

748333

County Pine
Quad
Quad ID

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

Entry Date
Update Date 08/13/2009
Received Date 12/05/2007

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|-----------------------|--------------------|-----------------|---------------------|--------------------------|---|--|---|--|--|--|--------------------|--|-----------|--|------------------------------|--|--------------|--|----------------------|--|
| Well Name GOEBEL, EDSEL | | | | | Township 42 | Range 20 | Dir W | Section 8 | Subsection BAA | Well Depth 90 ft. | | Depth Completed 90 ft. | | Date Well Completed 11/12/2007 | | | | | | | | | | | |
| Elevation | | | | | Elev. Method | | | | | Drill Method Multiple methods used | | Drill Fluid Water | | | | | | | | | | | | | |
| Address C/W 25150 GRONINGEN RD SANDSTONE MN 55072 | | | | | | | | | | Use domestic | | Status Active | | | | | | | | | | | | | |
| Stratigraphy Information Geological Material From To (ft.) Color Hardness CLAY & ROCKS 0 57 BROWN M.HARD SANDSTONE 57 90 YELLOW M.HARD | | | | | | | | | | Well Hydrofractured? | | Yes <input type="checkbox"/> | | No <input type="checkbox"/> | | From | | To | | | | | | | |
| | | | | | | | | | | Casing Type | | Single casing | | Joint | | Other | | | | | | | | | |
| | | | | | | | | | | Drive Shoe? | | Yes <input checked="" type="checkbox"/> | | No <input type="checkbox"/> | | Above/Below | | | | | | | | | |
| | | | | | | | | | | Casing Diameter | | Weight | | Hole Diameter | | | | | | | | | | | |
| | | | | | | | | | | 6 in. To | | 60.4 ft. 19 lbs./ft. | | 6 in. To 90 ft. | | | | | | | | | | | |
| | | | | | | | | | | Open Hole | | From 60.4 ft. | | To 90 ft. | | | | | | | | | | | |
| | | | | | | | | | | Screen? | | <input type="checkbox"/> | | Type | | Make | | | | | | | | | |
| | | | | | | | | | | Static Water Level | | | | | | | | | | 45 ft. | | land surface | | Measure 11/12/2007 | |
| | | | | | | | | | | Pumping Level (below land surface) | | | | | | | | | | 80 ft. | | 1 hrs. | | Pumping at 15 g.p.m. | |
| | | | | | | | | | | Wellhead Completion | | | | | | | | | | Pitless adapter manufacturer | | Model | | | |
| <input type="checkbox"/> Casing Protection | | | | | | | | | | <input checked="" type="checkbox"/> 12 in. above grade | | | | | | | | | | | | | | | |
| <input type="checkbox"/> At-grade (Environmental Wells and Borings ONLY) | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grouting Information | | | | | | | | | | Well Grouted? <input checked="" type="checkbox"/> | | Yes <input type="checkbox"/> | | No <input type="checkbox"/> | | Not Specified | | | | | | | | | |
| Material bentonite | | | | | | | | | | Amount | | From | | To | | ft. ft. | | | | | | | | | |
| Nearest Known Source of Contamination | | | | | | | | | | 70 feet | | North Direction | | Sewer Type | | | | | | | | | | | |
| Well disinfected upon completion? | | | | | | | | | | <input checked="" type="checkbox"/> | | Yes <input type="checkbox"/> | | No <input type="checkbox"/> | | | | | | | | | | | |
| Pump | | | | | | | | | | <input checked="" type="checkbox"/> Not Installed | | Date Installed | | | | | | | | | | | | | |
| Manufacturer's name | | | | | | | | | | | | | | | | | | | | | | | | | |
| Model Number | | | | | | | | | | HP | | Volt | | | | | | | | | | | | | |
| Length of drop pipe | | | | | | | | | | ft | | Capacity | | g.p. | | Typ | | | | | | | | | |
| Abandoned | | | | | | | | | | Does property have any not in use and not sealed well(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | |
| Variance | | | | | | | | | | Was a variance granted from the MDH for this well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | |
| Miscellaneous | | | | | | | | | | First Bedrock | | | | | | | | | | Aquifer | | | | | |
| Last Strat | | | | | | | | | | Depth to Bedrock | | | | | | | | | | ft | | | | | |
| Located by | | | | | | | | | | | | | | | | | | | | | | | | | |
| Locate Method | | | | | | | | | | | | | | | | | | | | | | | | | |
| System | | | | | | | | | | UTM - NAD83, Zone 15, Meters | | X | | Y | | | | | | | | | | | |
| Unique Number Verification | | | | | | | | | | Input Date | | | | | | | | | | | | | | | |
| Angled Drill Hole | | | | | | | | | | | | | | | | | | | | | | | | | |
| Well Contractor | | | | | | | | | | Lakehead Well Drilling and | | | | | | | | | | 1883 | | KENT, B. | | | |
| Licensee Business | | | | | | | | | | Lic. or Reg. No. | | | | | | | | | | Name of Driller | | | | | |