

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
_____ 1/4 _____ 1/4 _____ 1/4
Lat: _____ Long: _____

MAY 27 1997

1. DRILLING PERMIT NO. 92-92-N-0009 -
NORTHERN REGION

2. OWNER: ^{IDWN}
Name Robert A Bialenberg
Address Rt 2 Box 16A
City Genesee State 10 Zip 83837

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
 W E S
 Twp. 37 North ☒ or South ☐
 Rge. 05 East ☐ or West ☒
 Sec. 24 NE 1/4 NW 1/4 SE 1/4 SW 1/4
 Gov't Lot _____ County NEE PERCE
 Lat: _____ Long: _____
 Address of Well Site 100' off
Barker Rd. City Gravesend
 (Give at least name of road + Distance to Road or Landmark)
 Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

SEA/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	50	10 Sacks	Dry Pan

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 50' / 100'

Was drive shoe seal tested? ☒ Y ☐ N How? AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	+2	50	12.5	Steel	☒	☐	☒	☐
6"	-10	100	12.5	Steel	☒	☐	☒	☐
4 1/2"	-6	115		PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

* Perforations Method Skull Saw

Screens	Screen Type
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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97	97
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99	99
100	100

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
125	1105	6/16	60	4 1/2	DC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

50 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 155 ft. Describe access port or control devices: Removable N.H. Co.

11. WELL TESTS:

☐ Pump ☐ Bailer

Yield gal./min.	Drawdown	Pumping Level	Time
100		155	2 hr

Water Temp. 51° Bottom hole temp. 51°

Water Quality test or comments: Clear, Cold

Depth first Water Encountered 85'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name Byars, Well Drilling Firm No. 603

Firm Official [Signature] Date 5-16-92

and

(Sign once if Firm Official & Operator)

NENW 24 37N 5W