



WELL DRILLER’S REPORT
NORTH DAKOTA DEPARTMENT OF WATER RESOURCES
WATER APPROPRIATION
SFN 60273 (7/2025)

Department of Water Resources • 1200 Memorial Highway • Bismarck, ND, 58504
State law requires that this report be filed with the Department of Water Resources within 30 days after completion or abandonment of the well.

WELL OWNER				Was Pump Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Name				Was Well Disinfected Upon Completion? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Address				WATER LEVEL							
WELL LOCATION Sketch map location must agree with written location.				Static Water Level (In Feet) Below Surface							
		County		GPS		If Flowing, Closed-In Pressure In PSI					
		1/4	1/4	1/4							
		Township	Range	Section							
PROPOSED USE				WELL TEST DATA							
<input type="checkbox"/> Domestic <input type="checkbox"/> Geothermal <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Irrigation <input type="checkbox"/> Monitoring <input type="checkbox"/> Test Hole				<input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Other							
METHOD DRILLED				Pumping Level Below Land Surface							
<input type="checkbox"/> Cable <input type="checkbox"/> Jetted <input type="checkbox"/> Forward Rotary <input type="checkbox"/> Reverse Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Auger <input type="checkbox"/> If Other, Specify _____				Feet After		Hrs. Pumping		GPM			
WATER QUALITY Was a water sample collected for				Feet After		Hrs. Pumping		GPM			
Chemical Analysis? <input type="checkbox"/> Yes <input type="checkbox"/> No				Feet After		Hrs. Pumping		GPM			
Bacteriological Analysis? <input type="checkbox"/> Yes <input type="checkbox"/> No				WELL LOG							
If So, To What Laboratory Was It Sent?				Formation		Depth (ft.)					
						From		To			
WELL CONSTRUCTION											
Diameter Of Hole In Inches		Depth In Feet									
Casing: <input type="checkbox"/> Steel <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Other <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> If Other, Specify _____											
Pipe Weight	Diameter	From	To								
lb/ft	inches	feet	feet								
lb/ft	inches	feet	feet								
lb/ft	inches	feet	feet								
Was A Well Screen Installed? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Was Perforated Pipe Used? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Screen Or Perforation Interval	From In Feet		To In Feet								
Was Casing Left Open End? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Material		Diameter In Inches									
Slot Size	Set From In Feet		To In Feet								
Slot Size	Set From In Feet		To In Feet								
Was Packer Or Seal Used? <input type="checkbox"/> Yes <input type="checkbox"/> No											
If So, What Material		Depth In Feet									
Type Of Well <input type="checkbox"/> Straight Screen <input type="checkbox"/> Gravel Packed				DATE COMPLETED							
Depth Grouted		From		To		WAS WELL PLUGGED OR ABANDONED? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Grouting Material		Cement		Other		If So, How					
If Other, Explain:				REMARKS							
Well Head Completion: Pitless Unit											
12" Above Grade		Other (Specify)									
It Other, Specify				Driller's Or Firm's Name		License Number					
				Address							
				Signed By		Date					