County/ Fraction	Section	,	Township number	Range number	
1. Location of well: HARUEY . SW1/4 NW/4 SW1/4	d	24	T 23 s	R /	
2. Distance and direction from nearest town of city:  3. Owner of well: Stan Bloadhagen					
Street address of well legation if in city 4	or street: , state, zip (	code:	SIT SO P	be the Right	114
4. Locate with "X" in section below: Sketch map:				. Completion date	
N N N N N N N N N N N N N N N N N N N			Well depthft.		<del>22</del>
Well			7 Cable toolRotary Hollow rod Jetted		otary
			8. Use: Domestic _ P		
howe howe				ir conditioning Stock	
sw   se			9. Casing: Material PVC Height Above or below		
			Threaded Welded		
S 1 Mile ————————————————————————————————————			Dia Sin. to 15 ft. de		E .
5. Type and color of material	From	То	Dia in. to ft. dep		
7. 5.	10	2	10. Screen: Manufacturer's	name ###	<u> </u>
100	2	3	Type	Dia	Ŧ.
KEL CLAY	3	22	Set between	_ft. and	_ft.
fine SAND	22	24	Gravel pack? (Size ro		
Choen Shale	24	32	11. Static frater level:	17/25	957
Marian 1 shale	32	75		d surfaces:	<del>-</del>
Charecoa Shall		1	6Zft. after	hrs. pumpingg.r	p.m.
			Estimated maximum yield	12-15	p.m.
			13. Water sample submitted:	mo./day	у/уг.
1 On 1/11/78 this well was			14. Well head completion:		
Incel Chloringted with	, \		Pitless adapter	12 Inches above grad	e .
Es al direction			15. Well grouted? With: Neat cement	Bentonite Conc	
see gas of congenially	+	-	Depth: From ft. to	,	$\dashv \omega$
TT, O migle fired soomg /	-	-	16. Nearest source of possible ft Direction	10 N F	
Solution ( surging to		ļ	Well disinfected upon comp	letion? Yes	= No
State Recomendation well			17. Pump:  Manufacturer's name	impio	
was also estanded to mod	el		Model number  Length of drop pipe	ft. capacity 12 g.p	~.m. 3m
The state of the			Туре: (//27	128)	
neight avove quite			Submertible Jet	Turbine Reciprocati	ing   W
(Used second sheet if needed)	/	<u> </u>	Centrifugal	Other	<b>─</b>  * ┌~
18. Elevation: 19. Remarks: CUSTOMER to POUR			20. Water well contractor's This well yas drilled under	my jurisdiction and this rep	ort /
Topography: 4x4x4 Slab at top			is true to the best of thy kno	wledge and before.	10 EM
-HIII to comple			Business name	LC / L'cense	3 - 10
- Slope Of well to comply			Signe throw Ulen	unger I boat	- 1-1-
valley WITh STATE REGUL	11/0	1/1/	Authorized re	prefentative /	
Forward the white, blue and pink copies to the Department of Health and Environment					
Stanley Broth					