

**THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL**

WELL COMPLETION REPORT

WELL DESCRIPTION

WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

FEET
from ___ to ___

4
clay
39
Sand
+
Gravel

DIAM.
(Inches)

6" O.D.
Well
Casing

FEET
from ___ to ___

43

14
Hard
Rock
36
Mud
Rock
93

WELL

Permit Number 40-67-W-6
Owner D. W. Brown
Address Essex City
Subdivision _____
Section _____ Lot _____

PUMPING TEST

Hours Pumped 2
Type of Pump Used British
Pumping Rate _____
Gallons per Minute 12

WATER LEVEL

Distance from land surface to water)
Before Pumping 40 Ft.
When Pumping 16 Ft.

APPEARANCE OF WATER

Clear Cloudy _____
Taste _____
Odor None

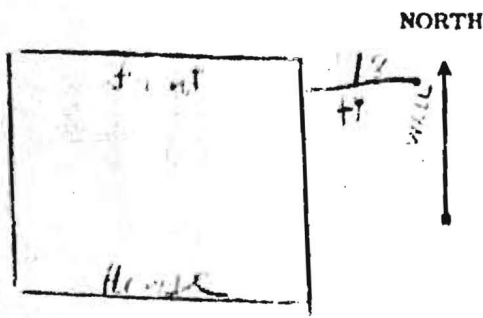
Height of Casing Above Land Surface
Surface 1 Ft.

PUMP INSTALLED

Type _____
Capacity _____
Gallons per Minute _____
Gallons per Hour _____
Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE
WELL WAS
COMPLETED

I hereby affirm that this report contains no willful misrepresentation or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

E. Brown, Well Driller

Well Driller License No.: 81