



WELL DRILLER'S REPORT 75272

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 Name <u>Dick Diteaman</u> Address <u>East Fall's Island</u> Owner's Permit No. <u>95-89-N-61</u>	7. WATER LEVEL Static water level <u>275</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 <u>cold</u> OF. Quality <u>good</u> Describe artesian or temperature zones below.																																							
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;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>20</u></td> <td style="text-align: center;"><u>64 ft</u></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>20</u>	<u>64 ft</u>																																		
Discharge G.P.M.	Pumping Level	Hours Pumped																																						
<u>20</u>	<u>64 ft</u>																																							
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>10"</td> <td>1</td> <td>40</td> <td>Cemented Sand gravel</td> <td></td> <td>☒</td> </tr> <tr> <td>6"</td> <td>40</td> <td>240</td> <td>Sand gravel</td> <td></td> <td>☒</td> </tr> <tr> <td>6"</td> <td>240</td> <td>270</td> <td>Boulders</td> <td></td> <td>☒</td> </tr> <tr> <td>6"</td> <td>270</td> <td>315</td> <td>Sand gravel</td> <td>☒</td> <td></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	10"	1	40	Cemented Sand gravel		☒	6"	40	240	Sand gravel		☒	6"	240	270	Boulders		☒	6"	270	315	Sand gravel	☒						
Bore Diam.	Depth		Material	Water																																				
	From	To		Yes	No																																			
10"	1	40	Cemented Sand gravel		☒																																			
6"	40	240	Sand gravel		☒																																			
6"	240	270	Boulders		☒																																			
6"	270	315	Sand gravel	☒																																				
4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	RECEIVED OCT 29 1991 NORTHERN REGION I.D.W.R. OFFICE USE ONLY Inspected by <u>[Signature]</u> Twp. <u>51N</u> Rge. <u>4W</u> Sec. <u>30</u> <u>1/4 NE 1/4 SE 1/4</u>																																							
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><u>250</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>270</u> feet</td> </tr> <tr> <td><u>250</u> inches</td> <td><u>5</u> inches</td> <td><u>275</u> feet</td> <td><u>320</u> 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 <u>5/32</u> inches by <u>4</u> inches <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>5' 40</u> perforations</td> <td><u>275</u> feet</td> <td><u>315</u> feet</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> 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>20</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding 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	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>270</u> feet	<u>250</u> inches	<u>5</u> inches	<u>275</u> feet	<u>320</u> feet													Number	From	To	<u>5' 40</u> perforations	<u>275</u> feet	<u>315</u> feet										10. Work started <u>Aug 1 PM</u> finished <u>Sept 25 PM</u>
Thickness	Diameter	From	To																																					
<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>270</u> feet																																					
<u>250</u> inches	<u>5</u> inches	<u>275</u> feet	<u>320</u> feet																																					
Number	From	To																																						
<u>5' 40</u> perforations	<u>275</u> feet	<u>315</u> feet																																						
6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. Subdivision Name _____ MICROFILMED Lot No. _____ Block No. <u>4</u> 1998 County <u>Nebraska</u> 30 <u>NE 1/4 SE 1/4</u> Sec. <u>30</u> T. <u>54</u> N. R. <u>4</u> E. W.	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>ATLAS Drilling</u> Firm No. <u>466</u> Address <u>Box 1864 Co. Ia</u> Date <u>Sept 26</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>																																							

ISAKSON P-7050-30-041-AA

