

NOTE:

White Copy - Division's Copy  
 Green Copy - Driller's Copy  
 Yellow Copy - Owner's Copy

WELL CONSTRUCTOR'S REPORT  
 Form 3300-15  
 Rev. 5-85

NOV 20 1986

1. COUNTY <u>Crawford</u>		CHECK (✓) ONE: <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City		Name <u>Clayton</u>	
2. LOCATION 1/4 Section or Gov't. Lot <u>NW 1/4 NW 14</u> Section <u>27</u> Township <u>10N</u> Range <u>4W</u>		3. NAME <input type="checkbox"/> OWNER <input type="checkbox"/> AGENT AT TIME OF DRILLING CHECK (✓) ONE <u>Village of Gays Mills</u>			
OR - Grid or Street No. _____ Street or Road Name <u>Highway 131</u>		ADDRESS _____			
AND - If available subdivision name, lot & block No. _____		POST OFFICE <u>Gays Mills, WI</u>		ZIP CODE <u>54631</u>	
4. Distance in feet from well to nearest: (Record answer in appropriate block)		Building		Sanitary Bldg. Drain	
		Sanitary Bldg. Sewer		Floor Drain Connected To:	
		Storm Bldg. Drain		Storm Bldg. Sewer	
		Street Sewer		Other Sewers	
		Foundation Drain Connected to:		Sewage Sump	
		Clearwater Dr.		Clearwater Sump	
		Privy		Pet Waste Pit	
		Pit: Nonconforming Existing		Subsurface Pumproom	
		Well		Barn Gutter	
		Pump		Animal Barn Pen	
		Tank		Animal Yard	
		Temporary Manure Stack or Platform		Manure Storage Basin	
		Watertight Liquid Manure Tank or Basin		Concrete Floor Only	
		Manure Pressure Pipe		Concrete Floor and Partial Concrete Walls	
		Subsurface Gasoline or Oil Tank		Other (Describe)	
		Waste Pond or Land Disposal Unit (Specify Type)			
5. Well is intended to supply water for: <u>Village Well No. 2</u>		9. FORMATIONS			
6. DRILLHOLE		Kind		From (ft.) To (ft.)	
Dia. (in.) From (ft.) To (ft.) Dia. (in.) From (ft.) To (ft.)		<u>sand</u>		Surface 81	
<u>18</u> Surface <u>86</u> <u>12</u> <u>155</u> <u>286</u>		<u>limerock</u>		<u>21</u> <u>286</u>	
<u>13</u> <u>86</u> <u>155</u>		<u>broken rock</u>		<u>286</u> <u>74</u>	
		<u>sand rock</u>		<u>74</u> <u>286</u>	
7. CASING, LINER, CURBING AND SCREEN		10. TYPE OF DRILLING MACHINE USED			
Material, Weight, Specification		<input type="checkbox"/> Cable Tool <input checked="" type="checkbox"/> Rotary-hammer w/drilling mud & air <input type="checkbox"/> Jetting with			
Dia. (in.) Mfg. & Method of Assembly		<input type="checkbox"/> Rotary-air w/drilling mud <input type="checkbox"/> Rotary-hammer & air <input type="checkbox"/> Air			
From (ft.) To (ft.)		<input type="checkbox"/> Rotary-w/drilling mud <input type="checkbox"/> Reverse Rotary <input type="checkbox"/> Water			
<u>14</u> <u>.375 wall,</u>		Well construction completed on <u>8/30</u> 19 <u>86</u>			
<u>A53-B</u>		Well is terminated <u>18</u> inches <input checked="" type="checkbox"/> above final grade <input type="checkbox"/> below			
<u>U.S. Steel</u>		Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<u>Surface</u> <u>*91'7"</u>		Well sealed watertight upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
8. GROUT OR OTHER SEALING MATERIAL		11. MISCELLANEOUS DATA			
Kind From (ft.) To (ft.)		Yield Test: <u>14</u> Hrs. at <u>650</u> GPM		Depth from surface to normal water level <u>10</u> Ft.	
<u>Cement</u> <u>Surface</u> <u>86</u>		Depth of water level when pumping <u>57.3</u> Ft. Stabilized <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Water sample sent to <u>Sample taken by Mud-State Assoc</u> Laboratory on _____ 19 _____	
Your opinion concerning other pollution hazards, information concerning difficulties encountered, and data relating to nearby wells, screens, seals, method of finishing the well, amount of cement used in grouting, blasting, etc., should be given on reverse side.					
Signature <u>Sam Vander Lende</u>		Business Name and Complete Mailing Address <u>SAM'S ROTARY DRILLERS ROUTE 2 RANDOLPH, WISCONSIN 53956</u>		cc: SGS SD WELL LOG BOOK	
Registered Well Driller					