



# R D Water Lab

Lab 3700 S. Russell St.-120 #6, Missoula, Mt. 59801  
Mailing Address P.O. Box 5064, Missoula, Mt. 59806  
Phone/Fax 721-8179

## FAX COVER SHEET

DATE: 12-4-03 FAX #: 847-2090 #PGS. 1

TO: Brod Swanson

COMPANY: Rufty N.W

FROM: Snake

COMMENTS:

## R D WATER LAB, LLC

3700 S. Russell St. 120 - #6 • Missoula MT 59801 P.O. Box 5064  
Phone (406) 721-8179 Missoula, MT 59806

### Bacteriological Analysis of Drinking Water

#### Sampling Procedure:

1. Remove screen and aerator, disinfect, allow cold water to run 2-3 minutes
2. Fill bottle to line, do not touch the inside of the bottle or cap. Do NOT Rinse Out the Bottle.
3. Fill out all information on the form below and return sample to the lab within 30 hours of collection time.
4. Payment of \$15.00 per sample must accompany samples

Sample Location: <u>21 Old Trail Point Rd.</u>	Person to Receive Report:
City: <u>Nexen</u> County: <u>Sanders</u>	Name: <u>Brod Swanson</u>
Date Collected: <u>12/1/03</u> Time: <u>1:45 PM</u>	Street: <u>18 Bear Foot Lane</u>
Sample Collector: <u>Norathlene</u> Phone: <u>847-2080</u>	City: <u>Nexen</u> St. <u>MT</u> Zip: <u>59844</u>
Type of Supply (circle one): <input checked="" type="radio"/> Well <input type="radio"/> Spring or Surface	Phone: <u>847-2080</u> ( ) Phone the Results
supply (type):	Fax: <u>847-2090</u> <input checked="" type="checkbox"/> Fax Results

Sample #	Sample Location	Results
<u>12491</u>		<u>Coliform absent</u>

For Lab Use Only  
Analyst: SM  
Received: 12-3-03  
Reported: 12-4-03

- Satisfactory at this time  
 Contaminated. Water supply should be disinfected and retested before it is used as drinking or household water. Consult your county sanitarian for treatment procedures.

(Mail Samples to P.O. Box Mon. thru Thurs. ONLY), or they may be dropped off thru Friday 4 pm.  
Keep Sample Cool but NOT Frozen.

