830 REV. 3-71

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NOTE

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 CHECK ONE NAME Village Town 2. LOCATION -**Township** 3. OWNER AT TIME OF DRILLING Section Range OR - Grid or street no. Street name ADDRESS POST OFFICE AND -If available subdivision name, lot & block no. BUILDING SANITARY SEWERIFLOOR DRAIN 4. Distance in feet from well to nearest: SEWER CONNECTED INDEPENDENT TILE THE C. I. 1 C. I. TILE (Record answer in appropriate block) CLEAR WATER DRAIN | SEPTIC TANK | PRIVY SEEPAGE PIT ABSORPTION FIELD BARN ABANDONED WELL | SINK HOLE SILO C. I. THE OTHER POLLUTION SOURCES (Give description such as dump, quarry, drainage well, stream, pond, lake, etc.) 5. Well is intended to supply water for: 6. DRILLHOLE 9. FORMATIONS From (ft.) To (ft.) Dia. (in.) From (ft.) To (ft.) From (ft.) To (ft.) Dia. (in.) Kind / O Ø Surface Surface 7. CASING, LINER, CURBING, AND SCREEN To (ft/) Dia. (in.) From (ft.) Kind and Weight Surface Valley Steel
Pitley Unit 8. GROUT OR OTHER SEALING MATERIAL 10. TYPE OF DRILLING MACHINE USED From (ft.) To (ft.) Kind Reverse Rotary Cable Tool Direct Rotary Surface Rotary - air Rotary - hammer Jetting with w/drilling mud ☐ Air ☐ Water 10 79 19 *75* Well construction completed on above Well is terminated final grade inches **GPM** Hrs. at below Yield test: Well disinfected upon completion Depth from surface to normal water level Well sealed watertight upon completion *80* Depth to water level when pumping madisan laboratory on: / 26 Water sample sent to 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. COMPLETE MAIL ADDRESS **SIGNATURE** AVA Registered Well Driller Please do not write in space below GAS - 24 HRS.COLIFORM TEST RESULT GAS - 48 HRS.CONFIRMED REMARKS