

SOUTH DAKOTA WATER WELL COMPLETION REPORT

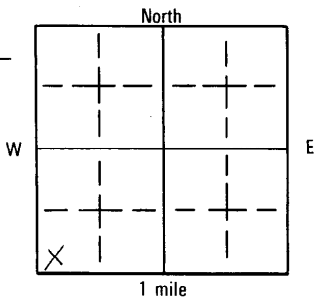
10-85

Location S4 1/4 W 1/4 Sec 15 Twp 115 Rg 64

County

Spink

Please mark well location with an "X"

Well Completion Date June 1 1987

PROPOSED USE:

☒ Domestic ☐ Municipal ☐ Test Holes
☐ Irrigation ☐ Industrial ☐ Stock

Method of Drilling:

forward rotary

CASING DATA:

☐ Steel ☒ Plastic ☐ Other

If other describe _____

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
_____ LB/FT	<u>5</u> IN	_____ FT	_____ FT	<u>10</u> IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN

GROUT:

Was the well grouted? ☒ YES ☐ NOTo what depth? 61 FEETWhat is grouting material? mud & bentonite

If cement, number of sacks? _____

Describe grouting procedure _____

What was grout weight? _____ LB/GAL

SCREEN: ☐ Perforated pipe ☐ ManufacturedDiameter 5 IN Length 20 FEETMaterial plastic

Slot Size _____ Set From _____ Feet To _____ Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Other information _____

Was a packer or seal used? ☐ YES ☒ NO

If so, what material? _____

Describe packer(s) and location? _____

Was well disinfected upon completion? ☐ YES ☐ NO

Explain _____

Bacteriological analysis ☐ YES ☐ NO

Laboratory sent to _____

Well Owner:

Name Elton V. MillerAddress Tulsa, South Dakota 57476

Well Log:

Depth

Formation

From

To

<u>yellow clay</u>	<u>0</u>	<u>40'</u>
<u>blue clay</u>	<u>40'</u>	<u>60'</u>
<u>sand</u>	<u>60'</u>	<u>85'</u>
<u>shale</u>	<u>85'</u>	<u>100'</u>

well 81 ft.30 ft. perforation
gravel packed

STATIC WATER LEVEL _____ Feet

If flowing: closed in pressure _____ PSI

GPM flow _____ through _____ inch pipe

Controlled by ☐ Valve ☐ Reducers ☐ Other

If other, specify _____

Can well be completely shut in? _____

WELL TEST DATA:

☐ Pumped☐ Bailed

Describe: _____

☐ Other

Pumping Level Below Land Surface

_____ ft. After _____ Hrs. pumped _____ GPM

_____ ft. After _____ Hrs. pumped _____ GPM

_____ ft. After _____ Hrs. pumped _____ GPM

REMARKS:

This well was drilled under license # 188

And this report is true and accurate.

Drilling firm Caryl Larsen Well Drilling

Signature of License Representative:

Caryl Larsen

Signature of Well Owner:

Date _____

7-8-87