WELL RECORD FORM

PWTS No. or PWS No. _____ | PWTS Permit No. _____ | GEOSAM Well No. (IGS use only) 83489

Site Identification

Property owner: Osceola County RWS Other ID: Fulk #6

Address: 2270 Walnut Ave. City: May City

Tenant: _____

Well depth: 50 ft Date completed: 10 / 10 / 2016

Drill Method

☑ Rotary ☐ Auger ☐ Cable ☐ Other _____

Hole size

26 inch from 0 ft to 50 ft

____ inch from ____ ft to ____ ft

hole size continued

____ inch from ____ ft to ____ ft

____ inch from ____ ft to ____ ft

Location

County: Osceola

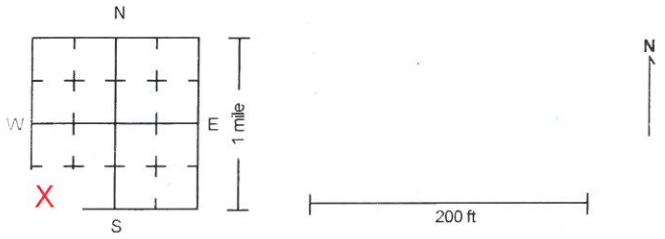
GPS coordinates (NAD83 datum)

42.9395560 Latitude 95.4265560 Longitude

☑ Decimal Degrees ☐ Degrees, Decimal Minutes ☐ Degrees, Minutes, Seconds

____ 1/4 of the ____ 1/4 of the SW 1/4 of Sec 23 TWP 94 RNG 39 E/W

Show exact location of well in section grid with a dot (•). Sketch map of well location on property.



Casing or Loop Pipe

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

Size (in)	Material	Depth Top	Depth Bottom	Perforated	Slotted	Screen
12	Steel	0	35	☐	☐	☐ slot size ____
12	Stainless V-Wire	35	50	☐	☑	☑ slot size .100
				☐	☐	☐ slot size ____
				☐	☐	☐ slot size ____
				☐	☐	☐ slot size ____

Casing Grout

Placement method: _____

Type	Depth Top	Depth Bottom	Amount (vol/wt)
Neat Cement Grout	0	25	
Bentonite Seal	25	30	
☑ Gravel packed variety Chlorina	30	50	
☐ Seals/packers			

Formation Log

From	To	Color	Hardness	Formation description
0	17	brown	loose	Top soil and brown clay
17	20	tan	loose	Fine, medium and coarse sand
				and fine, medium and coarse
				gravel
20	49	tan	loose	Fine, medium and coarse sand
				and fine, medium and coarse
				gravel
49	60	white	dense	White clay
				(use additional sheets as needed)

Pump Installation

Date ____/____/____

Type of pump _____ Depth to intake _____ ft

Pump diameter _____ in Rated capacity _____ GPM

Water Information

Date ____/____/____

Use + for above GL measurements.

Static Water Level	Pumping Water Level	Yield	Duration
____ ft	____ ft	____ GPM	____ hrs

Water level measurement: ☐ Sonic ☐ Tape ☐ Airline ☐ E-line ☐ Estimate

Water yield measurement: ☐ Orifice ☐ Volumetric ☐ Estimate

Main water-supply zone from _____ ft to _____ ft below GL

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

Well Development

☑ Physical explain: Double disc surge block

☑ Chemical explain: Aqua Clear PFD

Well Use

☐ Domestic ☑ Public supply ☐ Livestock

☐ Heat pump ☐ Commercial ☐ Irrigation

# of borehole(s) ____ ☐ Monitoring ☐ Other _____

Contractor

Company: Sargent Drilling

Address: PO Box 364, Carroll, IA 51401

Driller: Derek Schweitzer Certification no. 8338

10-19-2016

IGS IIHR Hydroscience & Engineering The University of Iowa

Mail form to **Iowa Geological Survey**: 100 Oakdale IGS, Iowa City, IA 52242-1304

Or click here to e-mail form to: IIHR-IGS-WellRecords@uiowa.edu

Make copies for: **well contractor, customer, and county health department**

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