

This log reports the activities of a licensed well driller and serves as the official record of work within the borehole and casing and describes the amount of water encountered. This log be completed by the driller and filed with DNR within 60 days of completion of the work. Acquiring Water Rights is the well owner's responsibility and is not accomplished by the filing of this report.

Well log information is stored in the Groundwater Information Center at the Montana Bureau of Mines and Geology (Butte) and water right information is stored in the Water Rights Bureau records (Helena).

For fields that are not applicable, enter NA. Optional fields have a grayed background. Record additional information in the REMARKS section.

1. WELL OWNER: Name Mike Hamby
Mailing address 74 FOUR CORNERS Rd
HELEN, MT 59844
2. WELL LOCATION: List 1/4 from smallest to largest
1/4 SW 1/4 SW 1/4, Section 31
Township 27(N) Range 34(E) County Sanders
Lot _____, Tract/Blk _____ Subdivision Name _____
Well Address _____
GPS Yes No
Latitude _____ Longitude _____
Error as reported by GPS locator (± feet) _____
Horizontal datum NAD27 WGS84

3. PROPOSED USE: Domestic Stock Irrigation
 Public water supply Monitoring Well Other: _____

4. TYPE OF WORK:
 New well Deepen existing well Abandon existing well
Method: Cable Rotary Other: _____

5. WELL CONSTRUCTION DETAILS:
Borehole:
Dia. 8 in. from 0 ft. to 300 ft.
Dia. 6 in. from 300 ft. to 470 ft.
Dia. _____ in. from _____ ft. to _____ ft.
Casing:
Steel: Wall thickness .250 Threaded Welded
Dia. 6 in. from 0 ft. to 300 ft.
Dia. _____ in. from _____ ft. to _____ ft.
Plastic: Pressure Rating Sch 40 Threaded Welded
Dia. 4 1/2 in. from 290 ft. to 470 ft.
Perforations/Slotted Pipe:
Type of perforator used drill
Size of perforations/slots 1/2 in. Dia. _____ in.
20 no. of perforations/slots from 400 ft. to 470 ft.
_____ no. of perforations/slots from _____ ft. to _____ ft.

Screens: Yes No
Material _____
Dia. _____ Slot size _____ from _____ ft. to _____ ft.
Dia. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel Packed: Yes No
Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Packer: Yes No
Type _____ Depth(s) _____
Grout: Material used Bent. #8
Depth from _____ ft. to _____ ft. OR Continuous feed

6. WELL TEST DATA:
A well test is required for all wells. (See details on well log report cover.)
 Static water level 350 ft. below top of casing or
 Closed-in artesian pressure _____ psi.
How was test flow measured:
bucket/stopwatch weir, flume, flowmeter, etc _____
Yellowstone groundwater closure area only - Water Temperature _____ °F
 AQUIFER TEST DATA FORM ATTACHED

Test - 1 hour minimum
Drawdown is the amount water level is lowered below static level. All depth measurements shall be from the top of the well casing. Time of recovery is hours/minutes since pumping stopped.
Air test*
15 gpm with drill stem set at 470 ft. for 2 hours
Time of recovery 1/2 hrs/min. Recovery water level 350 ft.
OR Bailer test*
_____ gpm with _____ ft. of drawdown after _____ hours
Time of recovery _____ hrs/min. Recovery water level _____ ft.
OR Pump test*
Depth pump set for test _____ ft.
_____ gpm pump rate with _____ ft. of drawdown after _____ hrs pumping
Time of recovery _____ hrs/min. Recovery water level _____ ft.
OR Flowing Artesian*
_____ gpm for _____ hours
Flow controlled by _____

*During the well test the discharge rate shall be as uniform as possible. This rate may or may not be the sustainable yield of the well. Sustainable yield does not include the reservoir of the well casing.

7. WELL LOG:

Depth, Feet		Material: color/rock and type/descriptor (example: blue/shale/hard, or brown/gravel/water, or brown/sand/heaving)
From	To	
<u>0</u>	<u>120</u>	<u>Clay</u>
<u>120</u>	<u>260</u>	<u>Broken Shale & gravel</u>
<u>260</u>	<u>470</u>	<u>Gray Shale</u>

ADDITIONAL SHEETS ATTACHED

8. DATE WELL COMPLETED: 7-29-05

9. REMARKS: _____

10. DRILLER/CONTRACTOR'S CERTIFICATION:
All work performed and reported in this well log is in compliance with the Montana well construction standards. This report is true to the best of my knowledge.
Name, firm, or corporation (print) R L Vetter Contracting
Address P.O. Box 133 Noxon, MT
Signature R L Vetter
Date 9-17-05 License no. 549