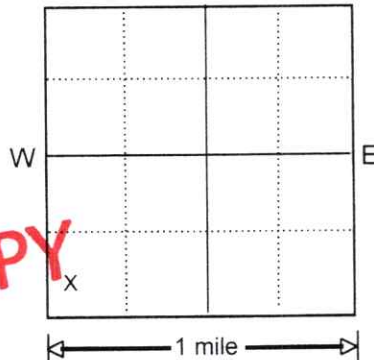


SOUTH DAKOTA WELL REHABILITATION REPORT

11-02

Location SW 1/4 SW 1/4 Sec 36 Twp 1N Rg 3ECounty Pennington

North

Please mark well
location with an "X"

Well owner:

Name Chris PowellAddress PO Box 113City, State, Zip Hill City SD 57745Describe original construction if possible.
(Attach original log if available)

Hard Black Schist	190-245
Fracture 30 gpm	245-247
Hard Black Schist	247-260

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MAR 16 2026

OFFICE OF
WATERRehabilitation Completion Date 1-15-2026

PROPOSED USE:

☒ Domestic	☐ Municipal	☐ Stock
☐ Irrigation	☐ Industrial	

Description of condition of well before rehabilitation:

190 feet deep with a trace of water

Description of rehabilitation work completed:

Deepened with 5" bit from 190 ft to 260 ft with well producing 30 gpm.

Recasing information: Material _____ Diameter _____ Inches Depth _____ Feet

Describe screen or perforations _____ Screen Location From _____ To _____
From _____ To _____Grout: ☐ YES Describe grouting
 ☒ NO procedure and grout:Well Test Data: Specific capacity 30 Static water level 15
If a flowing well _____ GPM Shut in _____ PSIThis well rehabilitation was completed under license # 324 and this report is true and accurate.Drilling firm: Alexander Drilling, Inc

Signature of Licensed Representative:

Signature of Well Owner: _____

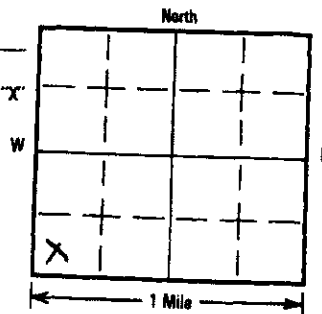
Date: _____

SOUTH DAKOTA WATER WELL COMPLETION REPORT

07-92

Location SW 1/4 SW 36 Twp 1N Rg 3ECounty Penn

Please mark well location with an "X"

Well Completion Date May 29 - 1995

LOCATION:

Distance from nearest potential pollution source (septic tank, abandoned well, feed lot, etc.)? 200 ft. from Septic Tank (identify source).

PROPOSED USE:

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

METHOD OF DRILLING:

AIR ROTARY

CASING DATA:

☐ Steel ☒ Plastic ☐ Other

If other describe _____

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
<u>180</u> LB/FT	<u>6</u> IN	<u>0</u> FT	<u>38</u> FT	<u>8 1/2</u> IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN

GROUTING DATA

Grout Type	No. of Sacks	Grout Weight	From	To
<u>TYPE II</u>	<u>9</u>	<u>14.5</u> lb./gal	<u>38</u> ft	<u>6</u> ft
_____	_____	_____ lb./gal	_____ ft	_____ ft

Describe grouting procedure pumped cement down trench tube from bottom upSCREEN: ☐ Perforated pipe ☐ Manufactured

Diameter _____ IN Length _____ FEET

Material _____

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? Flanged Rubber 38 ft

DISINFECTION:

Was well disinfected upon completion? ☒ YES, How: Chlorine solution
☐ NO, Why Not? _____

Laboratory sent to for water quality analysis _____

Well Owner: GARY SKENDZEL

Business Name: _____

Address: 1017 2ND ST. PO Box 1349
Berthoud Colo 80513

WELL LOG:

FORMATION	DEPTH	
	FROM	TO
<u>topsoil</u>	<u>0</u>	<u>1</u>
<u>micaceous schist</u>	<u>1</u>	<u>190</u>

RECEIVED

MAR 16 2026

OFFICE OF
WATERSTATIC WATER LEVEL 15 Feet

If flowing: closed in pressure _____ PSI

GPM flow _____ through _____ inch pipe

Controlled by ☐ Valve ☐ Reducers ☐ Other _____

Reduced Flowrate _____ GPM

Can well be completely shut in? _____

WELL TEST DATA:

☐ Pumped Describe: Blow with air☐ Bailed _____☒ Other _____

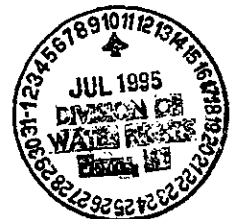
Pumping Level Below Land Surface

190 ft. After 1 Hrs. pumped 37 GPM

_____ ft. After _____ Hrs. pumped _____ GPM

If pump installed, pump rate _____ GPM

REMARKS

This well was drilled under license # 171

And this report is true and accurate.

Drilling firm Hamm Drilling

Signature of License Representative:

Douglas Hamm

Signature of Well Owner or Equitable Property Holder:

[Signature]Date: 6-16-95