STATE OF WISCONSIN DEPARTMENT OF NATURAL RESOURCES WELL CONSTRUCTOR'S REPORT Box 450 WHITE COPY - DIVISION'S COMP GREEN COPY - DRILLER'S COPY YELLOW COPY - OWNER'S COPY Wel-6 Madison, Wisconsin 53701 1. COUNTY CHECK ONE NAME Village Town . ☐ City ection, section, township and range. Also give subdivision name, lot and block numbers, LOCATION (Number and when available.) 3. OWNER AT TIME OF DRILLING 4. OWNER'S COMPLETE MAIL ADDRESS WASTE WATER DRAIN 5. Distance in feet from well to nearest: BUILDING SANITAR C. I. TILE C. I. TILE SEWER CONNECTED INDEPENDENT C. I. THE (Record enswer in appropriate block) CLEAR WATER DRAIN | SEPTIC TANK | PRIVY | SEEPAGE PIT ABSORPTION FIELD ABANDONED WELL | SINK HOLE BARN SILO C. I.: THE OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, etc.) 6. Well is intended to supply water for: ountry 7. DRILLHOLE 10. FORMATIONS Dia. (in.) To (ft.) Dia. (in.) From (ft.) To (ft.) From (ft.) From (ft.) To (ft.) Surface Surface Q 8. CASING, LINER, CURBING, AND SCREEN To (ft.) Kind and Weight From (ft.) Dia. (in.) Surface 9. GROUT OR OTHER SEALING MATERIAL From (ft.) To (ft.) Kind Surface 15 15 Well construction completed on 11-6 final grade Well is terminated 2 Hrs. at **GPM** Yield test: 40 X Yes Well disinfected upon completion ΠNο ft. Depth from surface to normal water level Well sealed watertight upon completion X Yes □ No ft. Depth to water level when pumping laboratory on: /2 - 8 -19 70 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, subsurface pumprooms, access pits, etc., should be given on reverse side. COMPLETE MAIL ADDRESS SIGNATURE Registered Well Driller 173 Box 84 Please do not write in space below GAS - 24 HRS. GAS - 48 HRS. CONFIRMED COLIFORM TEST RESULT REMARKS