1313

STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND & WATER
Alaska Hydrologic Survey

WATER WELL LOG Revised 08/18/2016

Drilling Started: ____/____/_____ Completed: 9 / 3 / 1981 Pump Install: ____/____/_____

City/Borough	Subdivision	Block	Lot	Property Owner Name & Address
Matanuska-Susitna Borough	SCOTWOOD ESTATES 1	B4	L13	JACOBSEN ,

Well location: Latitude _____ **Longitude** _____

Meridian S Township 018N Range 001W Section 26 , NE 1/4 of SE 1/4 of SE 1/4 of NW 1/4

BOREHOLE DATA: (from ground surface)

Suggest T.**M. Hanna's hydrogeologic classification system***
https://my.ngwa.org/NC__Product?id=a185000000BYub3AAD

	Depth From	Depth To

Include description or sketch of well location (include road names, buildings, etc.):

North

AS 41.08.020(b)(4) and AAC 11 AAC 93.140(a) require that a copy of the well log be submitted to the Department of Natural Resources within **45 days of well completion**. Well logs may be submitted using the online well log reporting system available at:

https://dnr.alaska.gov/welts/

OR email electronic well logs to

dnr.water.reports@alaska.gov

Drilling method: ☐ Air rotary, ☐ Cable tool, ☐ Other _____

Well use: ☐ Public supply, ☐ Domestic, ☐ Reinjection, ☐ Hydrofracking ☐ Commercial, ☐ Observation/Monitoring, ☐ Test/Exploratory, ☐ Cooling, ☐ Irrigation/Agriculture, ☐ Grounding, ☐ Recharge/Aquifer Storage, ☐ Heating, ☐ Geothermal Exploration, ☐ Other _____

Fluids used: _____

Depth of hole: 85 ft Casing stickup: _____ft

Casing type: _____ Casing thickness: _____ inches

Casing diameter: _____ inches Casing depth: _____ ft

Liner type: _____ Depth: _____ ft Diameter: _____inches

Note: _____

Well intake opening type: ☐ Open end, ☐ Open hole, ☒ Other _____

Screen type: _____, Screen mesh size: _____

Screen start: _____ ft, Screen stop:_____ ft, Perforated ☐ Yes ☒ No

Perforation description:_____ Perf from: _____ ft, Perf to: _____ft, Perf from: _____ ft, Perf to: _____ ft

Gravel packed ☐ Yes ☒ No Gravel start: _____ ft , Gravel stop:_____ ft

Note: _____

Static water (from top of casing): _____ ft on____/____/_____ Artesian well ☐

Pumping level & yield: _____ feet after _____ hours at _____ gpm

Method of testing:_____

Development method:_____ Duration: _____

Recovery rate: _____ gpm

Grout type: _____ Volume _____

Depth: From _____ft, To _____ft

Final pump intake depth: _____ ft Model: _____

Pump size: _____ hp Brand name: _____

Was well disinfected upon completion? ☐ Yes ☒ No

Method of disinfection: _____

Was water quality tested? ☐ Yes ☒ No

Water quality parameters tested: _____

Well driller name: .....

Company name: CB DRILLING .....

Mailing address:.....

City: _____ State: AK Zip: _____

Phone number: (_____) _____- _____

Driller's signature: _____

Date: _____/_____/_____

Anchorage Municipal Code 15.55.060(I) and North Pole Ordinance 13.32.030(D) require that a copy of this well log be submitted to the Development Services Department/City within **30 days of well completion**.

City Permit Number: _____

Date of Issue: _____/____/_____

Parcel Identification Number: _____-_____-_____

*Guide for Using the Hydrogeologic Classification System for Logging Water Well Boreholes by Thomas M. Hanna NGWA Press

JOB INVOICE

Ardee R. Holman
C B DRILLING
P. O. Box 1210
WASILLA, ALASKA 99687
Phone 376-5452

9/3/81

0219

CUSTOMERS ORDER NO.	DATE ORDERED
ORDER TAKEN BY	DATE PROMISED ☐ A.M. ☐ P.M.
BILL TO ~~RADGO~~ Jacobsen	PHONE
ADDRESS Box 1403	MECHANIC
CITY Wasilla, Ak 99687	HELPER
JOB NAME AND LOCATION Scottwood	☐ DAY WORK ☐ CONTRACT ☐ EXTRA
DESCRIPTION OF WORK	

14-4 SW

QUANT.	DESCRIPTION OF MATERIAL USED	PRICE	AMOUNT
	WELL LOG:		
	0 to 74' silt, cobble & rocks		
	74 to 85' gravel, water		
	8 gpm		
	ADL - 21314		
	Jacobsen		
	NE SE SE NW SEC 26 T 18 N R 1 W S.M		

HOURS	LABOR	AMOUNT	
	MECHANICS @		TOTAL MATERIALS
	HELPERS @		TOTAL LABOR
	TOTAL LABOR		
			TOTAL

I hereby acknowledge the satisfactory completion of the above described work:

SIGNATURE

DATE COMPLETED

LOCAL NO. SB 18-1-26-BDDA 1-2
USGS SITE [illegible]