

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

1. County Crawford Town  Eastman  
 Village  City  Check one and give name  
 2. Location Section 4 T. 5 N. R. 5 W.  
 Name of street and number of premise or Section, Town and Range numbers  
 3. Owner  or Agent  Ronnfeldt Brothers  
 Name of individual, partnership or firm  
 4. Mail Address R. F. O. Eastman, Wis.  
 Complete address required  
 5. From well to nearest: Building 10 ft; sewer 0 ft; drain 0 ft; septic tank 0 ft;  
 dry well or filter bed 0 ft; abandoned well 20 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	98	6	98	295

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

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6"	Standard wt	0	98

**9. GROUT:**

Kind	From (ft.)	To (ft.)
clay	0	20
Cement	20	98

**11. MISCELLANEOUS DATA:**

Yield test: 10 Hrs. at 15 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 Oct. 21 1959  
 City

**10. FORMATIONS:**

Kind	From (ft.)	To (ft.)
Clay + loose stone	0	20
loose limestone	20	55
flint rock	55	90
white limestone	90	145
sandstone	145	295

**RECEIVED**  
 OCT 30 1959  
 ENVIRONMENTAL  
 SANITATION  
 Construction of the well was completed on:  
September 30 1959

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 22 1959 No. 37750

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

Interpretation **UNSAFE**

	10 ml	10 ml	10 ml	10 ml	10 ml
Gas—24 hrs.	+	+	+	+	
48 hrs.					0
Confirm	+	+	0	0	
B. Coli	7/5				

Examiner \_\_\_\_\_