

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

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

2. Location Sec-21 R-10 E (10N, R4W)  
Name of street and number of premise or Section, Town and Range numbers

3. Owner  or Agent  Byron Curley (Clerk) Meek High Ridge School  
Name of individual, partnership or firm

4. Mail Address Guys Mills  
Complete address required

5. From well to nearest: Building 15 ft; sewer \_\_\_\_\_ ft; drain \_\_\_\_\_ ft; septic tank 80 ft;  
 dry well or filter bed 100 ft; abandoned well \_\_\_\_\_ ft.

6. Well is intended to supply water for: School ANG 29 1958

**7. DRILLHOLE:**

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
10	0	47	6	155	402
8	47	155			

**8. CASING AND LINER PIPE OR CURBING:**

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	std BK	0	155

**9. GROUT:**

Kind	From (ft.)	To (ft.)
Cement	0	140

**11. MISCELLANEOUS DATA:**

Yield test: 2 Hrs. at 20 GPM.  
 Depth from surface to water-level: 220 ft.  
 Water-level when pumping: 220 ft.  
 Water sample was sent to the state laboratory at:  
Madison on 7 1958  
City

**10. FORMATIONS:**

ENVIRONMENTAL SANITATION	From (ft.)	To (ft.)
Clay	0	5
limestone	5	140
Mud	140	155
Shale	155	230
limestone	230	350
Sandy shale	350	402

Construction of the well was completed on:  
April 10 1958

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 Don O'Connor  
Registered Well Driller

Spring Green  
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 \_\_\_\_\_