

WELL CONSTRUCTOR'S REPORT

DEPARTMENT OF RESOURCE DEVELOPMENT

1. COUNTY Crawford CHECK ONE Town Village City NAME Haney

2. LOCATION (Number and Street or 1/4 section, section, township and range. Also give subdivision name, lot and block numbers when available.)
NE 1/4 of Sec. 14 T9N R4W

3. OWNER AT TIME OF DRILLING Lyle George

4. OWNER'S COMPLETE MAIL ADDRESS RFD Gays Mills, Wis. 54631

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

BUILDING C.I.	SANITARY SEWER C.I.	FLOOR DRAIN TILE	FOUNDATION DRAIN SEWER CONNECTED	FOUNDATION DRAIN INDEPENDENT	WASTE WATER DRAIN C.I.	WASTE WATER DRAIN TILE
15'	40'	45'				45'

CLEAR WATER DRAIN C.I.	CLEAR WATER DRAIN TILE	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILO	ABANDONED WELL	SINK HOLE
		85'			90'	125'	140'	50'	

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

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	Surface	40	6	40	420

10. FORMATIONS

Kind	From (ft.)	To (ft.)
Clay	Surface	17
limestone	17	300
sandrock	300	420

8. CASING, LINER, CURBING, AND SCREEN

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	new black steel plain end 19.18	Surface	40

9. GROUT OR OTHER SEALING MATERIAL

Kind	From (ft.)	To (ft.)
Clay	Surface	17
Cement	17	40

Well construction completed on 9-27-1968

11. MISCELLANEOUS DATA
 Yield test: 8 Hrs. at 18 GPM

Well is terminated 10 inches above below final grade

Depth from surface to normal water level 360 ft.

Well disinfected upon completion Yes No

Depth to water level when pumping 362 ft.

Well sealed watertight upon completion Yes No

Water sample sent to Madison, Wis. laboratory on: 10-8-1968

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

SIGNATURE Bernard Coplan Registered Well Driller COMPLETE MAIL ADDRESS 53805 53805 R3 Box 84 Boscobel, Wis.

Please do not write in space below

COLIFORM TEST RESULT	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
747				