

SOUTH DAKOTA WATER WELL COMPLETION REPORT

11-02

Location NE $\frac{1}{4}$ NE $\frac{1}{4}$ Sec 4 Twp 6N Rg 2EWell Owner: Casey & Ashley GoodrichCounty Lawrence

Business Name: _____

Address: 558 Knoll RoadCity, State, Zip: Spearfish, SD 57783

County

North

Please mark well location with an "X"

W

E

Well completion Date

11-1-21

1 Mile

Distance to nearest potential pollution source (Septic tank, abandoned well, feed lot, etc.)

? _____ ft. from _____ (identify source)

PROPOSED USE:

☒ Domestic/Stock ☐ Municipal ☐ Business ☐ Test Holes
☐ Irrigation ☐ Industrial ☐ Institutional ☐ Monitoring well

METHOD OF DRILLING:

Cable Tool / Mud Rotary

CASING DATA:

☒ Steel ☐ Plastic ☐ Other

If other describe _____

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
<u>56</u> LB/FT	<u>8</u> IN	<u>12</u> FT	<u>25</u> FT	<u>8 3/4</u> IN
<u>12</u> LB/FT	<u>8 1/2</u> IN	<u>18</u> FT	<u>320</u> FT	<u>8</u> IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN

GROUTING DATA:

Grout Type	No. of Sacks	Grout Weight	From	To
<u>Cement</u>	<u>4.5</u>	<u>Gal</u>	<u>0</u> Ft	<u>240</u> Ft
		Lb/gal	Ft	Ft

Describe grouting procedure pumped

SCREEN:

☒ Perforated pipe ☐ Manufactured
Diameter 5 1/2 Inches Length 55 FeetMaterial SteelSlot Size 033 Set From 265 Feet to 320 Feet

Other information _____

WAS A PACKER OR SEAL USED?

☒ Yes ☐ No

If so, what material?

Describe packer(s) and location Bentonite on top of Gravel pack

DISINFECTION: Was well disinfected upon completion?

☒ Yes, How? Chlorine
☐ No, Why Not? tabs

Lab sample sent to for water quality analysis _____

WELL LOG:

DEPTH

FORMATION	FROM	TO
Top Soil	0	9
Sand & Gravel	9	74
Spearfish Wapsum	74	265
Stringers	265	318
Minnetanka		

STATIC WATER LEVEL

0

FEET

If flowing: closed in pressure

6

PSI

GPM flow

up to 50 gpm Seasonal

Controlled by

☐ Valve☐ Reducers☐ Other

Reduced flow rate

Flow

GPM

Can well be completely shut in?

Flowing Well spool Pitless adpt

WELL TEST DATA:

☐ Pumped Describe: Air 35 gpm From
☐ Bailed

☒ Other 250 ft

Pumping Level Below Land Surface

Ft. After _____

Hrs. pumped _____

GPM

Ft. After _____

Hrs. pumped _____

GPM

If pump installed, pump rate: _____

GPM

REMARKS

This well was drilled under license # 1603

And this report is true and accurate.

Drilling firm: Fertiller DrillingSignature of License Representative: Greg FertillerSignature of Well Owner or Equitable Property Holder: Casey Goodrich

Date: _____

523 E Capitol Ave.

Pierre SD 57501

RECEIVED

FEB 02 2022

WATER RIGHTS PROGRAM

Please return WHITE COPY to: DENR Water Rights