

34045

DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND & WATER
WATER WELL LOG

Drilling Started: 4/23/09 Completed: 07/27/09

City/Borough:	Subdivision:	BLOCK	LOT	Property Owner Name & Address: <u>Anchorage Point State Well</u>
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Meridian _____ Township _____ Range _____ Section _____ 1/4 of _____ 1/4 of _____ 1/4 of _____ 1/4

BOREHOLE DATA: (from ground surface) Depth		Drilling method: <input type="checkbox"/> Air rotary, <input type="checkbox"/> Cable tool <input type="checkbox"/> Other _____	
Material: Type, Color & wetness		Well use: <input type="checkbox"/> Public supply, <input type="checkbox"/> Domestic, <input type="checkbox"/> Other _____	
	From	To	
<u>Clay, Brown</u>	<u>0</u>	<u>38</u>	Depth of hole: <u>87</u> ft, Casing stickup: <u>2</u> ft
<u>Sand grey</u>	<u>38</u>	<u>72</u>	Casing type: <u>Steel</u> Thickness <u>44</u> inches
<u>Sandy coal</u>	<u>72</u>	<u>74</u>	Casing diameter: <u>8</u> inches Casing depth: <u>86</u> ft
<u>Sandy gravel 80 gpm</u>	<u>74</u>	<u>87</u>	Liner type: _____ Diameter: _____ inches Depth: _____ ft
			Note: _____
			Static water (from top of casing): <u>46</u> ft on <u>4/2/09</u>
			Pumping level & yield: _____ feet after _____ hours at _____ gpm
			Recovery rate: _____ gpm, Method of testing: _____
			Development method: _____ Duration: _____
			Well intake opening type: <input type="checkbox"/> Open end <input checked="" type="checkbox"/> Open hole, Other <input type="checkbox"/>
			<input type="checkbox"/> Screened; Start: <u>77</u> ft, Stopped <u>83</u> ft
			Screen type: <u>Stainless</u> Slot/mesh size <u>10/20</u>
			<input type="checkbox"/> Perforated; Start: _____ ft, Stopped _____ ft
			Start: _____ ft, Stopped _____ ft
			Gravel packed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No From _____ ft to _____ ft
			Note: _____
			Grout type: <u>Bentonite</u> Volume <u>200 lbs</u>
			Depth; from <u>0-25</u> ft, to _____ ft
			Pump intake depth: <u>71</u> ft <u>recommended</u>
			Pump size <u>3</u> hp Brand name <u>Locals</u>
			Was well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Method of disinfection: _____
			Driller comments/ disclaimers: _____
			Well driller name: <u>Jett E. Ellis</u>
			Company name: <u>Handy Well Drilling & Pump</u>
			Mailing address: <u>P.O. Box 569</u>
			City: <u>Anchorage</u> State: <u>AK</u> Zip <u>99556</u>
			Phone number: <u>(907) 235-8821</u>
			Drillers signature: <u>[Signature]</u>
			Date: <u>5/17/09</u>

Alaska state law requires that a copy of this well log be forwarded to the Department of Natural Resources within 45 days (AK statutes 38.05.020, 38.05.035, 41.08.020, 46.15.020 and AK regulations 11 AAC 93.140). Faxes are acceptable.

Alaska DNR, Division of Mining, Land and Water,
550 W 7th Avenue, Suite 1020
Anchorage, AK 99501-3562

Phone (907)269-8638 and fax (907)269-8847

If the well is within city limits, the City of Anchorage requires that a copy of this well log be forwarded to the city within 60 days and another copy of this log be forwarded to the owner of the property, on which the well is located, within 30 days.

City Permit Number: _____
Date of Issue: 5/17/09

Parcel Identification Number: _____

Is well located at approved permit location? Yes or No