

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

1. County Crawford Town  Semeca township  
Village  City  Check one and give name

2. Location Sec. 5 - Town Block 9 - Range 5. W., T. 9 N  
Name of street and number of premise or Section, Town and Range numbers

3. Owner  or Agent  Vern Reynolds  
Name of individual, partnership or firm

4. Mail Address P.O. Eastman, Wis.  
Complete address required

5. From well to nearest: Building 75 ft; sewer \_\_\_\_\_ ft; drain \_\_\_\_\_ ft; septic tank 100 ft;  
dry well or filter bed \_\_\_\_\_ ft; abandoned well none

6. Well is intended to supply water for: Farm

7. DRILLHOLE:

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
6"	0	310	5	310	468

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
4"	Steel	0	314

9. GROUT:

Kind	From (ft.)	To (ft.)
Cement	0	314

11. MISCELLANEOUS DATA:

Yield test: 5 Hrs. at 10 GPM.  
Depth from surface to water-level: 260 ft.  
Water-level when pumping: 200 ft.  
Water sample was sent to the state laboratory at:  
Madison City on July 20 1960

10. FORMATIONS:

Kind	From (ft.)	To (ft.)
Jordan Sand and Shale	310	350
White sand	350	365
Hard Blue Rock	365	395
Shale	395	468

RECEIVED

JUL 21 1960

SANITARY ENGINEERING

Construction of the well was completed on:  
July 14 1960

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 Duane Lubbers  
Registered Well Driller

Parkersburg, Iowa  
Complete Mail Address

Please do not write in space below

Rec'd \_\_\_\_\_ No. \_\_\_\_\_  
Ans'd \_\_\_\_\_  
Interpretation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10 ml 10 ml 10 ml 10 ml 10 ml  
Gas—24 hrs. \_\_\_\_\_  
48 hrs. \_\_\_\_\_  
Confirm \_\_\_\_\_  
B. Coli \_\_\_\_\_  
Examiner \_\_\_\_\_