

WELL CONSTRUCTOR'S REPORT TO WISCONSIN STATE BOARD OF HEALTH
See Instructions on Reverse Side

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

2. Location Section 13 - Town 9 - Range 6 West NW, Sec. 13
Name of street and number of premise or Section, Town and Range numbers

3. Owner or Agent Lesoy Nietert
Name of individual, partnership or firm

4. Mail Address Central City, Iowa
Complete address required

5. From well to nearest: Building 50 ft; sewer none ft; drain none ft; septic tank none ft;
dry well or filter bed none ft; abandoned well none ft.

6. Well is intended to supply water for: Farm

7. DRILLHOLE:

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
6"	0'	377'	5"	377'	490'

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
4"	Steel casing	0'	132'

9. GROUT:

Kind	From (ft.)	To (ft.)
Comment	0'	132'

11. MISCELLANEOUS DATA:

Yield test: 5 Hrs. at 10 GPM.
Depth from surface to water-level: 360 ft.
Water-level when pumping: 360 ft.
Water sample was sent to the state laboratory at:
Madison on June 27 1960
City

10. FORMATIONS:

Kind	From (ft.)	To (ft.)
Sandstone	377'	412'
Shale	412'	452'
Sand	452'	490'

RECEIVED

JUN 28 1960

SANITARY
ENGINEERING

Construction of the well was completed on:
June 16 1960

The well is terminated 8 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 Duane Lubbers
Registered Well Driller

Parnsburg, Iowa
Complete Mail Address

Please do not write in space below

Rec'd _____ No. _____
Ans'd _____
Interpretation _____

10 ml 10 ml 10 ml 10 ml 10 ml
Gas—24 hrs. _____
48 hrs. _____
Confirm _____
B. Coli _____
Examiner _____