

1. COUNTY Crawford CHECK ONE  Town  Village  City NAME Seneca

2. LOCATION (Number and Street or 1/4 section, section, township and range. Also give subdivision name, lot and block numbers when available.)  
S 1/2 SE 1/4 NE 1/4 NE 1/4 Sec 25 T5P9 - N.R. 5 - W

3. OWNER AT TIME OF DRILLING James Rooney

4. OWNER'S COMPLETE MAIL ADDRESS  
Stricker Lese

5. Distance in feet from well to nearest:

BUILDING C. I.	SANITARY SEWER TILE	FLOOR DRAIN C. I.	FLOOR DRAIN TILE	FOUNDATION DRAIN SEWER CONNECTED	FOUNDATION DRAIN INDEPENDENT	WASTE WATER DRAIN C. I.	WASTE WATER DRAIN TILE
<u>None</u>							

CLEAR WATER DRAIN C. I.	CLEAR WATER DRAIN TILE	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO	ABANDONED WELL	SINK HOLE
		<u>60</u>							

OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, etc.)

6. Well is intended to supply water for: Home Farm Use

7. DRILLHOLE						10. FORMATIONS			
Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)	
<u>10"</u>	<u>Surface</u>	<u>42</u>	<u>5"</u>	<u>42</u>	<u>80</u>	<u>Clay</u>	<u>Surface</u>	<u>20</u>	
						<u>Sandstone</u>	<u>20</u>	<u>80</u>	

8. CASING, LINER, CURBING, AND SCREEN				
Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)	
<u>5"</u>	<u>9/16 BPT + c. 15#</u>	<u>Surface</u>	<u>42</u>	

9. GROUT OR OTHER SEALING MATERIAL		
Kind	From (ft.)	To (ft.)
<u>Cement</u>	<u>Surface</u>	<u>42</u>

11. MISCELLANEOUS DATA			
Yield test: <u>8</u>	Hrs. at <u>15</u>	GPM	Well construction completed on <u>5/4</u> 19 <u>73</u>
Depth from surface to normal water level <u>50</u> ft.	Well is terminated <u>15</u> inches <input type="checkbox"/> below	Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Well sealed watertight upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Depth to water level when pumping <u>63</u> ft.			

Water sample sent to Madison laboratory on: 5/9 1973

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 pumphouses, access pits, etc., should be given on reverse side.

SIGNATURE Edwin Wmeyer Registered Well Driller COMPLETE MAIL ADDRESS New albion Iowa Box 55

Please do not write in space below

COLIFORM TEST RESULT	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
<u>784</u>				