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MINNESOTA DEPARTMENT OF HEALTH  
WELL AND BORING REPORT  
Minnesota Statutes Chapter 1031

Entry Date 09/11/2002  
Update Date 05/23/2006  
Received Date

|                                                               |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
|---------------------------------------------------------------|--|-------------------------------------------------|-----------------|--------------------------|-----------------------|--------------------------|---------------------|--------------------|---------------------------|---------------------------------------------|-------------------|------------------------|------------------------------|-------------------------|-----------------------------------|--|------------------------------------------|--|--|
| <b>Well Name</b><br>HAUCOM, JERRY 126                         |  |                                                 |                 |                          | <b>Township</b><br>38 |                          | <b>Range</b><br>W 2 |                    | <b>Dir Section</b><br>BCD |                                             | <b>Subsection</b> |                        | <b>Well Depth</b><br>131 ft. |                         | <b>Depth Completed</b><br>131 ft. |  | <b>Date Well Completed</b><br>09/28/2001 |  |  |
| <b>Elevation</b>                                              |  |                                                 |                 |                          | <b>Elev. Method</b>   |                          |                     |                    |                           | <b>Drill Method</b><br>Non-specified Rotary |                   |                        |                              |                         | <b>Drill Fluid</b><br>Bentonite   |  |                                          |  |  |
| <b>Address</b>                                                |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   | <b>Use</b><br>domestic |                              | <b>Status</b><br>Active |                                   |  |                                          |  |  |
| <b>Contact</b><br>10167 APENNINE INVER GROVE HEIGHTS MN 55077 |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Well</b><br>10380 BENESH DR                                |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Stratigraphy Information</b>                               |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Geological Material</b>                                    |  | <b>From</b>                                     | <b>To (ft.)</b> | <b>Color</b>             | <b>Hardness</b>       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| TOP SOIL                                                      |  | 0                                               | 1               | BLACK                    | SOFT                  |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| CLAY                                                          |  | 1                                               | 17              | BROWN                    | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| CLAY                                                          |  | 17                                              | 31              | GRAY                     | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| SANDY CLAY                                                    |  | 31                                              | 45              | GRAY                     | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| CLAY                                                          |  | 45                                              | 75              | GRAY                     | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| SAND                                                          |  | 75                                              | 88              | BROWN                    | SOFT                  |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| CLAY                                                          |  | 88                                              | 105             | GRAY                     | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| CLAY                                                          |  | 105                                             | 115             | TAN                      | MEDIUM                |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| SAND                                                          |  | 115                                             | 131             | GRAY                     | SOFT                  |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Open Hole</b>                                              |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Screen?</b>                                                |  | <input checked="" type="checkbox"/>             |                 | <b>Type</b>              |                       | stainless                |                     | <b>Make</b>        |                           | JOHNSON                                     |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Diameter</b>                                               |  | Slot/Gauze                                      |                 | <b>Length</b>            |                       | Set                      |                     | <b>Measure</b>     |                           | 09/28/2001                                  |                   |                        |                              |                         |                                   |  |                                          |  |  |
| 4 in.                                                         |  | 15                                              |                 | 4 ft.                    |                       | 127 ft.                  |                     | 131 ft.            |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Static Water Level</b>                                     |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| 17 ft.                                                        |  | land surface                                    |                 | <b>Measure</b>           |                       | 09/28/2001               |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Pumping Level (below land surface)</b>                     |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| 131 ft.                                                       |  | 2 hrs.                                          |                 | <b>Pumping at</b>        |                       | 150 g.p.m.               |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Wellhead Completion</b>                                    |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Pitless adapter manufacturer                                  |  | <input type="checkbox"/>                        |                 | <b>Casing Protection</b> |                       | <input type="checkbox"/> |                     | 12 in. above grade |                           | <b>Model</b>                                |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <input type="checkbox"/>                                      |  | At-grade (Environmental Wells and Borings ONLY) |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Grouting Information</b>                                   |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Well Grouted?</b>                                          |  | <input checked="" type="checkbox"/>             |                 | Yes                      |                       | <input type="checkbox"/> |                     | No                 |                           | <input type="checkbox"/>                    |                   | Not Specified          |                              |                         |                                   |  |                                          |  |  |
| <b>Material</b>                                               |  | <b>Amount</b>                                   |                 | <b>From</b>              |                       | <b>To</b>                |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| high solids bentonite                                         |  | 0 ft.                                           |                 | 30 ft.                   |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Nearest Known Source of Contamination</b>                  |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>feet</b>                                                   |  | <b>Direction</b>                                |                 | <b>Type</b>              |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Well disinfected upon completion?                             |  | <input type="checkbox"/>                        |                 | Yes                      |                       | <input type="checkbox"/> |                     | No                 |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Pump</b>                                                   |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <input checked="" type="checkbox"/>                           |  | Not Installed                                   |                 | <b>Date Installed</b>    |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Manufacturer's name                                           |  | HP                                              |                 | Volt                     |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Model Number                                                  |  | ft                                              |                 | Capacity                 |                       | g.p.                     |                     | Typ                |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Abandoned</b>                                              |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Does property have any not in use and not sealed well(s)?     |  | <input type="checkbox"/>                        |                 | Yes                      |                       | <input type="checkbox"/> |                     | No                 |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Variance</b>                                               |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Was a variance granted from the MDH for this well?            |  | <input type="checkbox"/>                        |                 | Yes                      |                       | <input type="checkbox"/> |                     | No                 |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Miscellaneous</b>                                          |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>First Bedrock</b>                                          |  | <b>Aquifer</b>                                  |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Last Strat                                                    |  | Depth to Bedrock                                |                 | ft                       |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Located by                                                    |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Locate Method                                                 |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>System</b>                                                 |  | UTM - NAD83, Zone 15, Meters                    |                 | X                        |                       | Y                        |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Unique Number Verification</b>                             |  | <b>Input Date</b>                               |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Angled Drill Hole</b>                                      |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| <b>Well Contractor</b>                                        |  |                                                 |                 |                          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Traut S.M. Well Co.                                           |  | 21535                                           |                 | JOHN & CHRIS             |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |
| Licensee Business                                             |  | Lic. or Reg. No.                                |                 | Name of Driller          |                       |                          |                     |                    |                           |                                             |                   |                        |                              |                         |                                   |  |                                          |  |  |