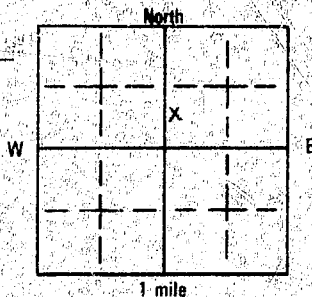


SOUTH DAKOTA WATER WELL COMPLETION REPORT

10-85

Location SW 1/4 Sec 11 Twp 7 S Rg 5 ECounty Fall River

Please mark well location with an "X"



Well Completion Date _____

PROPOSED USE

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

Method of Drilling:

Rotary Drill

CASING DATA:

☐ Steel ☒ Plastic ☐ Other

If other, describe _____

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
LB/FT <u>5" ID IN</u>	<u>0</u> FT <u>60</u> FT	<u>7 7/8</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? See Site FEET

What is grouting material? _____

If cement, number of sacks? 2

Describe grouting procedure _____

What was grout weight? _____ LB/GAL

SCREEN: ☒ Perforated pipe ☐ ManufacturedDiameter 5" ID IN Length 20 FEET

Material _____

Slot Size 3/8" Set From 35 Feet To 60 Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Other information _____

Was a packer or seal used? ☒ YES ☐ NOIf so, what material? RubberDescribe packer(s) and location? 34"Set at 30'Was well disinfected upon completion? ☒ YES ☐ NOExplain ChlorineBacteriological analysis ☒ YES ☐ NOLaboratory sent to Dept. of Water & Natural Resources

Well Owner:

Name Corp of EngineersAddress Hot Springs, SD

Well Log: _____ Depth _____

Formation _____ From _____ To _____

5" casingPACKER ENVELOPE 0 1530'Light grey SS 40 60at 260' Hard lime 60 65DRILL hole 5"STATIC WATER LEVEL 41' 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☐ BailedDescribe: Air Lifted☒ Other

Pumping Level Below Land Surface

60 ft. After 1 Hrs. pumped 20 GPM

_____ ft. After _____ Hrs. pumped _____ GPM

_____ ft. After _____ Hrs. pumped _____ GPM

REMARKS:

This well was drilled under license # 311

And this report is true and accurate.

Drilling firm Komes Drilling

Signature of License Representative: _____

Signature of Well Owner: _____

Date 27 April 1988

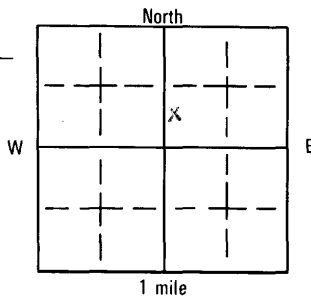
7-6-88

SOUTH DAKOTA WATER WELL COMPLETION REPORT

10-85

Location SW 1/4 Sec 11 Twp 7 S Rg 5 ECounty Butte

Please mark well location with an "X"



Well Completion Date _____

PROPOSED USE:

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

Method of Drilling: Hand Drilled

CASING DATA:

- ☐ Steel ☒ Plastic ☐ Other

If other describe _____

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ 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? 20 FEET

What is grouting material? _____

If cement, number of sacks? 2

Describe grouting procedure _____

What was grout weight? _____ LB/GAL

SCREEN: ☒ Perforated pipe ☐ ManufacturedDiameter _____ IN Length 20 FEET

Material _____

Slot Size _____ Set From 35 Feet To 10 Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Slot Size _____ Set From _____ Feet To _____ Feet

Other information _____

Was a packer or seal used? ☐ YES ☐ NOIf so, what material? PackerDescribe packer(s) and location? 5'Was well disinfected upon completion? ☒ YES ☐ NO

Explain _____

Bacteriological analysis ☒ YES ☐ NOLaboratory sent to DEPT. OF WATER & NATURAL RESOURCES

Well Owner:

Name CRD BrookAddress 417 Spruce St

Well Log:

Depth

Formation

From

To

2' sand		
3' gravel	0	15
4' sand		
5' sand		
6' sand		
7' sand		
8' sand		
9' sand		
10' sand		
11' sand		
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97' sand		
98' sand		
99' sand		
100' sand		

STATIC WATER LEVEL 41' 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☐ BailedDescribe: 1/2" 6' 10' 5'☒ Other

Pumping Level Below Land Surface

60 ft. After 1 Hrs. pumped 20 GPM

_____ ft. After _____ Hrs. pumped _____ GPM

_____ ft. After _____ Hrs. pumped _____ GPM

REMARKS:

This well was drilled under license # 311

And this report is true and accurate.

Drilling firm Komax Drilling

Signature of License Representative: _____

Signature of Well Owner: _____

Date 27 April 1988

7-6-88