

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 8 miles NW of Eastman Sec 3, T8, R6W  
Name of street and number of premise or Section, Town and Range numbers

3. Owner  or Agent  Hercil Hall  
Name of individual, partnership or firm

4. Mail Address Eastman R. 7, D. Wis.  
Complete address required

5. From well to nearest: Building 10 ft; sewer 50 ft; drain 50 ft; septic tank 75 ft;  
dry well or filter bed 100 ft; abandoned well 200 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.)
7	0	519	5	519	530

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
5	standard	0	519

9. GROUT:

Kind	From (ft.)	To (ft.)
Clay	0	470
loose sand	470	510

11. MISCELLANEOUS DATA:

Yield test: 10 Hrs. at 6 GPM.  
Depth from surface to water-level: 500 ft.  
Water-level when pumping: 500 ft.  
Water sample was sent to the state laboratory at:  
Madison on June 23 1958  
City

10. FORMATIONS:

Kind	ENVIRONMENTAL SANITATION	
Clay + loose stone	0	20
limestones	20	240
sandstone	240	320
blue stone	320	370
brown limestone	370	420
sandstone	420	470
flowing sand	470	510
sandstone	510	530

Construction of the well was completed on:  
May 21 1958

The well is terminated 6 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 Cassin  
Registered Well Driller

R3 Box 36 Boonville, Mo.  
Complete Mail Address

Please do not write in space below

Rec'd JUN 24 1958 No. 18185

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

Interpretation SAFE

10 ml 10 ml 10 ml 10 ml 10 ml

Gas—24 hrs. \_\_\_\_\_

48 hrs. \_\_\_\_\_

Confirm \_\_\_\_\_

B. Coli O

Examiner \_\_\_\_\_

625