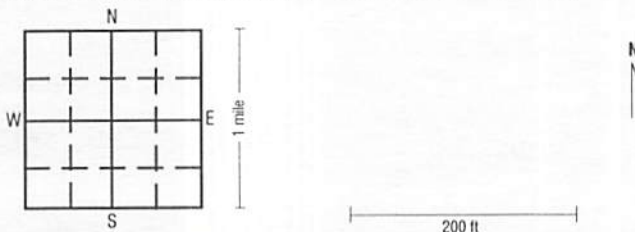


WELL RECORD

56486

Permit No. 2002-441W

Site identification
 Property Owner STANNES Church Well Number _____
 Address 16650 290th Street Long Grove IA 5
 Tenant _____
 Well Depth 340 ft Date completed 9 / 27 / 02

Location County SCOTT
 _____ mi. N and _____ mi. E of intersection of _____ and _____
SW 1/4 of the SW 1/4 of the SE 1/4 of Sec 14 TWP 80N RNG 30E
 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
0	30	Yellow		Clay
30	76	Blue		Clay
76	143	Soft		Limestone
143	340			Dolomite

use additional sheets as needed

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 checked="" 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
 _____ inch from _____ ft to _____ ft
12 inch from 78 ft to 200 ft
 _____ inch from _____ ft to _____ ft
 hole size continued
8 inch from 200 ft to 340 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)
8" SDR 17 PVC	+ 2	200	202	202

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

Casing grouted? (yes/no) Placement method HALLIBURTON

Type	Depth Top	Depth bottom	Amount (vol/wt)
Benzal	10	200	47 sacks

Well screen? (yes/no)

Diameter	Slot size	Depth Top	Depth Bottom	Length	Material
0. _____					
0. _____					

 Bottom capped (yes/no) with _____
 Seals / Packers (yes/no) kind Rubber depth 190, 195, 200
 Gravel packed (yes/no) from _____ ft to _____ ft
 type _____ amount _____

Well developed? (yes/no)
 Explain Air
 (pumped, airlifted, bailed) for 2 hrs at 100 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 200 ft to 340 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 5 : 30 (AM/PM) Date 9 / 27 / 02

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

Contractor Gingerich Well
 Address 1321 Locust Ave Kalona IA 52247
 Driller KL Gingerich Certification no. 40016