



STATE OF ALASKA 44034
 DEPARTMENT OF NATURAL RESOURCES
 DIVISION OF MINING, LAND & WATER
 Alaska Hydrologic Survey

WATER WELL LOG Revised 08/18/2016

Drilling Started: ____ / ____ / ____ Completed: ____ / ____ / ____ Pump Install: ____ / ____ / ____

City/Borough	Subdivision	Block	Lot	Property Owner Name & Address
Kenai Peninsula Borough	GRAVEL PIT		NONE	US FOREST SERVICE, GIRDWOOD AK,

Well location: Latitude 60.7285652 Longitude -149.320969
 Meridian S Township 007N Range 001E Section 05, NE 1/4 of NW 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=a18500000BYub3AAD

Depth
From _____ To _____

Drilling method: Air rotary, Cable tool, Other _____ Driven _____
 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: 13.2 ft Casing stickup: _____ ft
 Casing type: _____ Casing thickness: _____ inches

Casing diameter: 2 inches Casing depth: _____ ft

Liner type: _____ Depth: _____ ft Diameter: _____ inches

Note: OUTER PROTECTIVE 6-INCH CASING

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
 Gravel packed Yes No Gravel start: _____ ft, Gravel stop: _____ ft
 Note: _____

Static water (from top of casing): 3.32 ft on 4 / 5 / 2016 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: UNKNOWN _____

Mailing address: _____

City: _____ State: AK Zip: _____

Phone number: (_____) _____ - _____

Driller's signature: _____

Date: _____ / _____ / _____

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

Anchorage Municipal Code 15.55.060(l) 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: _____ - _____ - _____