

WELL CONSTRUCTOR'S REPORT

DEPARTMENT OF RESOURCE DEVELOPMENT

1. COUNTY Crawford CHECK ONE Town Village City NAME Lynsville

2. LOCATION (Number and Street or 1/4 section, section, township and range. Also give subdivision name, lot and block numbers when available.)
Lot 1 - Block 16 - NW 1/4 of Sec 23 T9N - R6W

3. OWNER AT TIME OF DRILLING Gayland Phillip

4. OWNER'S COMPLETE MAIL ADDRESS Lynsville, Wisc

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

BUILDING	SANITARY SEWER	FLOOR DRAIN	FOUNDATION DRAIN	WASTE WATER DRAIN
10	C. I.	TILE	C. I.	TILE
			SEWER CONNECTED	INDEPENDENT

CLEAR WATER DRAIN	SEPTIC TANK	PRIVY	SEEPAGE PIT	ABSORPTION FIELD	BARN	SILLO	ABANDONED WELL	SINK HOLE
C. I.	TILE							
	55-							

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

6. Well is intended to supply water for: Tavern

7. DRILLHOLE						10. FORMATIONS			
Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)	Kind	From (ft.)	To (ft.)	
10"	Surface	69	6"	69	100	Sand	Surface	18	
						Shale	18	55	
						Sandstone	55	100	

8. CASING, LINER, CURBING, AND SCREEN			
Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6"	New Blk Steel HC 19	Surface	69

9. GROUT OR OTHER SEALING MATERIAL		
Kind	From (ft.)	To (ft.)
Cement	Surface	69

11. MISCELLANEOUS DATA			
Yield test:	10	Hrs. at	15 GPM
Depth from surface to normal water level	20	ft.	
Depth to water level when pumping	70	ft.	

Well construction completed on 7/22 1972
Well is terminated 10 inches above below final grade
Well disinfected upon completion Yes No
Well sealed watertight upon completion Yes No
Water sample sent to Madison laboratory on: 7/25 1972

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

SIGNATURE Edwin W. Meyer Registered Well Driller COMPLETE MAIL ADDRESS New Albion Iowa Box 55

Please do not write in space below

COLIFORM TEST RESULT	GAS - 24 HRS.	GAS - 48 HRS.	CONFIRMED	REMARKS
824				