's Name Certificate No.

2919 17th St NW Coleharbor, ND 58531
 Address

David Stumvoll 6-13-2019
 Signed by Date

WELL DRILLER'S REPORT

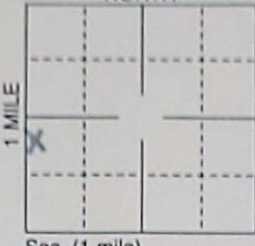
State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

<p>1. WELL OWNER Name <u>David Faulker</u> Address <u>2748 20th Ave NW</u> <u>Ross, ND 58778</u></p>	<p>7. WATER LEVEL Static water level <u>31</u> feet below surface If flowing, closed in pressure _____ psi GPM flow _____ through _____ inch pipe Controlled by <input type="checkbox"/> Valve <input type="checkbox"/> Restrictors <input type="checkbox"/> Other If other, specify _____</p>																																			
<p>2. WELL LOCATION Sketch map location must agree with written location.</p> <div style="text-align: center;"> </div> <p>County <u>McLean</u> <u>NW 1/4 SW 1/4 SW 1/4 Sec. 14 Twp. 150 N. Rg. 21 W.</u></p>	<p>8. WELL TEST DATA <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Other Pumping level below land surface: <u>57</u> ft. after <u>3</u> hrs. pumping <u>15-20</u> gpm _____ ft. after _____ hrs. pumping _____ gpm _____ ft. after _____ hrs. pumping _____ gpm</p>																																			
<p>3. PROPOSED USE</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Geothermal</td> <td><input type="checkbox"/> Monitoring</td> </tr> <tr> <td><input checked="" type="checkbox"/> Stock</td> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Industrial</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Municipal</td> <td><input type="checkbox"/> Test Hole</td> </tr> </table>	<input type="checkbox"/> Domestic	<input type="checkbox"/> Geothermal	<input type="checkbox"/> Monitoring	<input checked="" type="checkbox"/> Stock	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Industrial		<input type="checkbox"/> Municipal	<input type="checkbox"/> Test Hole	<p>9. WELL LOG</p> <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>topsoil</td> <td>0</td> <td>1</td> </tr> <tr> <td>Sand & Gravel</td> <td>1</td> <td>12</td> </tr> <tr> <td>TAN fill</td> <td>12</td> <td>16</td> </tr> <tr> <td>Sand & Gravel</td> <td>16</td> <td>30</td> </tr> <tr> <td>Gray till</td> <td>30</td> <td>47</td> </tr> <tr> <td>washed sand & Gravel</td> <td>47</td> <td>58</td> </tr> <tr> <td>Gray till</td> <td>58</td> <td>66</td> </tr> </tbody> </table> <p style="text-align: center;">(Use separate sheet if necessary)</p>	Formation	Depth (ft.)		From	To	topsoil	0	1	Sand & Gravel	1	12	TAN fill	12	16	Sand & Gravel	16	30	Gray till	30	47	washed sand & Gravel	47	58	Gray till	58	66
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<p>5. WATER QUALITY Was a water sample collected for: Chemical Analysis? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Bacteriological Analysis? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, to what laboratory was it sent? _____</p>	<p>11. WAS WELL PLUGGED OR ABANDONED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, how _____</p>																																			
<p>6. WELL CONSTRUCTION Diameter of hole <u>7 7/8</u> inches. Depth <u>59</u> feet. Casing: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Other If other, specify _____</p> <p>Pipe Weight: _____ lb/ft Diameter: <u>4 1/2</u> inches From: <u>0</u> feet To: <u>59</u> feet _____ lb/ft _____ inches _____ feet _____ feet _____ lb/ft _____ inches _____ feet _____ feet</p> <p>Was perforated pipe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Perforated pipe set from <u>47</u> ft. to <u>59</u> feet Was casing left open end? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was a well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Material <u>P.O.C</u> Diameter <u>4 1/2</u> inches Slot Size <u>.020</u> set from <u>47</u> feet to <u>59</u> feet Slot Size _____ set from _____ feet to _____ feet Was packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, what material _____ Depth _____ ft.</p> <p>Type of well: Straight screen <input type="checkbox"/> Gravel packed <input checked="" type="checkbox"/> Depth grouted: From <u>top</u> To <u>30</u> Grouting Material: Cement _____ Other _____ If other, explain: <u>Bentonite clay chips</u> Well head completion: Pitless unit _____ 12" above grade <u>+</u> Other _____ If other, specify _____</p> <p>Was pump installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>12. REMARKS:</p>																																			
<p>13. DRILLER'S CERTIFICATION This well was drilled under my jurisdiction and this report is true to the best of my knowledge.</p> <p><u>Stumvoll Drilling LLC</u> Certificate No. <u>52</u> Driller's or Firm's Name <u>2919 17th St NW, Casselton, ND</u> Address <u>David Stumvoll</u> 6-14-2019 Signed by Date</p>																																				

