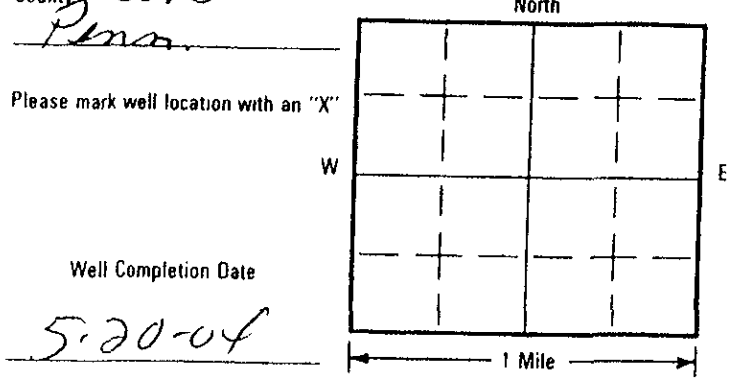


381-5998

# SOUTH DAKOTA WATER WELL COMPLETION REPORT

341-5998 07-92

Location S 4 SW 1/4 Sec 14 Twp \_\_\_\_\_ Rg \_\_\_\_\_  
County Pot 3



Well Owner: Newey Clemmens  
 Business Name: LKS Building Systems  
 Address: 6299 E Hwy 40  
Rapid City, S.D.

**WELL LOG:**

FORMATION	DEPTH	
	FROM	TO
<u>Topsoil</u>	<u>0</u>	<u>4</u>
<u>Gravel</u>	<u>4</u>	<u>15</u>
<u>Shale</u>	<u>15</u>	<u>31</u>

**LOCATION:**  
 Distance from nearest potential pollution source (septic tank, abandoned well, feed lot, etc.)? \_\_\_\_\_ ft. from all clear (identify source).

**PROPOSED USE:**

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

**METHOD OF DRILLING:** Auger

**CASING DATA:**     Steel     Plastic     Other

If other describe \_\_\_\_\_

PIPEWEIGHT	DIAMETER	FROM	TO	HOLE DIAMETER
<u>old</u> LB/FT	<u>16</u> IN	<u>7</u> FT	<u>8</u> FT	<u>30</u> IN
<u>btel</u> LB/FT	<u>16</u> IN	<u>8</u> FT	<u>31</u> FT	<u>24</u> IN
_____ LB/FT	_____ IN	_____ FT	_____ FT	_____ IN

STATIC WATER LEVEL \_\_\_\_\_ 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? \_\_\_\_\_

**GROUTING DATA**

Grout Type	No. of Sacks	Grout Weight	From	To
<u>Cement</u>	<u>3</u>	<u>94</u> lb./gal	_____ ft	_____ ft
_____	_____	_____ lb./gal	_____ ft	_____ ft

Describe grouting procedure \_\_\_\_\_

**WELL TEST DATA:**

Pumped    Describe Repeated  
 Bailed  
 Other

Pumping Level Below Land Surface

\_\_\_\_\_ ft After \_\_\_\_\_ Hrs pumped \_\_\_\_\_ GPM  
 \_\_\_\_\_ ft After \_\_\_\_\_ Hrs pumped \_\_\_\_\_ GPM  
 If pump installed, pump rate \_\_\_\_\_ GPM

**SCREEN:**     Perforated pipe     Manufactured

Diameter \_\_\_\_\_ IN    Length \_\_\_\_\_ FEET

Material \_\_\_\_\_

Slot Size \_\_\_\_\_    Set From \_\_\_\_\_    Feet to \_\_\_\_\_ Feet

Other information \_\_\_\_\_

**REMARKS**

act. 20 GPM

**WAS A PACKER OR SEAL USED?**     YES     NO

If so, what material? \_\_\_\_\_

Describe packer(s) and location? \_\_\_\_\_

This well was drilled under license # 155

And this report is true and accurate

Drilling firm B4B Foundation Services

Signature of License Representative [Signature]

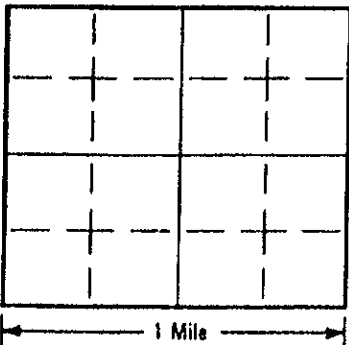
Signature of Well Owner or Equitable Property Holder \_\_\_\_\_

Date ✓

**DISINFECTION:** Was well disinfected upon completion?  
 YES, How: well chlorine  
 NO, Why Not? \_\_\_\_\_

laboratory sent to for water quality analysis \_\_\_\_\_

Location 5 1/2 SW 1/4 Sec 14 Twp 1N Rg 8E  
County Penn.



