

897828

County Beltrami  
Quad Turtle River  
Quad ID 329D

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

Entry Date  
Update Date 01/12/2026  
Received Date 12/16/2025

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------|---------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------|--------------|----------|------|---|----|-------|---------|--------------|----|----|-------|------|--------------|----|----|-------|--------|--------------|----|----|------|------|---------------|----|----|------|--------|------|----|-----|------|------|-------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| <b>Well Name</b><br>WARD, LINDA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Township</b><br>147                      | <b>Range</b><br>32                          | <b>Dir Section</b><br>W 29                                    | <b>Subsection</b><br>CDCDDC | <b>Well Depth</b><br>105 ft.                                                                                               | <b>Depth Completed</b><br>105 ft. | <b>Date Well Completed</b><br>11/13/2025 |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Elevation</b><br>1375                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Elev. Method</b><br>LiDAR 1m DEM (MNDNR) | <b>Drill Method</b><br>Non-specified Rotary |                                                               |                             |                                                                                                                            | <b>Drill Fluid</b><br>Bentonite   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Address</b><br><br>C/W 7484 HAWK POINT CT NE BEMIDJI MN 56601                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |                                             |                                                               |                             | <b>Use</b><br>domestic                                                                                                     | <b>Status</b><br>Active           |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Stratigraphy Information</b> <table><tr><td>Geological Material</td><td>From</td><td>To (ft.)</td><td>Color</td><td>Hardness</td></tr><tr><td>CLAY</td><td>0</td><td>10</td><td>BROWN</td><td>MED-HRD</td></tr><tr><td>CLAY/ GRAVEL</td><td>10</td><td>19</td><td>BROWN</td><td>HARD</td></tr><tr><td>CLAY/ GRAVEL</td><td>19</td><td>38</td><td>BROWN</td><td>MEDIUM</td></tr><tr><td>CLAY/ GRAVEL</td><td>38</td><td>48</td><td>BLUE</td><td>SOFT</td></tr><tr><td>CLAY / GRAVEL</td><td>48</td><td>99</td><td>BLUE</td><td>MEDIUM</td></tr><tr><td>SAND</td><td>99</td><td>105</td><td>BLUE</td><td>HARD</td></tr></table> |                                             |                                             |                                                               |                             | Geological Material                                                                                                        | From                              | To (ft.)                                 | Color        | Hardness | CLAY | 0 | 10 | BROWN | MED-HRD | CLAY/ GRAVEL | 10 | 19 | BROWN | HARD | CLAY/ GRAVEL | 19 | 38 | BROWN | MEDIUM | CLAY/ GRAVEL | 38 | 48 | BLUE | SOFT | CLAY / GRAVEL | 48 | 99 | BLUE | MEDIUM | SAND | 99 | 105 | BLUE | HARD | <b>Well Hydrofractured?</b><br><b>Yes</b> <input type="checkbox"/> <b>No</b> <input checked="" type="checkbox"/> <b>From</b><br><b>To</b> |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | Geological Material                                                                                                        | From                              | To (ft.)                                 | Color        | Hardness |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | CLAY                                                                                                                       | 0                                 | 10                                       | BROWN        | MED-HRD  |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | CLAY/ GRAVEL                                                                                                               | 10                                | 19                                       | BROWN        | HARD     |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | CLAY/ GRAVEL                                                                                                               | 19                                | 38                                       | BROWN        | MEDIUM   |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | CLAY/ GRAVEL                                                                                                               | 38                                | 48                                       | BLUE         | SOFT     |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | CLAY / GRAVEL                                                                                                              | 48                                | 99                                       | BLUE         | MEDIUM   |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | SAND                                                                                                                       | 99                                | 105                                      | BLUE         | HARD     |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | <b>Casing Type</b><br>Single casing                                                                                        |                                   |                                          | <b>Joint</b> |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             | <b>Drive Shoe?</b><br><b>Yes</b> <input type="checkbox"/> <b>No</b> <input checked="" type="checkbox"/> <b>Above/Below</b> |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Casing Diameter</b><br>4 in. To 100 ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                             |                                             | <b>Weight</b><br>lbs./ft.                                     |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             | <b>Hole Diameter</b><br>8 in. To 50 ft.<br>6.5 in. To 105 ft. |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Open Hole</b><br>From ft. To ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Screen?</b> <input checked="" type="checkbox"/> <b>Type</b> plastic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                             |                                             | <b>Make</b> JOHNSON                                           |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Diameter</b> 4 in. <b>Slot/Gauze</b> 15 <b>Length</b> 5 ft. <b>Set</b> 100 ft. <b>To</b> 105 ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Static Water Level</b><br>32 ft. land surface Measure 11/13/2025                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Pumping Level (below land surface)</b><br>90 ft. 2 hrs. Pumping at 20 g.p.m.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Wellhead Completion</b><br>Pitless adapter manufacturer AQUA SEAL Model T41<br><input type="checkbox"/> Casing Protection <input checked="" type="checkbox"/> 12 in. above grade<br><input type="checkbox"/> At-grade (Environmental Wells and Borings ONLY)                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Grouting Information</b> Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Specified<br>Material Amount From To<br>bentonite 5 Sacks ft. 50 ft.                                                                                                                                                                                                                                                                                                                                                                                                                  |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Nearest Known Source of Contamination</b><br>feet Direction Type<br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Pump</b> <input type="checkbox"/> Not Installed Date Installed 11/14/2025<br>Manufacturer's name GRUNDFOS<br>Model Number 10SQ07 HP 0.75 Volt 220<br>Length of drop pipe 90 ft Capacity 10 g.p. Typ Submersible                                                                                                                                                                                                                                                                                                                                                                                                               |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Abandoned</b><br>Does property have any not in use and not sealed well(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Variance</b><br>Was a variance granted from the MDH for this well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Miscellaneous</b><br>First Bedrock Aquifer Quat. buried<br>Last Strat sand-gray Depth to Bedrock ft<br>Located by Minnesota Geological Survey<br>Locate Method Digitization (Screen) - Map (1:24,000) (15 meters or<br>System UTM - NAD83, Zone 15, Meters X 366686 Y 5263525<br>Unique Number Verification Address verification Input Date 01/12/2026                                                                                                                                                                                                                                                                        |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Angled Drill Hole</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |
| <b>Well Contractor</b><br>Reed and Reed Water Well 1854 REED, J.<br>Licensee Business Lic. or Reg. No. Name of Driller                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                             |                                             |                                                               |                             |                                                                                                                            |                                   |                                          |              |          |      |   |    |       |         |              |    |    |       |      |              |    |    |       |        |              |    |    |      |      |               |    |    |      |        |      |    |     |      |      |                                                                                                                                           |  |  |