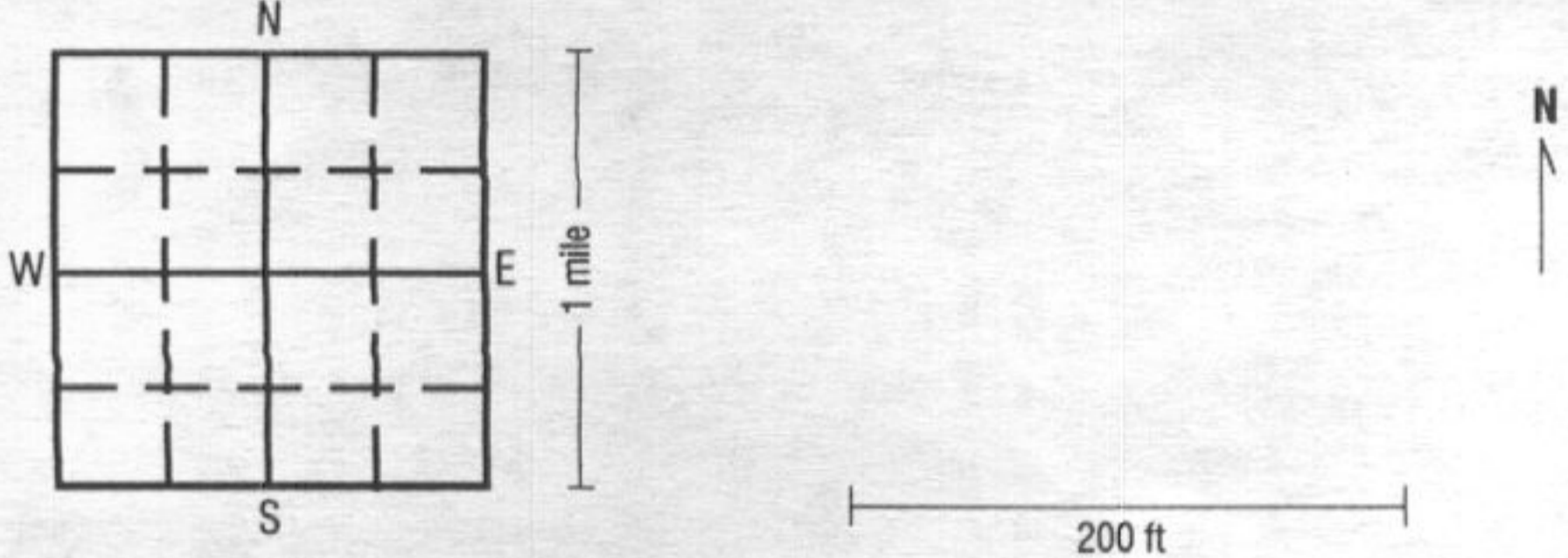


Site identification
 Property Owner Gaddis Estates Well Number 1
 Address Walford
 Tenant _____
 Well Depth 520 ft Date completed 8 / 30 / 01

Location County Linn
 _____ mi. ^N and _____ mi. ^E of intersection of _____ and _____
 _____ 1/4 of the _____ 1/4 of the S/2 of Sec 30 TWP 82N RNG 8 ^E
 Show exact location of well in section grid with a dot (•). Sketch map of well location on property.



upland hillside valley Elevation (if known) _____

Formation log

From	To	Color	Hardness	Formation description

Remarks (including depth of lost drilling fluids, materials, or tools)

Well use

<input type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Commercial
<input type="checkbox"/> Livestock	<input type="checkbox"/> Public supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Test well	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Other _____ (explain)

Drill method rotary auger cable other _____
Hole size
19 inch from 0 ft to 137 ft hole size continued
10 inch from 343 ft to 520 ft
15 inch from 137 ft to 343 ft _____ inch from _____ ft to _____ ft

Record all depth measurements from ground level (GL). Use (+) for above GL measurements.

Casing Drive shoe (yes no) Pitless adapter (yes no)

Size (ID/OD)	Type / Wt	Depth top	Depth bottom	Amount (length)
<u>10" SCH 40</u>	<u>Steel</u>	<u>+1</u>	<u>343</u>	<u>344</u>

Perforated or slotted casing? (yes no)
 Perforated / slotted from _____ ft to _____ ft
 Perforated / slotted from _____ ft to _____ ft

Casing grouted? (yes no) Placement method Halkbenton/Tecumseh

Type	Depth Top	Depth bottom	Amount (vol/wt)
<u>Cement</u>	<u>0</u>	<u>343</u>	<u>465 BAGS</u>

Well screen? (yes no)

Diameter	Slot size	Depth Top	Depth Bottom	Length	Material

Bottom capped (yes no) with _____
 Seals / Packers (yes no) kind _____ depth _____ ft
 Gravel packed (yes no) from _____ ft to _____ ft
 type _____ amount _____

Well developed? (yes no)
 Explain AIR
 (pumped, airlifted, bailed) for 6 hrs at 150 GPM.

Pump installed? (yes no) Date ____/____/____
 Installer's name _____
 Type of pump _____ Depth to intake _____ ft
 Pump diameter _____ Rated capacity _____ GPM

Water information Aquifer: sand / gravel limestone sandstone
 Main water-supply zone from 350 ft to 520 ft seepage well
 Static water level _____ ft (below / above) GL; tape airline E-line estimate
 Pumping water level _____ ft below GL; tape airline E-line estimate
 At yield of _____ GPM; orifice volumetric estimate
 Measurements taken at _____:_____ (AM / PM) Date ____/____/____

Water quality test? (yes no) Date tested ____/____/____
 Tested by _____

Contractor Gingerich Well
 Address 1321 Locust Ave Kalona, IA 52247
 Driller Klint Gingerich Certification no. 40046