Please mark well location with an "X"

Well Completion Date

11-07-02

Well Owner: Hewey Clemmons  
Business Name: \_\_\_\_\_  
Address: PO Box 2213  
AL SD 57709

WELL LOG:

FORMATION	DEPTH	
	FROM	TO
<u>Topsoil</u>	<u>0</u>	<u>1</u>
<u>Clay</u>	<u>1</u>	<u>8</u>
<u>Gravel</u>	<u>8</u>	<u>18</u>
<u>Shale</u>	<u>18</u>	<u>38</u>

LOCATION:  
Distance from nearest potential pollution source (septic tank, abandoned well, feed lot, etc.)? \_\_\_\_\_ ft from All Clear (identify source)

PROPOSED USE:  
 Domestic/Stock    Municipal    Business    Test Holes  
 Irrigation    Industrial    Institutional    Monitoring well

METHOD OF DRILLING:  
Auger

CASING DATA:    Steel    Plastic    Other  
If other describe \_\_\_\_\_  
PIPEWEIGHT   DIAMETER   FROM   TO   HOLE DIAMETER  
\_\_\_\_ LB/FT   16" IN   2 above Gravel   38 FT   24 IN  
\_\_\_\_ LB/FT   \_\_\_\_ IN   \_\_\_\_ FT   \_\_\_\_ FT   \_\_\_\_ IN  
\_\_\_\_ LB/FT   \_\_\_\_ IN   \_\_\_\_ FT   \_\_\_\_ FT   \_\_\_\_ IN

GROUTING DATA  
Grout Type   No of Sacks   Grout Weight   From   To  
Berlite   6   50 lb./gal   6 ft   7 ft  
Cement   3   100 lb./gal   5 ft   6 ft  
Describe grouting procedure Rock over Water  
note over Rock Cement over Ber

SCREEN:  Perforated pipe    Manufactured  
Diameter \_\_\_\_\_ IN   Length \_\_\_\_\_ FEET  
Material \_\_\_\_\_  
Slot Size \_\_\_\_\_ Set From \_\_\_\_\_ Feet to \_\_\_\_\_ Feet  
Other information \_\_\_\_\_

WAS A PACKER OR SEAL USED?  YES    NO  
If so, what material? \_\_\_\_\_  
Describe packer(s) and location? \_\_\_\_\_

DISINFECTION: Was well disinfected upon completion?  
 YES, How: \_\_\_\_\_  
NO, Why Not? Water  
Well Chlorine

Laboratory sent to for water quality analysis

STATIC WATER LEVEL 8' Feet  
If flowing: closed in pressure \_\_\_\_\_ PSI  
GPM flow 375 through \_\_\_\_\_ inch pipe  
Controlled by  Valve    Reducers    Other \_\_\_\_\_  
Reduced Flowrate \_\_\_\_\_ GPM  
Can well be completely shut in? \_\_\_\_\_

WELL TEST DATA:  
 Pumped   Describe Bailed water  
 Bailed   Down + Repeated  
 Other \_\_\_\_\_  
Pumping Level Below Land Surface  
\_\_\_\_\_ ft. After \_\_\_\_\_ Hrs. pumped \_\_\_\_\_ GPM  
\_\_\_\_\_ ft. After \_\_\_\_\_ Hrs. pumped \_\_\_\_\_ GPM  
If pump installed, pump rate \_\_\_\_\_ GPM

REMARKS

This well was drilled under license # 195  
And this report is true and accurate.  
Drilling firm S Bice Drilling  
Signature of License Representative: [Signature]  
Signature of Well Owner or Equitable Property Holder: \_\_\_\_\_

Date: \_\_\_\_\_