504

SOUTH DAKOTA WATER WELL COMPLETION REPORT

10-85

SW¼ NW¼

Location ___ ¼ ___ ¼ Sec 36 Twp 6N Rg 4E

SE¼ NW¼

County Lawrence

Please mark well location with an "X"

North / W / E / 1 mile

Well Completion Date 12-22-87

Well Owner:

Name Steve Jensen

Address RR2 Box 130456A

Well Log: Struggs 50

Formation	Depth From	Depth To
Spearfish w/ Gyp Stringers	0	345
Minnekahta Limestone	345	380
Lost Circ. 80' to T.D.		

PROPOSED USE:

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

Method of Drilling: Air Rotary

CASING DATA:

☐ Steel ☒ Plastic ☐ Other

If other describe ___

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
160 LB/FT	4 IN	15 FT	380 FT	6¼ IN
160 LB/FT	5 IN	0 FT	15 FT	12¼ IN
___ LB/FT	___ IN	___ FT	___ FT	___ IN
___ LB/FT	___ IN	___ FT	___ FT	___ IN

STATIC WATER LEVEL 0 Feet

If flowing: closed in pressure 2 PSI

GPM flow 25 through 1¼ inch pipe

Controlled by ☒ Valve ☐ Reducers ☐ Other

If other; specify ___

Can well be completely shut in? Yes

GROUT:

Was the well grouted? ☒ YES ☐ NO

To what depth? 340 FEET

What is grouting material? Cement

If cement, number of sacks? 25

Describe grouting procedure Pumped through trenne pipe

What was grout weight? 6 gal / sack LB/GAL

WELL TEST DATA:

☐ Pumped Flows 25 gpm

☐ Bailed Describe ___

☒ Other ___

Pumping Level Below Land Surface

___ ft. After ___ Hrs. pumped ___ GPM

___ ft. After ___ Hrs. pumped ___ GPM

___ ft. After ___ Hrs. pumped ___ GPM

SCREEN: ☒ Perforated pipe ☐ Manufactured

Diameter 4" IN Length 40 FEET

Material PVC

Slot Size 1/8x6 Set From 340 Feet To 380 Feet

Slot Size ___ Set From ___ Feet To ___ Feet

Slot Size ___ Set From ___ Feet To ___ Feet

Other information ___

REMARKS:

MINNEKAHTA

JAN 1988 DIVISION OF WATER RIGHTS Pierre, SD

Was a packer or seal used? ☒ YES ☐ NO

If so, what naterial? Rubber

Describe packer(s) and location? Cement packer @ 340

This well was drilled under license # 504

And this report is true and accurate.

Drilling firm Great West Pump

Signature of License Representative: [signature]

Signature of Well Owner: Steve J Jensen

Date 2/17/88

Was well disinfected upon completion? ☒ YES ☐ NO

Explain HTH Tablets

Bacteriological analysis ☐ YES ☐ NO

Laboratory sent to ___