MONTANA WELL LOG REPORT

Form No. 603 R2-88 Well ID# _____

This log reports the activities of a licensed Montana well driller and serves as the official record of work done within the borehole and casing and describes the amount of water encountered. **This form is to be completed by the driller and filed with DNRC 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 Eric Weare and Juliellen Weare
Mailing address 1574 Bull River Rd.
Noxon, MT 59853

2. WELL LOCATION: List ¼ from smallest to largest
¼ ¼ NE ¼ NW ¼, Section 20
Township 22 N S Range 34 E W 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 60 ft.
Dia. 6 in. from 60 ft. to 325 ft.
Dia. _____ in. from _____ ft. to _____ ft.

Casing:
Steel: Wall thickness .250 ☐ Threaded ☑ Welded
Dia. 6 in. from 0 ft. to 60 ft.
Dia. _____ in. from _____ ft. to _____ ft.

Plastic: Pressure Rating Sch 40 lbs. ☐ Threaded ☑ Welded
Dia. 4.5 in. from 50 ft. to 325 ft.

Perforations/Slotted Pipe:
Type of perforator used _____
Size of perforations/slots _____ in. by _____ in.
_____ no. of perforations/slots from _____ ft. to _____ 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 NS
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 60 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*:
3 gpm with drill stem set at 324 ft. for 2 hours
Time of recovery 2 hrs/min. Recovery water level 60 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 From	Depth, Feet To	Material: color/rock and type/descriptor (example: blue/shale/hard, or brown/gravel/water, or brown/sand/heaving)
0	21	Dirty Broken Shale gravel
21	45	Broken Shale Slide Rock
45	325	[redacted] Solid Shale Light Hard OKR

☐ ADDITIONAL SHEETS ATTACHED

8. DATE WELL COMPLETED: 1-1-04

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 Const.
Address Box 133 Noxon, MT.
Signature R.L. Vetter
Date 12-20-04 License no. 549

MBMG ID#

Montana DNRC P.O. BOX 201601 HELENA, MT 59620-1601 444-6810
DEPARTMENT COPY
DRILLER: Please give this copy to the well owner to complete reverse side.
OWNER: Complete reverse side and send to DNRC when the well is completed, and the water has been used beneficially for the intended purpos