

## WELL DRILLER'S REPORT

State law requires that this report be filed with the State Board of Water Well Contractors within 30 days after completion or abandonment of the well.

**1. WELL OWNER**  
 Name Logan Quality  
 Address \_\_\_\_\_

**2. WELL LOCATION**  
 Sketch map location must agree with written location.

**NORTH**

1 Mile

County Adams  
1/4 NE 1/4 Sec. 28 Twp. 129 N. Rg. 91 W.

**3. PROPOSED USE**

Domestic       Irrigation       Industrial  
 Stock       Municipal       Test Hole

**4. METHOD DRILLED**

Cable       Reverse Rotary       Bored  
 Forward Rotary       Jetted       Other  
 If other, specify \_\_\_\_\_

**5. WATER QUALITY**  
 Was a water sample collected for chemical analysis?  
 Yes       No  
 If so, to what laboratory was it sent \_\_\_\_\_

**6. WELL CONSTRUCTION**

Diameter of hole 6 inches. Depth 70 feet.  
 Casing:  Steel       Plastic       Concrete  
 Threaded       Welded       Other  
 If other, specify \_\_\_\_\_

Pipe Weight:      Diameter:      From:      To:  
 \_\_\_\_\_ lb/ft.      4 inches      +1 feet      70 feet  
 \_\_\_\_\_ lb/ft.      \_\_\_\_\_ inches      \_\_\_\_\_ feet      \_\_\_\_\_ feet  
 \_\_\_\_\_ lb/ft.      \_\_\_\_\_ inches      \_\_\_\_\_ feet      \_\_\_\_\_ feet  
 \_\_\_\_\_ lb/ft.      \_\_\_\_\_ inches      \_\_\_\_\_ feet      \_\_\_\_\_ feet

Was perforated pipe used?       Yes       No  
 Length of pipe perforated 20 feet

Was casing left open end?       Yes       No  
 Was a well screened installed?       Yes       No  
 Material \_\_\_\_\_ Diameter \_\_\_\_\_ inches  
 (stainless steel, bronze, etc.)

Slot size \_\_\_\_\_ set from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Slot size \_\_\_\_\_ set from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Slot size \_\_\_\_\_ set from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Slot size \_\_\_\_\_ set from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Was a packer or seal used?       Yes       No  
 If so, what material Rubber steel

Type of well: Straight screen  Gravel packed   
 Was the well grouted?      Yes  No   
 To what depth? \_\_\_\_\_ feet  
 Material used in grouting \_\_\_\_\_  
 Well head completion: Pitless adapter \_\_\_\_\_  
 12" above grade \_\_\_\_\_ Other \_\_\_\_\_  
 If other, specify \_\_\_\_\_

Was well disinfected upon completion?       Yes       No

**7. WATER LEVEL**  
 Static water level 10 feet below land surface  
 If flowing: closed-in pressure \_\_\_\_\_ psi  
 GPM flow \_\_\_\_\_ through \_\_\_\_\_ inch pipe  
 Controlled by:  Valve       Reducers       Other  
 If other, specify \_\_\_\_\_

**8. WELL TEST DATA**

Pump       Bailer       Other  
 Pumping level below land surface:  
 \_\_\_\_\_ ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ gpm  
 \_\_\_\_\_ ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ gpm  
 \_\_\_\_\_ ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ gpm

**9. WELL LOG**

Formation	Depth (ft.)	
	From	To
Top soil	0	2
sand	2	8
gray shale	8	20
sand stone	20	21
gray shale	21	52
blue sand	52	54
sand stone	54	55
sand	55	58
sand stone	58	59
sand	59	61
Rock	61	62
shale	62	65
sand stone	65	67
sand	67	70

(Use separate sheet if necessary.)

**10. DATE COMPLETED** 1979

**11. WAS WELL PLUGGED OR ABANDONED?**  
 Yes       No  
 If so, how \_\_\_\_\_

**12. REMARKS:**

**13. DRILLER'S CERTIFICATION**  
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge.

Driller's or Firm's Name \_\_\_\_\_ Certificate No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 Signed by \_\_\_\_\_ Date 1979