

1. COUNTY Crawford CHECK ONE Town Village City NAME Clayton

2. LOCATION (Number and Street or 1/4 section, section, township and range. Also give subdivision name, lot and block numbers when available.)
NW 1/4 part of Sec. 27 [??] T 10 N R 4 W

3. OWNER AT TIME OF DRILLING Mr. Ellery Teach

4. OWNER'S COMPLETE MAIL ADDRESS R 2 Garp Mills, Wis., 5463

5. Distance in feet from well to nearest:

BUILDING C.I.	SANITARY C.I.	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
125'	130'		130'					135'

CLEAR WATER DRAIN C.I.	CLEAR WATER DRAIN TILE	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILLO	ABANDONED WELL	SINK HOLE
		160'		175'				200'	

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

6. Well is intended to supply water for: Home

7. DRILLHOLE						10. FORMATIONS			
Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)	
10	Surface	303	6	303	540	Clay	Surface	13	
						limestone OPC	13	150	
						sandstone ET	150	270	
						hard shalestone ETC	270	450	
						sandstone EW	450	540	

8. CASING, LINER, CURBING, AND SCREEN

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	new black steel plain end 19.18	Surface	303

9. GROUT OR OTHER SEALING MATERIAL

Kind	From (ft.)	To (ft.)
Clay	Surface	13
Cement	13	303

11. MISCELLANEOUS DATA
 Yield test: 7 Hrs. at 18 GPM

RECEIVED
 SEP 08 1969
 Dept. Nat. Res.

Well construction completed on 7-30- 1969

Well is terminated 10 inches above below final grade

Well disinfected upon completion Yes No

Well sealed watertight upon completion Yes No

Water sample sent to Madison, Wis. laboratory on: 9-3- 1969

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

SIGNATURE Herbert Coplan Registered Well Driller COMPLETE MAIL ADDRESS 53805 R3 Box 84 Boocohol, Wis.

Please do not write in space below

COLIFORM TEST RESULT	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
930				