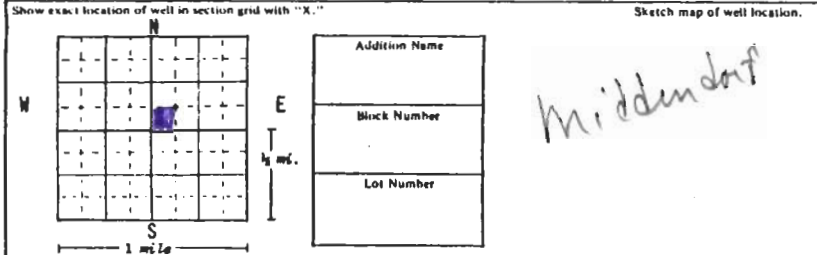


1. LOCATION OF WELL
 County Name **PLYMOUTH**

Township Name **HUNGERFORD** Township Number **90** Range Number **46** Section No. **8** Fraction **SW SW NE**

Distance and Direction from Road Intersections or Street Address and City of Well Location



3. PROPERTY OWNER'S NAME
CITY OF HINTON
 Address
HINTON, IA 30315

4. WELL DEPTH (completed) **373** Date of Completion **JUNE 3, 1989**

5. Cable tool Reverse Driven Dug
 Hollow rod Air Bored _____
 Rotary Jetted Power Auger

6. USE
 Domestic Public Supply Industry
 Irrigation Municipal Commercial
 Test Well Air Conditioning _____

1. FORMATION LOG	COLOR	HARDNESS OF FORMATION	FROM	TO
YELLOW CLAY		S	0	56
BLUE CLAY		S	56	62
YELLOW CLAY		S	62	70
RED GRANITE		H	70	72
YELLOW CLAY		S	72	90
WHITE CLAY- GAS POCKET		S	90	93
BLUE CLAY		S	93	126
BLUE CLAY/LIMESTONE		H	126	130
BLUE SHALE		S	130	170
SANDSTONE	GRAYISH	H	170	175
WHITE SHALE		S	175	177
GRAY SHALE/SANDSTONE		H	177	190
GRAY SHALE		S	190	208
SANDSTONE		H	208	210
GRAY SHALE		S	210	230
BLACK SHALE/ COAL		S	230	233
GRAY SHALE		S	233	259
LIMESTONE		H	259	261
WHITE SHALE		S	261	287

7. CASING HEIGHT: Above/Below
 Black Threaded Galv. Welded Surface **2** ft.
 Plastic Drive Shoe? Yes ___ No
8 in. to **340** ft. Weight **30** lbs./ft. **13** in. **340** ft.
 _____ in. to _____ ft. Weight _____ lbs./ft. _____ in. to _____ ft.
 _____ in. to _____ ft. Weight _____ lbs./ft. _____ in. to _____ ft.

8. SCREEN Make **JOHNSON** Or open hole from _____ ft. to _____ ft.
 Type **304 STAINLESS** Dia. **5" PIPE SIZE**
 Slot/Gauze **20 SLOT** Length **40'-9" total**
 Set between **330** ft. and **340** ft. RISER PIPE FITTINGS:
340 ft. and **371** ft. SCREENED AREA

9. STATIC WATER LEVEL **199** below land surface above Date Measured **6-3-89**

10. PUMPING LEVEL (below land surface)
225 ft. after **2** hrs. pumping **180** g.p.m.
225 ft. after **3** hrs. pumping **180** g.p.m.

11. WELL HEAD COMPLETION
 Pitless adapter, manufacturer _____ model _____
 Basement offset At least 12" above grade

12. WELL GROUTED?
 Yes No
 Best Cement Bentonite _____
 Grout material **PORTLAND** from **340** to **10** ft. Cu Yds

13. NEAREST SOURCES OF POSSIBLE CONTAMINATION
 _____ feet _____ direction _____ type
 Well disinfected upon completion? Yes No

14. PUMP
 Date installed _____ Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of drop pipe _____ ft. capacity _____ g.p.m.
 Material of drop pipe
 Type: Submersible L. S. Turbine Reciprocating
 Jet Centrifugal _____

16. WATER WELL CONTRACTOR'S CERTIFICATION
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

 Licensee Business Name License No.
 Address _____
 Signed _____ Date _____
 Authorized Representative
 Name of Driller _____ Date _____