P

June 17, 2004  
76N 30008540

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Certificate of Water Right

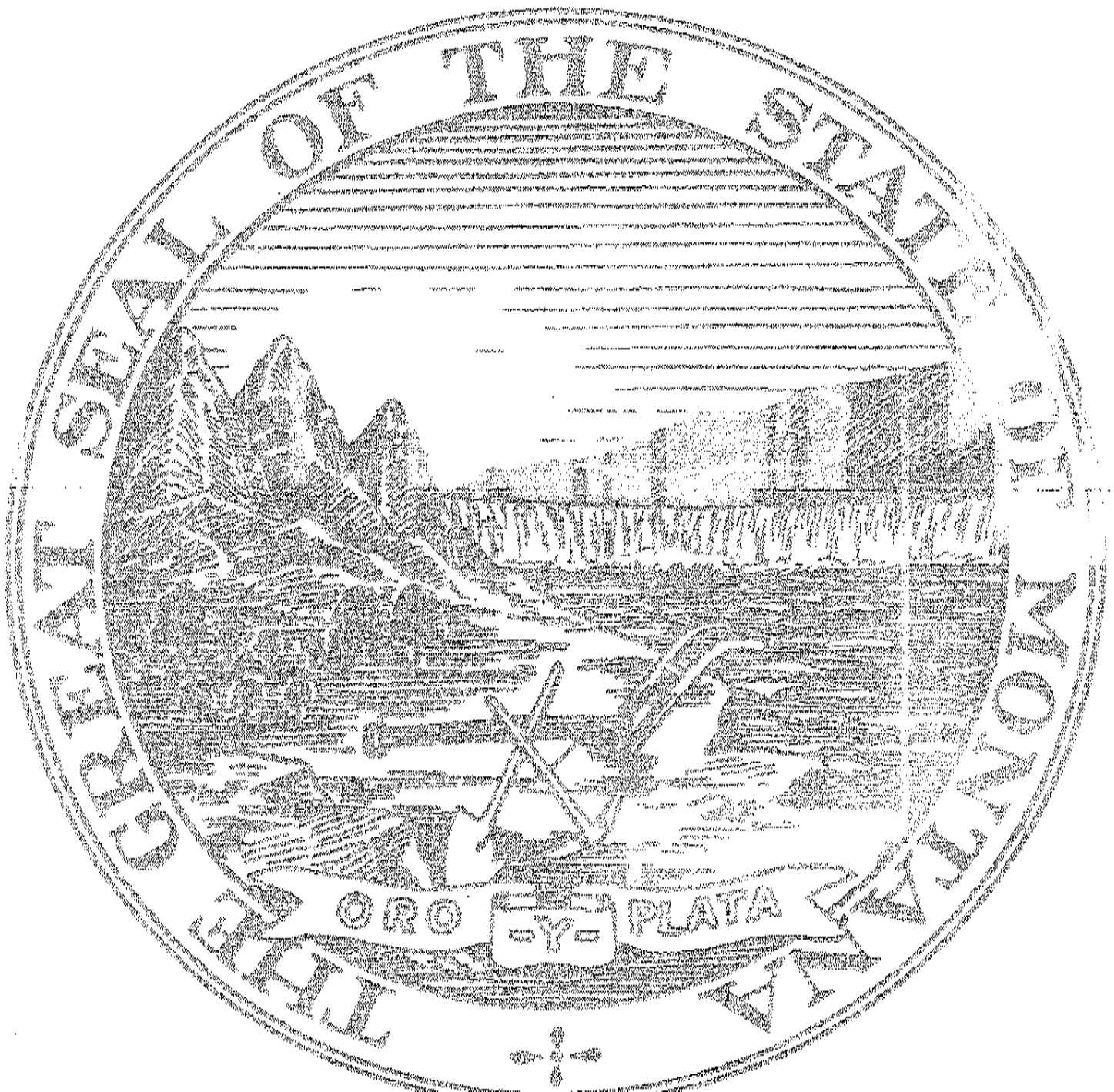
**THIS CERTIFICATE IS SUBJECT TO ALL PRIOR EXISTING WATER RIGHTS  
IN THE SOURCE OF SUPPLY.**

**FAILURE TO COMPLY WITH ANY OF THESE TERMS AND CONDITIONS MAY RESULT IN THE LOSS OF THIS  
CERTIFICATE OF WATER RIGHT.**

*Richard D. Russell*  
Witness Signature

*W. H. G. S.*  
Water Resources Division

DATE ISSUED: JUNE 17, 2004



KA

RECEIVED 25N 32W 08 A (13508)

JUN 18

Form No. 603 R2-97

D.N.R.C.

WELL LOG REPORT

File No.

1. WELL OWNER Name Jesse & Nancy Hines

2. CURRENT MAILING ADDRESS Box 196  
Helena MT 59653

3. WELL LOCATION N 1/4 Sec 5, T4N, R12W, S2E, Section 8  
Township 25 NIS Range 32 East County CANDERS  
Gov't Lot \_\_\_\_\_ or Lot \_\_\_\_\_ Block \_\_\_\_\_  
Subdivision Name \_\_\_\_\_  
Tract Number PARCEL C - COS 1777B  
Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

4. PROPOSED USE: Domestic  Stock  Irrigation   
Other  specify \_\_\_\_\_

5. TYPE OF WORK:  
New well  Method  Dug  Bored   
Deepened  Cable  Driven   
Reconditioned  Rotary  Jetted

6. DIMENSIONS: Diameter of Hole  
Dia. 7 1/2 in. from 0 ft. to 445 ft.  
Dia. \_\_\_\_\_ in. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Dia. \_\_\_\_\_ in. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

7. CONSTRUCTION DETAILS:  
Casing: Steel  Dia. 6 7/8 in. from 12 ft. to 445 ft.  
Threaded  Welded  Dia. \_\_\_\_\_ in. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Type 4.53 Wall Thickness .23  
Casing: Plastic  Dia. \_\_\_\_\_ in. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Threaded  Welded  Dia. \_\_\_\_\_ in. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

PERFORATIONS: Yes  No   
Type of perforator used \_\_\_\_\_  
Size of perforations \_\_\_\_\_ in. by \_\_\_\_\_ in.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

SCREENS: Yes  No   
Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
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.

