

WELL CONSTRUCTOR'S REPORT
FORM 3300-15

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES
Box 450
Madison, Wisconsin 53701

NOTE
WHITE COPY - DIVISION'S COPY
GREEN COPY - DRILLER'S COPY
YELLOW COPY - OWNER'S COPY

1. COUNTY Crawford		CHECK ONE <input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City			NAME Bridgeport	
2. LOCATION - 1/4 Section NW 1/4 SW 1/4		Section 10	Township 6 N	Range 6 W	3. OWNER AT TIME OF DRILLING Robert Wolcott	
OR - Grid or street no.		Street name			ADDRESS R.R.	
AND - If available subdivision name, lot & block no.					POST OFFICE Praire Du Chein, Wisc.	

4. Distance in feet from well to nearest:

BUILDING C.I.	SANITARY SEWER TILE	FLOOR DRAIN C.I.	FOUNDATION DRAIN SEWER CONNECTED	FOUNDATION DRAIN INDEPENDENT	WASTE WATER DRAIN C.I.
40	60	None	None	None	60

CLEAR WATER DRAIN C.I.	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO	ABANDONED WELL	SINK HOLE
None	80	None	115	None	None	None	None	None

OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, etc.)
None

5. Well is intended to supply water for:
Mobile Home

6. DRILLHOLE						9. FORMATIONS		
Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)
10	Surface	147				Sandy Clay	Surface	15
6	147	190				Sand and Gravel	15	45
7. CASING, LINER, CURBING, AND SCREEN						Brn. Limestone	45	85
Dia. (in.)	Kind and Weight		From (ft.)	To (ft.)		Brn. Limestone with Sand	85	106
6	Steel P. E. 18.97		Surface	147		Brn. and Mottled Flint Rock	106	110
						Brn. Limestone with Sand	110	130
						Jordan Sandstone	130	190

8. GROUT OR OTHER SEALING MATERIAL			10. TYPE OF DRILLING MACHINE USED			
Kind	From (ft.)	To (ft.)	<input checked="" type="checkbox"/> Cable Tool	<input type="checkbox"/> Direct Rotary	<input type="checkbox"/> Reverse Rotary	
Neat Cement Grout	Surface	147	<input type="checkbox"/> Rotary - air w/drilling mud	<input type="checkbox"/> Rotary - hammer with drilling mud & air	<input type="checkbox"/> Jetting with <input type="checkbox"/> Air <input type="checkbox"/> Water	
			Well construction completed on 8-20 19 71			

11. MISCELLANEOUS DATA				Well is terminated 12 inches <input checked="" type="checkbox"/> above <input type="checkbox"/> below final grade			
Yield test:	4	Hrs. at	6	GPM			
Depth from surface to normal water level	150			ft.	Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Depth to water level when pumping	154			ft.	Well sealed watertight upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Water sample sent to State Lab. of Hygiene, Madison laboratory on: **8-23 19 71**

Your opinion concerning other pollution hazards, information concerning difficulties encountered, and data relating to nearby wells, screens, seals, type of casing joints, method of finishing the well, amount of cement used in grouting, blasting, sub-surface pumprooms, access pits, etc., should be given on reverse side.

SIGNATURE <i>Duane Lubbers</i> Duane Lubbers	#W.D. 410 Registered Well Driller	COMPLETE MAIL ADDRESS Duane Lubbers Farmersburg, Iowa 52047
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Please do not write in space below

COLIFORM TEST RESULT 299	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
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