

Site identification
 Property Owner NEW HORIZON COOP Well Number 01
 Address PO 155 BRITT IA 50423
 Tenant SAME
 Well Depth 145 ft Date completed 4, 8, 00

Location County HANCOCK
1/2 mi. N and 0 mi. E of intersection of 200ST and IOWA
SE 1/4 of the SE 1/4 of the NE 1/4 of Sec 9 TWP 95 R 25 E W
 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	11	BRN	SOFT	SANDY CLAY
11	45	BRN	SOFT	SANDY CLAY
45	48	MULT	SOFT	SAND
48	90	BRN	SOFT	SANDY CLAY
90	93	BLE	SOFT	CLAY
93	95	BLE WHIT	SOFT MED	CLAY & LIMESTONE
95	100	WHIT BRN	HARD	LIMESTONE
100	145	MED BRN LT	HARD	LIMESTONE SOME S.S.

use additional sheets as needed

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

Well use

Domestic Municipal Commercial
 Livestock Public supply Monitoring
 Test well Irrigation Other _____ (explain)

Drill method rotary auger cable other _____

Hole size
9 7/8 inch from 0 ft to 98 ft
5 7/8 inch from 98 ft to 145 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)
<u>6"</u>	<u>SDR 21</u>	<u>+3</u>	<u>98</u>	<u>101</u>

Perforated or slotted casing? (yes/no) no

Perforated / slotted from _____ ft to _____ ft
 Perforated / slotted from _____ ft to _____ ft

Casing grouted? (yes/no) no Placement method TRENCH BOTTOM CAS

Type	Depth Top	Depth bottom	Amount (vol/wt)
<u>BEWEAL</u>	<u>2</u>	<u>98</u>	<u>248 GAL</u>
<u>HOEFLUB</u>	<u>0</u>	<u>2</u>	<u>1 BAG</u>

Well screen? (yes/no) no

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

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

Well developed? (yes/no) no
 Explain WITH DRILL
 (pumped airlifted bailed) for 2 hrs at 50 GPM.

Pump installed? (yes/no) 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 110 ft to 140 ft seepage well
 Static water level 20 ft (below/above) GL; tape airline E-line estimate
 Pumping water level 100 ft below GL; tape airline E-line estimate
 At yield of 50 GPM; orifice volumetric estimate
 Measurements taken at _____ : _____ (AM / PM) Date _____ / _____ / _____

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

Contractor Mort's Well Co.
1451B Gull Ave., P.O. Box 715
 Address Latimer, IA 50452
 Driller John C Phone 515-579-6420 Certification no. 40521