GROUTED: To what depth? 42 ft  
Material used in grouting Bestmix Chips # 8

8. WELL HEAD COMPLETION:  
Pillbox Adapter Yes  No

9. WELL TEST DATA  
The information requested in this section is required for all wells. All depth measurements must be from the top of the well casing. All wells under 100 gpm must be tested for a minimum of one hour and provide the following information:  
a) Air 25 gpm Pump \_\_\_\_\_ Boiler \_\_\_\_\_  
b) Static water level immediately before testing 312 ft. ff  
flowing, closed-in pressure \_\_\_\_\_ psi \_\_\_\_\_ gpm.  
c) Pumping level after one hour \_\_\_\_\_ ft.  
d) Recovery level \_\_\_\_\_ ft. Time of recovery \_\_\_\_\_ min/hrs.  
e) Pumping rate \_\_\_\_\_ gpm.  
Wells intended to yield 100 gpm or more shall be tested for a period of 8 hours or more. The test shall follow the development of the well, and shall be conducted continuously at a constant discharge at least as great as the intended appropriation. In addition to the above information, water level data shall be collected and recorded on the Department's "Aquifer Test Data" form.  
NOTE: All wells shall be equipped with an access port 1/2 inch minimum or a pressure gauge that will indicate the shut-in pressure of a flowing well. Removable caps are acceptable as access ports.

10. PUMPING TEST DATA  
a) Static level immediately before testing \_\_\_\_\_ ft.  
b) Depth at which pump is set for test \_\_\_\_\_ ft.  
c) Pumping rate \_\_\_\_\_ gpm.  
d) Maximum drawdown \_\_\_\_\_ ft.  
e) Duration of test: pumping time \_\_\_\_\_ hrs/min  
recovery time \_\_\_\_\_ hrs/min.  
f) Recovery level \_\_\_\_\_ ft.  
g) Duration of time to recovery level \_\_\_\_\_ hrs.

11. PUMP INSTALLATION INFORMATION  
Installation depth \_\_\_\_\_  
Actual pumping rate \_\_\_\_\_  
Manufacturer's name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_ H.P. \_\_\_\_\_

12. WAS WELL PLUGGED OR ABANDONED? Yes  No   
If yes, how? \_\_\_\_\_

13. WELL LOG  
Depth (ft.) PM

From	To	Formation
0	2	TOP SOIL
2	8	COBBLES
8	30	SOFT BROWN CLAY
30	320	GRAY BROKEN SHALE
320	340	BROWN SANDY CLAY
340	360	GRAY SHALE, SILTY
		IMBEDDED LT COLOR CLAY
360	380	FRAY SHALE - BROWN SILTY CLAY
380	420	GRAY SHALE - LT COLOR SILTY CLAY
420	445	BROWN SILT - WATER IN BROWN SHALE

14. YELLOWSTONE CLOSURE AREA: WATER TEMPERATURE \_\_\_\_\_

15. DATE COMPLETED 6-16-99

16. DRILLER/CONTRACTOR'S CERTIFICATION  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge.  
Date 6-16-99  
Firm Name KRASS DRILLING & PUMP SVC INC.  
Address Box 38 - THOMPSON FALLS, MT 59873  
Signature Harold Krass License No. 481

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
43 N. LAST CHANCE GULCH P.O. BOX 201601 HELENA, MT 59620-1601 444-6610



1793 M 177486

June 17, 2004  
76N 30008540

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Certificate of Water Right

STATE OF MONTANA  
DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
1424 9TH AVENUE P.O. BOX 201601 HELENA, MONTANA 59620-1601

# CERTIFICATE OF WATER RIGHT

UPON FINDING THE REQUIREMENTS OF SECTION 85-2-301, MCA, HAVE BEEN MET, THIS CERTIFICATE OF WATER RIGHT IS GRANTED.

