

Office Use Only
 Inspected by _____
 Twp _____ Rge _____ Sec _____
 _____ 1/4 _____ 1/4 _____ 1/4
 Lat : : Long: : :

sketch map location must agree with written location

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

☒ New Well ☐ Modify ☐ Abandonment ☐ Other

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

Was drive shoe seal tested? ☐ Y ☐ N How?

Length of Headpipe 5' Length of Tailpipe _____

☒ Screens	Screen Type	Stainless Steel
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175 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices:

54N 4W 17

Depth first Water encountered 220

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Completed Depth 283 (Measurable)
Date: Started 10/16/2004 Completed 10/18/2004

Todd Morgan (Sign Once If Firm Official and Operator)