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NOTE

STATE OF WISCONSIN

DEPARTMENT OF NATURAL RESOURCES Box 450

WHITE COPY - DIVISION'S COPY Madison, Wisconsin 53701 GREEN COPY - DRILLER'S COPY YELLOW COPY - OWNER'S COPY 1. COUNTY CHECK ONE NAME Village City Town 3. OWNER AT TIME OF DRILLING 2. LOCATION -Range Section Township. OR – Grid or street no. Street name ADDRESS AND -If available subdivision name, lot & block no. POST OFFICE BUILDING SANITARY SEWERIFLOOR DRAIN FOUNDATION DRAIN 4. Distance in feet from well to nearest: SEWER CONNECTED INDEPENDENT C. I. TILE C. I. TILE C. I. TILE (Record answer in appropriate block) CLEAR WATER DRAIN | SEPTIC TANK | PRIVY ABSORPTION FIELD ABANDONED WELL | SINK HOLE SEEPAGE PIT BARN SILO C. I. THE OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, \(\psi tc. \) 5. Well is intended to supply water for: 6. DRILLHOLE 9. FORMATIONS From (ft.) Dia. (in.) From (ft.) From (ft.) To (ft.) To (ft.) Dia. (in.) To (ft.) Kind Surface Surface 7. CASING, LINER, CURBING, AND SCREEN To (ft.) Dia. (in.) From (ft.) Kind and Weight Surface 8. GROUT OR OTHER SEALING MATERIAL 10. TYPE OF DRILLING MACHINE USED From (ft.) To (ft.) Kind Reverse Rotary Cable Tool **Direct Rotary** Surface Rotary - hammer Jetting with Rotary - air with drilling mud & air w/drilling mud 🛄 Air 🔛 Water 0 Well construction completed on 11. MISCELLANEOUS DATA above Well is terminated final grade inches Hrs. at **GPM** below Yield test: Well disinfected upon completion 130 ft. Depth from surface to normal water level Well sealed watertight upon completion Depth to water level when pumping laboratory on: Water sample sent to 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. COMPLETE MAIL ADDRESS **SIGNATURE** Registered Well Driller

Please do not write in space below

GAS = 48 HRS.

GAS - 24 HRS.

CONFIRMED

REMARKS

364 REV. 3-71

COLIFORM TEST RESULT