**Water Right Number:** 76N 30008540 GROUND WATER CERTIFICATE  
**Version:** 1 - ORIGINAL RIGHT  
**Status:** ACTIVE

**Owners:** KENNETH E JOHANSSON  
33369 SCHWARTZ RD. N.  
DAVENPORT, WA 99122

**Priority Date:** NOVEMBER 3, 2003 at 01:35 P.M.

**Purpose (use):** DOMESTIC  
LAWN AND GARDEN

**Maximum Flow Rate:** THIS RIGHT IS LIMITED TO THE ACTUAL AMOUNT USED UP TO 35 GALLONS PER MINUTE.

**Maximum Volume:** THIS RIGHT IS LIMITED TO THE ACTUAL AMOUNT USED UP TO 10 ACRE-FEET.

**Source:**

**Source Name:** GROUNDWATER

**Point of Diversion and Means of Diversion:**

ID	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
		N2S2NE	8	25N	32W	SANDERS

**Diversion Means:** WELL

**Well Depth:** 445.00 FEET

**Static Water Level:** 310.00 FEET

**Casing Diameter:** 6.63 INCHES

**Period of Diversion:** JANUARY 1 to DECEMBER 31

**Purpose (Use):** DOMESTIC

**Households:**

**Period of Use:** JANUARY 1 to DECEMBER 31

**Place of Use:**

ID	Acres	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1			N2S2NE	8	25N	32W	SANDERS

**Purpose (Use):** LAWN AND GARDEN

**Period of Use:** APRIL 1 to OCTOBER 31

**Place of Use:**

ID	Acres	Govt Lot	Qtr Sec	Sec	Twp	Rge	County
1			N2S2NE	8	25N	32W	SANDERS

**Remarks:**

OWNERSHIP UPDATE RECEIVED  
WATER RIGHT OWNERSHIP UPDATE RECEIVED 12/16/2003.

## Well Information

GWIC Id: 177486  
 Location (TRS): 25N 32W 08 A  
 County (MT): SANDERS  
 DNRC Water Right:  
 PWS Id:  
 Block:  
 Lot:  
 Addition:  
 Site Notes:

Source of Data: LOG  
 Latitude (dd): 47.9414  
 Longitude (dd): -115.7421  
 Geomethod: TRS-TNM  
 Datum: 1927  
 Certificate of Survey: 1777 R9  
 Type of Site: WELL

## Construction and Performance Data

Total Depth (ft): 443.00  
 Static Water Level (ft): 310.00  
 Pumping Water Level (ft):  
 Yield (gpm): 25.00  
 Test Type: AIR  
 Test Duration:  
 Drill Stem Setting (ft):  
 Recovery Water Level (ft):  
 Recovery Time (hrs): 0.00  
 Well Notes:

How Drilled:  
 Driller's Name: KRASS  
 Driller License: WWC981  
 Completion Date (m/d/y): 6/16/1989  
 Special Conditions:  
 Is Well Flowing?:  
 Shut-in Pressure:  
 Geology/Aquifer: Not Reported  
 Well/Water Use: DOMESTIC

## Diameter Information

No Diameter Records currently in GWIC.

## Casing Seal Information

To	Description
25.0	BENTONITE

Casing Information<sup>1</sup>

From	To	Dia	Description
-2.0	443.0	6.0	STEEL

Completion Information<sup>2</sup>

No Completion Records currently in GWIC.

## Geology Information

To	Description
2.0	TOPSOIL
8.0	COBBLES
30.0	SOFT BROWN CLAY
378.0	GRAY BROKEN SHALE
340.0	BROWN SANDY CLAY
360.0	GRAY SHALE SILT EMBEDDED LT COLOR CLAY
390.0	GRAY SHALE BROWN SILTY CLAY
426.0	GRAY SHALE LT COLOR SILTY CLAY
445.0	BROWN SILT WATER IN BROWN SHALE

Depths reported are inside diameter of the casing.