15. REMARKS, ELEVATION, SOURCE OF DATA, etc.

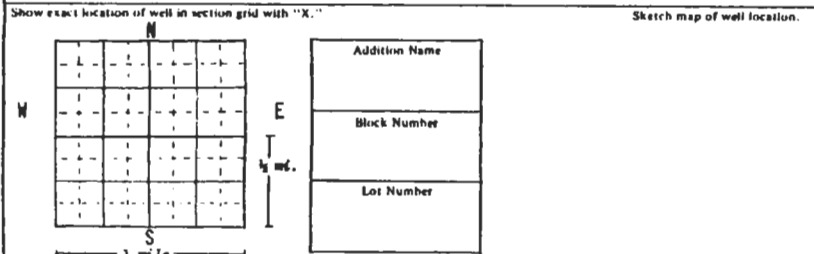
IMPORTANT: FILE WITH DEED - WELL OWNER COPY **403427**

1. LOCATION OF WELL
 County Name _____

Township Name _____ Township Number _____ Range Number _____ Section No. _____ Fraction _____

3. PROPERTY OWNER'S NAME
CITY OF HINTON PAGE 2
 Address **30315**

Distance and Direction from Road Intersections or Street Address and City of Well Location _____



4. WELL DEPTH (completed) _____ Date of Completion _____

5. Cable tool Reverse Driven Dug
 Hollow rod Air Bored _____
 Rotary Jetted Power Auger

2. FORMATION LOG	COLOR	HARDNESS OF FORMATION	FROM	TO
GRAY SHALE		S	287	292
SANDSTONE	WHITE	H	292	294
GRAY SHALE		S	294	302
SANDSTONE		H	302	308
WHITE SHALE		S	308	315
SANDSTONE/OK FLUID		H	315	330
SANDSTONE/BETTER FLUID		H	330	335
SANDSTONE/COARSER		H	335	341
SANDSTONE/ GOOD FLUID		H	341	371
SANDSTONE/ OK FLUID		H	371	381
WHITE SHALE		S	381	386
<i>Use a second sheet, if needed</i>				

6. USE
 Domestic Public Supply Industry
 Irrigation Municipal Commercial
 Test Well Air Conditioning _____

7. CASING HEIGHT: Above/Below HOLE DIAM

Black Threaded _____ ft.
 Galv. Welded _____ in. to _____ ft. Weight _____ lbs./ft. _____ in. to _____ ft.
 Plastic _____ Drive Shoe? Yes _____ No _____
 _____ in. to _____ ft. Weight _____ lbs./ft. _____ in. to _____ ft.
 _____ in. to _____ ft. Weight _____ lbs./ft. _____ in. to _____ ft.

8. SCREEN Or open hole from _____ ft. to _____ ft.

Make _____ Type _____ Dis. _____
 Slot/Gauze _____ Length _____ FITTINGS:
 Set between _____ ft. and _____ ft. _____ ft. and _____ ft.

9. STATIC WATER LEVEL
 _____ ft. below land surface above Date Measured _____

10. PUMPING LEVEL (below land surface)
 _____ ft. after _____ hrs. pumping _____ g.p.m.
 _____ ft. after _____ hrs. pumping _____ g.p.m.

11. WELL HEAD COMPLETION
 Pitless adapter, manufacturer _____ model _____
 Basement offset At least 18" above grade

12. WELL OROUTED?
 Yes No
 Neat Cement Bentonite _____
 Orout material _____ from _____ to _____ ft. Cu. Yds _____

13. NEAREST SOURCES OF POSSIBLE CONTAMINATION
 _____ feet _____ direction _____ type
 Well disinfected upon completion? Yes No

14. PUMP
 Date installed _____ Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of drop pipe _____ ft. capacity _____ g.p.m.
 Material of drop pipe
 Type: Submersible L. S. Turbine Reciprocating
 Jet Centrifugal _____

15. REMARKS. ELEVATION, SOURCE OF DATA, etc.

16. WATER WELL CONTRACTOR'S CERTIFICATION
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

 Licensee Business Name License No. _____

Address _____

Signed _____ Date _____
 Authorized Representative

 Name of Driller Date _____