

SOUTH DAKOTA WATER WELL COMPLETION REPORT

2024

Location <u>SW 1/4 SW 1/4</u> Sec <u>04</u> Twp <u>2N</u> Rg <u>8E</u>		Well Owner: <u>Summer Jakopak</u>	
County <u>Meads</u>		Business Name: _____	
GPS Coordinates		Address: <u>14414 224th St</u>	
Lat: _____		City, State, Zip: <u>Rapid City SD 5770</u>	
Lon: _____		WELL LOG:	
Please mark well location with an "X" on section grid		DEPTH	
Well completion Date <u>11-25-25</u>		FORMATION	
Distance from nearest potential pollution source (Septic tank, abandoned well, feed lot, etc.) <u>300</u> ft. from <u>Septic</u> (identify source)		FROM TO	
PROPOSED USE:		Till / Gravel 0 30	
☒ Domestic/Stock ☐ Municipal ☐ Business ☐ Monitoring Well		Shale 30 705	
☐ Irrigation ☐ Industrial ☐ Institutional ☐ Test Hole		Green Horn 705 770	
☐ Dewatering Well ☐ Geothermal ☐ Other _____		Shale 770 1430	
METHOD OF DRILLING: <u>Mud Rotary</u>		Sand 1430 1470	
CASING DATA: ☒ Steel ☐ Plastic ☐ Other		Shale 1470 1775	
If other describe _____		Fall River / Tynan Ken Sand 1775 2100	
PIPEWEIGHT DIAMETER FROM TO HOLE DIAMETER		Morrison 2100 2177	
<u>4.5</u> LB/FT <u>10 3/4</u> IN <u>0</u> FT <u>40</u> FT <u>12 1/4</u> IN			
<u>15.5</u> LB/FT <u>5 1/2</u> IN <u>0</u> FT <u>2145</u> FT <u>7 7/8</u> IN			
GROUTING DATA:			
Grout Type No. of Sacks Grout Weight From To			
<u>Cement</u> <u>9</u> <u>Lb/gal</u> <u>0</u> Ft <u>40</u> Ft			
<u>Cement</u> <u>395</u> <u>Lb/gal</u> <u>10</u> Ft <u>2145</u> Ft			
Describe grouting procedure _____			
SCREEN: ☐ Perforated pipe ☐ Manufactured		STATIC WATER LEVEL <u>210</u> FEET	
Diameter _____ Inches Length _____ Feet		If flowing: closed in pressure _____ PSI	
Material _____		GPM flow _____ through _____ Inch pipe	
Slot Size _____ Set From _____ Feet to _____ Feet		Controlled by ☐ Valve ☐ Reducers ☐ Other _____	
Other information _____		Reduced flow rate _____ GPM	
WAS A PACKER OR SEAL USED? ☐ Yes ☒ No		Can well be completely shut in? _____	
If so, what material? _____		RECEIVED	
Describe packer(s) and location _____		FEB 02 2026	
DISINFECTION: Was well disinfected upon completion?		OFFICE OF WATER	
☐ Yes, How? <u>Not completed</u>		WELL TEST DATA:	
☒ No, Why Not? _____		☐ Pumped Describe: _____	
Lab sample sent to for water quality analysis <u>Mid cont TEST B.C.</u>		☐ Bailed ☒ Air _____	
		☐ Other _____	
		Pumping Level Below Land Surface	
		<u>580</u> Ft. After <u>1</u> Hrs. pumped <u>10</u> GPM	
		<u>720</u> Ft. After <u>10</u> Hrs. pumped <u>30</u> GPM	
		If pump installed, pump rate: _____ GPM	
		REMARKS <u>Electronically Perforated.</u>	
		<u>1973 - 1985 4 shots port</u>	
		This well was drilled under license # <u>739</u>	
		And this report is true and accurate.	
		Drilling firm: <u>Rapid Drilling LLC</u>	
		Signature of License Representative: _____	
		Signature of Well Owner or Equitable Property Holder: _____	
		Date: <u>11/26/25</u>	

Please return White Copy to DANR Water Rights 523 E. Capitol Ave., Pierre SD 57501