

WELL CONSTRUCTOR'S REPORT  
FORM 3300-15

NOTE *007 918 J*  
STATE OF WISCONSIN  
DEPARTMENT OF NATURAL RESOURCES  
Box 450  
Madison, Wisconsin 53701

WHITE COPY - DIVISION'S COPY  
GREEN COPY - DRILLER'S COPY  
YELLOW COPY - OWNER'S COPY

1. COUNTY *Crawford* CHECK ONE  Town  Village  City NAME *Eastman*

2. LOCATION - 1/4 Section *S.W* Section *19* Township *8N* Range *5W* 3. OWNER AT TIME OF DRILLING *Mr. Bernard Beuwar*

OR - Grid or street no. Street name ADDRESS *R1 Box 54*

AND - If available subdivision name, lot & block no. POST OFFICE *Eastman, Wis. 54626*

4. Distance in feet from well to nearest:  
(Record answer in appropriate block)

BUILDING	SANITARY SEWER	FLOOR DRAIN	FOUNDATION DRAIN	WASTE WATER DRAIN
<i>25'</i>	C. I. TILE	C. I. TILE	SEWER CONNECTED INDEPENDENT	C. I. TILE

CLEAR WATER DRAIN	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO	ABANDONED WELL	SINK HOLE
C. I. TILE		<i>125'</i>			<i>200'</i>			

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

5. Well is intended to supply water for: *Farm home*

6. DRILLHOLE						9. FORMATIONS		
Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)
<i>10</i>	<i>Surface</i>	<i>60</i>	<i>6</i>	<i>60</i>	<i>300</i>	<i>Clay</i>	<i>Surface</i>	<i>12</i>
						<i>limestone</i>	<i>12</i>	<i>80</i>
						<i>sandstone</i>	<i>80</i>	<i>130</i>
						<i>limestone</i>	<i>130</i>	<i>300</i>

8. GROUT OR OTHER SEALING MATERIAL				10. TYPE OF DRILLING MACHINE USED			
Kind	From (ft.)	To (ft.)					
<i>Clay</i>	<i>Surface</i>	<i>12</i>	<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Direct Rotary	<input type="checkbox"/> Reverse Rotary	<input type="checkbox"/> Jetting with	<input type="checkbox"/> Air <input type="checkbox"/> Water
<i>Cement</i>	<i>12</i>	<i>60</i>	<input type="checkbox"/> Rotary - air w/drilling mud	<input checked="" type="checkbox"/> Rotary - hammer with drilling mud & air			

11. MISCELLANEOUS DATA

Yield test: *2* Hrs. at *8* GPM

Well construction completed on *9-26-1973*

Well is terminated *12* inches  above  below final grade

Depth from surface to normal water level *210* ft. Well disinfected upon completion  Yes  No

Depth to water level when pumping *218* ft. Well sealed watertight upon completion  Yes  No

Water sample sent to *Madison* laboratory on: *10-3-1973*

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 *Kenneth Copian* Registered Well Driller COMPLETE MAIL ADDRESS *Boscobel, Wis. 53805*  
*R3 Box 84*

Please do not write in space below

COLIFORM TEST RESULT <i>615</i>	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
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