

1. COUNTY <i>Crawford</i>		CHECK ONE <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City		NAME <i>Freeman</i>		
2. LOCATION (Number and Street or 1/4 section, section, township and range. Also give subdivision name, lot and block numbers when available.) <i>NE part of Sec. 9 T10N R.5W</i>						
3. OWNER AT TIME OF DRILLING <i>Robert Anderson</i>						
4. OWNER'S COMPLETE MAIL ADDRESS <i>R2 Ferrysville 54628</i>						
5. Distance in feet from well to nearest: (Record answer in appropriate block)		BUILDING C. I.	SANITARY SEWER C. I.	FLOOR DRAIN C. I.	FOUNDATION DRAIN SEWER CONNECTED INDEPENDENT	WASTE WATER DRAIN C. I.
		<i>8'</i>	<i>15'</i>	<i>15'</i>		
CLEAR WATER DRAIN C. I.	SEPTIC TANK TILE	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO
	<i>83'</i>			<i>100'</i>		
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		
Dis. (in.)	From (ft.)	To (ft.)	Dis. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)
<i>10</i>	<i>Surface</i>	<i>144</i>	<i>6</i>	<i>144</i>	<i>340</i>	<i>Clay</i>	<i>Surface</i>	<i>20</i>
						<i>lime rock</i>	<i>20</i>	<i>120</i>
						<i>loose limestone</i>	<i>120</i>	<i>130</i>
						<i>hard limestone</i>	<i>130</i>	<i>200</i>
						<i>hard shale stone</i>	<i>200</i>	<i>260</i>
						<i>sandstone</i>	<i>260</i>	<i>340</i>

8. CASING, LINER, CURBING, AND SCREEN			
Dis. (in.)	Kind and Weight	From (ft.)	To (ft.)
<i>6</i>	<i>new black steel plain ends 19.18</i>	<i>Surface</i>	<i>144</i>

9. GROUT OR OTHER SEALING MATERIAL		
Kind	From (ft.)	To (ft.)
<i>Clay</i>	<i>Surface</i>	<i>20</i>
<i>Cement</i>	<i>20</i>	<i>144</i>

11. MISCELLANEOUS DATA	
Yield test: <i>3</i> Hrs. at <i>16</i> GPM	Well is terminated <i>11</i> inches <input checked="" type="checkbox"/> above <input type="checkbox"/> below final grade
Depth from surface to normal water level <i>280</i> ft.	Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Depth to water level when pumping <i>290</i> ft.	Well sealed watertight upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Water sample sent to <i>Madison, Wis.</i>	laboratory on: <i>8-12-1968</i>

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

SIGNATURE <i>Sumeth Copian</i>	COMPLETE MAIL ADDRESS <i>R3 Box 84 Boonville, Wis. 53805</i>
Registered Well Driller	

Please do not write in space below

COLIFORM TEST RESULT	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
<i>955</i>				