

WELL CONSTRUCTOR'S REPORT TO WISCONSIN STATE BOARD OF HEALTH
See Instructions on Reverse Side

1. County Crawford Town Waupesa
2. Location in Village of Waupesa
3. Owner or Agent Joe Wall
4. Address Waupesa Wis
5. From well to nearest: Building 10 ft; sewer _____ ft; drain _____ ft; septic tank _____ ft;
dry well or filter bed _____ ft; abandoned well _____ ft.
6. Well is intended to supply water for: _____

Sec 17
T 7 N, 4 W
RECEIVED
OCT 14 1953
ENVIRONMENTAL
SANITATION

7. DRILLHOLE OR EXCAVATION:

Dia. (in.)	From (ft.)	To (ft.)
4	Standard	
4	0	55

10. FORMATIONS:

Kind	Thick-ness (ft.)	Total Depth (ft.)
top Soil & gravel	0	20
Sand rock	25	45
Shale	10	55

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind	From (ft.)	To (ft.)
4	Standard	0	45
	Cemented in		

9. GROUT:

Kind	From (ft.)	To (ft.)

11. MISCELLANEOUS DATA:

Yield test: 2 Hrs. at ~~5~~ 5 GPM.
Depth from surface to water: 35 ft.
Water-level when pumping: 35 ft.

Water sample sent to laboratory at
Sample to be sent in on this week 1953

Construction of the well was completed on Sep 15 1953
The well is terminated 12 inches (above) (below) the permanent grade.
Was the well disinfected upon completion? Yes No _____
Was the well sealed watertight upon completion? Yes No _____

Signature _____
Registered Well Driller

Waupesa Wis.
Complete Mail Address
Joseph Wall

(Well Constructor's Copy)