

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

1. County Crawford Town Eastman
Village City
Check one and give name

2. Location Section 6 T8N, R5W
Name of street and number of premise or Section, Town and Range numbers

3. Owner or Agent Daniel Boland
Name of individual, partnership or firm

4. Mail Address R.F.D. Seneca, Wis.
Complete address required

5. From well to nearest: Building 0 ft; sewer 0 ft; drain 0 ft; septic tank 0 ft;
dry well or filter bed 0 ft; abandoned well 0 ft.

6. Well is intended to supply water for: School

7. DRILLHOLE:

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
10	0	124	6	124	550

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	Standard ^{WT}	0	124

9. GROUT:

Kind	From (ft.)	To (ft.)
Cement	8	124

11. MISCELLANEOUS DATA:

Yield test: 10 Hrs. at 50 GPM.
Depth from surface to water-level: 400 ft.
Water-level when pumping: 425 ft.
Water sample was sent to the state laboratory at:
Madison on Aug 8 1960
City

10. FORMATIONS:

Kind	From (ft.)	To (ft.)
Red Clay	0	28
lime rock	28	80
Clay & sand	80	115
limestone	115	236
blue limestone	236	395
conglomerate	395	493
blue shale	493	550

REC-493
AUG 16 1960

Construction of the well was completed on: July 31 1960
SANDHARY
ENGINEERING

The well is terminated 24 inches
 above, below the permanent ground surface.

Was the well disinfected upon completion?
Yes No

Was the well sealed watertight upon completion?
Yes No

Signature Kenneth Corpiam Registered Well Driller
R3 Box 36 Bozocob, Wis.
Complete Mail Address

Rec'd AUG 9 - 1960 No. 30163

Ans'd Copy 8-23-60

Interpretation SAFE - BACTERIOLOGICALLY

9-12-60
rest

10 ml 10 ml 10 ml 10 ml 10 ml
Gas—24 hrs. _____
48 hrs. _____
Confirm _____
B. Coli _____
Examiner _____