

USE TYPEWRITER OR
BALLPOINT PEN
POSTED

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER <u>F L A M A N D</u> Name <u>DUSTY FLAMMANN</u> Address <u>P.O. Box 458</u> <u>Spirit Lake, IA</u> Owner's Permit No. <u>95-87-N-13</u>	7. WATER LEVEL Static water level <u>110</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ of. Quality _____ <i>Describe artesian or temperature zones below.</i>																																																																						
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td>8 GPM</td> <td>485'</td> <td>6</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	8 GPM	485'	6																																																																
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>8"</td> <td>0</td> <td>25</td> <td>TOP SOIL CLAY</td> <td></td> <td></td> </tr> <tr> <td></td> <td>25</td> <td>110</td> <td>HARD BASALT</td> <td></td> <td></td> </tr> <tr> <td></td> <td>110</td> <td>115</td> <td>SOFT SPOT BASALT</td> <td></td> <td></td> </tr> <tr> <td></td> <td>115</td> <td>175</td> <td>HARD BASALT</td> <td></td> <td></td> </tr> <tr> <td></td> <td>175</td> <td>180</td> <td>BROKEN BASALT & CLAY</td> <td></td> <td></td> </tr> <tr> <td></td> <td>180</td> <td>350</td> <td>BROWN CLAY</td> <td></td> <td></td> </tr> <tr> <td></td> <td>350</td> <td>470</td> <td>DECOMP. SHALE & CLAY MIX</td> <td></td> <td></td> </tr> <tr> <td></td> <td>470</td> <td>485</td> <td>HARD SHALE</td> <td></td> <td></td> </tr> <tr> <td></td> <td>485</td> <td>460</td> <td>SOFT BROKEN SHALE</td> <td></td> <td></td> </tr> <tr> <td></td> <td>460</td> <td>485</td> <td>HARD SHALE</td> <td></td> <td></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	8"	0	25	TOP SOIL CLAY				25	110	HARD BASALT				110	115	SOFT SPOT BASALT				115	175	HARD BASALT				175	180	BROKEN BASALT & CLAY				180	350	BROWN CLAY				350	470	DECOMP. SHALE & CLAY MIX				470	485	HARD SHALE				485	460	SOFT BROKEN SHALE				460	485	HARD SHALE		
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	RECEIVED SEP 9 1987 Department of Water Resources Northern District Office																																																																						
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>1250 inches</td> <td>6"</td> <td>11 1/2 feet</td> <td>443 1/2 feet</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number <u>60</u> perforations <u>425</u> feet <u>485</u> feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>250'</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent _____ Weld ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	1250 inches	6"	11 1/2 feet	443 1/2 feet													RECEIVED SEP 17 1987 Department of Water Resources																																																		
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6. LOCATION OF WELL Sketch map location <u>Microfilm</u> _____ Subdivision <u>17198</u> <u>Shippen</u> <u>Addition</u> Lot No. <u>344</u> Block No. _____ County <u>Rootenay</u> <u>SW</u> 1/4 <u>NE</u> 1/4 Sec. <u>17</u>, T. <u>50</u> N., R. <u>3</u> E., S. <u>10</u>	10. Work started <u>8-3-87</u> finished <u>9-2-87</u>																																																																						
11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H2O well Services</u> Firm No. <u>448</u> Address <u>582 Raymond Ave</u> Date <u>9-2-87</u> <u>H. L. Shabo</u> Signed by (Firm Official) <u>John Wheeler</u> and _____ (Operator) <u>William L. Shabo</u>	11.																																																																						

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT