

WELL CONSTRUCTOR'S REPORT TO WISCONSIN STATE BOARD OF HEALTH

Wet 6

See Instructions on Reverse Side

1. County Crawford Town  Clayton  
 Village  City  RECEIVED  
OCT 23 1962  
 2. Location Section 19 Range T8 North (10N, R3W)  
 Name of street and number of premise or section, Town and Range numbers  
 3. Owner  or Agent  Les Smith  
 Name of individual, partnership or firm  
 4. Mail Address R70 Gay Mills, Wisconsin  
 Complete address required  
 5. From well to nearest: Building 8 ft; sewer 125 ft; drain 125 ft; septic tank 150 ft;  
 dry well or filter bed 160 ft; abandoned well 0 ft.

6. Well is intended to supply water for: farm home

7. DRILLHOLE:

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
10	0	40	6	40	420

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	Standard wt	0	40

9. GROUT:

Kind	From (ft.)	To (ft.)
Clay	0	10
Cement	10	40

11. MISCELLANEOUS DATA:

Yield test: 3 Hrs. at 20 GPM.

Depth from surface to water-level: 350 ft.

Water-level when pumping: 360 ft.

Water sample was sent to the state laboratory at:

Madison on 10-22 1962  
 City

10. FORMATIONS:

Kind	From (ft.)	To (ft.)
Clay	0	10
limestone	10	420
<u>This was an old well repaired</u>		

Construction of the well was completed on:

September 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 Kenneth Coplan  
 Registered Well Driller

R3, Box 36, Boscobel, Wis.  
 Complete Mail Address

Please do not write in space below

Rec'd OCT 23 1962 No. 40397

Ans'd \_\_\_\_\_

Interpretation \_\_\_\_\_

SAFE—BACTERIOLOGICALLY

10 ml 10 ml 10 ml 10 ml 10 ml

Gas—24 hrs. \_\_\_\_\_

48 hrs. \_\_\_\_\_

Confirm \_\_\_\_\_

B. Coli O

Examiner \_\_\_\_\_