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.

<p>1. WELL OWNER Name <u>David Faulkner</u> Address <u>2748 20th Ave NW</u> <u>RUSO, ND 58778</u></p>	<p>7. WATER LEVEL Static water level <u>35</u> feet below surface If flowing: closed-in pressure _____ psi GPM flow _____ through _____ inch pipe Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Reducers <input type="checkbox"/> Other If other, specify _____</p>																							
<p>2. WELL LOCATION Sketch map location must agree with written location.</p> <p>GPS _____ _____ EL _____</p> <p style="text-align: center;">NORTH</p> <p style="text-align: center;">1 MILE</p>  <p style="text-align: center;">Sec. (1 mile) _____</p> <p>County <u>McLean</u> <u>NW 1/4 NW 1/4 SW 1/4 Sec. 14 Twp. 150 N. Rg. 81 W.</u></p>	<p>8. WELL TEST DATA <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Other <u>Air</u> Pumping level below land surface: <u>53</u> ft. after <u>3</u> hrs. pumping <u>8+</u> gpm _____ ft. after _____ hrs. pumping _____ gpm _____ ft. after _____ hrs. pumping _____ gpm</p>																							
<p>3. PROPOSED USE <input checked="" type="checkbox"/> Domestic <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Geothermal <input type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Monitoring <input type="checkbox"/> Industrial <input type="checkbox"/> Test Hole</p>	<p>9. WELL LOG</p> <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><u>topsoil</u></td> <td style="text-align: center;"><u>0</u></td> <td style="text-align: center;"><u>1</u></td> </tr> <tr> <td><u>sand & gravel</u></td> <td style="text-align: center;"><u>1</u></td> <td style="text-align: center;"><u>18</u></td> </tr> <tr> <td><u>loose till</u></td> <td style="text-align: center;"><u>18</u></td> <td style="text-align: center;"><u>46</u></td> </tr> <tr> <td><u>sand & gravel</u></td> <td style="text-align: center;"><u>46</u></td> <td style="text-align: center;"><u>54</u></td> </tr> <tr> <td><u>Boulders</u></td> <td style="text-align: center;"><u>54</u></td> <td style="text-align: center;"><u>60</u></td> </tr> <tr> <td><u>till</u></td> <td style="text-align: center;"><u>54</u></td> <td style="text-align: center;"><u>60</u></td> </tr> </tbody> </table>	Formation	Depth (ft.)		From	To	<u>topsoil</u>	<u>0</u>	<u>1</u>	<u>sand & gravel</u>	<u>1</u>	<u>18</u>	<u>loose till</u>	<u>18</u>	<u>46</u>	<u>sand & gravel</u>	<u>46</u>	<u>54</u>	<u>Boulders</u>	<u>54</u>	<u>60</u>	<u>till</u>	<u>54</u>	<u>60</u>
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