	VISCONSIN STATE BOARD OF HEALTH
_	MAD 1 - 100-
1. County Crawford	-\Village - \Village
2. Location Section 22	City Check one and give nam SANITARY
	se or Section, Town and Range numbers
3. Owner or Agent Maskra 1	Brothers
4. Mail Address P 70 Jame of Individual	milles dus.
5. From well to nearest: Building_/_O_ft; sewer	60 ft; drain 60 ft; septic tank 15 ft;
dry well or filter bed \mathcal{So}_{-} ft; abandoned well.	O _ft
6. Well is intended to supply water for: 2	and hame
7. DRILLHOLE:	10. FORMATIONS:
Dia. (in.) From (ft.) To (ft.) Dia. (in.) From (ft.) To (ft.)	! From To
10 0 71 6 71 380	
10 0 11 000	Clay 0 15
	limerack 15 200
8. CASING AND LINER PIPE OR CURBING:	sandstone 200 250
Dia. (in.) Kind and Weight From (ft.) To (ft.)	limerock 250 300
6 Standard WT, 0 11	sandstone 300 380
9. GROUT:	
Kind From (ft.) To (ft.)	
Clark 0 15	
Como 1 15 71	Construction of the well was completed on:
11. MISCELLANEOUS DATA:	October 5 1964
·	
Yield test: Hrs. at GPM.	The well is terminatedinches
Depth from surface to water-level: 300 ft.	above, below the permanent ground surface.
	Was the well disinfected upon completion?
Water-level when pumping: $3 \cancel{L}_{}$ ft.	Yes_X No
Water sample was sent to the state laboratory at:	Was the well sealed watertight upon completion?
madison on mar 8 1965	Yes_X No
City	YesZ\ No
al eff	03 B. 121 B 00 21
Signature Andrew Well Driller	P3 Box 36 Box cohel 26 Complete Mail Address
riedac (A) zide wi	tte in space below
Rec'd MAR 9-1965 No. 9167 Ans'd MAR 111965	10 ml 10 ml 10 ml 10 ml
MAR 111965	Con 04 h
SAFE BACTERIOLOGICALLY	
Interpretation	48 hrs
·	Confirm 0 0 0 0 0
	B. Coli
;=====================================	Examiner

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