

WELL CONSTRUCTOR'S REPORT TO WISCONSIN STATE BOARD OF HEALTH

See Instructions on Reverse Side

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

2. Location Lot 3-4-Block 6 (T9N, R6W) Sec 14 or 23 Name of street and number of premises or Section, Town and Range numbers

3. Owner or Agent Mrs Ethel Braesch Name of individual, partnership or firm

4. Mail Address Lynxville wis Complete address required

5. From well to nearest: Building 10 ft; sewer ft; drain ft; septic tank ft; dry well or filter bed ft; abandoned well ft. Privy cap

6. Well is intended to supply water for: Home

7. DRILLHOLE:

Table with columns: Dia. (in.), From (ft.), To (ft.), Dia. (in.), From (ft.), To (ft.). Handwritten entries: 8" Top 44, 4" 44 105

8. CASING AND LINER PIPE OR CURBING:

Table with columns: Dia. (in.), Kind and Weight, From (ft.), To (ft.). Handwritten entry: 4" Steel 11# top 44

9. GROUT:

Table with columns: Kind, From (ft.), To (ft.). Handwritten entry: Cement top 44

11. MISCELLANEOUS DATA:

Yield test: 4 Hrs. at 15 GPM. Depth from surface to water-level: 50 ft. Water-level when pumping: 72 ft. Water sample was sent to the state laboratory at: Madison on 5/9 1962 City

10. FORMATIONS:

Table with columns: Kind, From (ft.), To (ft.). Handwritten entries: Sand & Gravel top 30, Sandstone 30 105

RECEIVED

MAY 14 1962

SANITARY ENGINEERING

Construction of the well was completed on:

4/19 1962

The well is terminated 12 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 Edw W. Meyer Registered Well Driller Complete Mail Address New Alb. Ia

Rec'd MAY 10 1962 No. 14218

Ans'd Interpretation BIT

Table with columns: 10 ml, 10 ml, 10 ml, 10 ml, 10 ml. Rows: Gas-24 hrs., 48 hrs., Confirm, B. Coli

Examiner