WELL CONSTRUCTOR'S REPORT

WHITE COPY - DIVISION'S COPY GREEN COPY - DRILLER'S COPY YELLOW COPY - OWNER'S COPY STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES
Box 450
Madison, Wisconsin 53701

1. COUNTY	Crau	Jan.	<i></i>	Town		je [] Ci	NAME	S	11	;			
		1/ 11	_	ction, township				me, lot and	block number	s when sve	ilahje.)		
SE 3. OWNER	T TIME OF		<u>-2,3</u>	٦	<u></u>	<u>7 N</u>	^	(3 V	$V_{}$	· ·			
		/	<u> </u>	eith	Ya	hn	<u>ノ</u>						
4. OWNER'S	COMPLETE	MAIL ADDI	ESS K	2	013	000	ohe	e,	His.	15	3805	<u> </u>	
5. Distance	in feet fro	m well to	nearest:	BUILDING SA	NITARY SEV C. I. , TII	VER FLOOR	1		NDATION DR			TER DRAIN	
(Record en	swer in appro	ppriate block)		8 1	2'	12] }				12		
CLEAR WAT	ER DRAIN S	SEPTIC TAN	K PRIVY	SEEPAGE PIT	ABSORPT	ION FIELD	BARN	SILO	ABANDONEI	WELL SI	NK HOLE		
		70		75			125	[80				
OTHER POL	LUTION SOU	RCES (Give	description	such as dump,	quarry, dra	nage well,	iream, pond	d, lake, etc	i.)		· · · · · ·	<u>, - , - , </u>	
6. Well is	intended	to supply	water fo	「・・・」 ラ 。		h							
7. DRILLHO	DLE			V a	rm	10. FO	RMATION	vs			<u> </u>		
Dia. (in.) From (ft.) To (ft.) Dia. (in.) From (ft.) To (ft.)							Kind					To (ft.)	
10	Surface	40	6	40	100			lay	,		Surface	30	
						0	ind	A	201		30	100	
8. CASING	, LINER, C	JRBING, A	ND SCRE	EŅ		-			<u> </u>				
Die. (in.)		ind and Weigh		From (ft.)	To (ft.)								
6	Plain	end	19.19	Surface	40								
			`	^						į			
						_	- 1 <u>-</u>	 	· <u>-</u> · ·-				
		·			<u> </u>	<u> </u>							
	····								· <u> · · · · · · · · · · · · · · · · ·</u>				
9. GROUT	OR OTHER	SEALING	MATER	AL									
Kind From (ft.)						 							
Clark				Surface	30						ļ	· <u></u>	
Comont 30 40							onstructio	on comp	leted on	9-1	15-	19 69	
11. MISCELLANEOUS DATA							Well is terminated						
Yield test:			J ⊓rs.		8 GPM	<u> </u>					below ''		
Depth from surface to normal water level 45 ft.													
Depth to water level when pumping 50 ft.							Well sealed watertight upon completion 🔀 Yes 🗌 No						
Water sam	ple sent to	ma	di	on_				labo	ratory on:	10 -	28-	19 69	
wells, scre	ens, seals,	type of	casing jo	n hazards, i ints, method ould be give	d of finisi	hing the	well, am	culties e nount of	ncountered, cement use	and dated in gro	a relating outing, bla	to nearby sting, sub-	
								ANNERS		<u> </u>	<u></u>		
SIGNATURE	<u> </u>	.				00		es i i	Boac	okal	را م	<i>E</i> -	
Lema	reth (opia	2	Registered W			,		dris	د ر،د	300	<u> </u>	
COLIFORM TEST RESULT GAS — 24 HRS. GA							<u> </u>	CONFIRI	MED	REMARK	S		
722						-							