

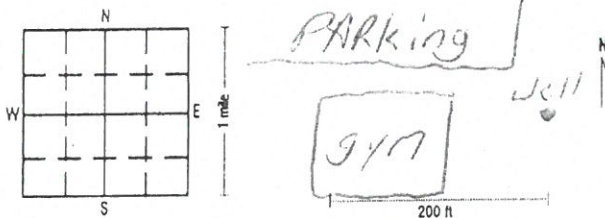
Site Identification

Property Owner Twisters John Mangold Other ID _____
Address 4625 Tower Terrace Rd. CR
Tenant _____
Well Depth 195 ft Date completed 9/22/15

Location

County Linn
____ mi. N and ____ mi. E of intersection of _____ and _____
____ mi. S and ____ mi. W
1/4 of the ____ 1/4 of the ____ 1/4 of the ____ Sec ____ TWP ____ RNG ____ E ____ W
GPS Coordinates (NAD83 datum only) decimal degrees:
____ N. Latitude ____ W. Longitude ____

Show exact location of well in section grid with a dot (•). Sketch map of well location on property.



☐ upland ☐ hillside ☐ valley ☒ level surface Elevation (if known) _____

Formation log

From	To	Color	Hardness	Formation description
0	10	LT Bk		SAND
10	17	GRY		CLAY
17	34	GRAY		CLAY
34	57	BK		Limestone
57	67	LT Bk		Limestone
67	82	GRY green		Limestone/shale
82	150	GRY		Limestone/shale
150	160	GRY		Limestone/shale
160	167	GRY green		Limestone/shale
167	195	Bk soft		Limestone

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

Well use

- ☐ Domestic ☐ Heat pump ☐ Commercial
☐ Livestock ☐ Municipal ☐ Monitoring
☐ Test well ☐ Public supply ☐ Other _____
☐ Irrigation

Drill method

☒ rotary ☐ auger ☐ cable ☐ other _____
Hole size 12 inch from 0 ft to 150 ft hole size continued 6 inch from 150 ft to 195 ft
____ inch from ____ ft to ____ ft

Record all depth measurements from ground level (GL). Use (+) for above GL measurements.

Casing

Size (ID/OD)	Type / Wt	Depth top	Depth bottom	Amount (length)
6"	STEEL	72	150	152

Perforated or slotted casing? (yes/no)

Perforated / slotted from ____ ft to ____ ft
Perforated / slotted from ____ ft to ____ ft

Casing grouted? (yes/no)

Type	Depth top	Depth bottom	Amount (vol/wt)
cement	0	150	19.5 bags

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 5" shale depth 150 ft
Gravel packed (yes/no) from 4.5" packer to 4.5" shale ft
type 130 amount 120

Well developed? (yes/no)

Explain ____
(pumped / airlifted / balled) for 1 hrs at 80 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 170 ft to 190 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 for _____ hours
Measurements taken at ____:____ (AM / PM) Date 9/22/13

Water quality test? (yes/no)

Date tested ____/____/____
Tested by _____

Contractor Greiner Well Service
Address 3100 Wildwood Ln Toddville, IA 52241
Driller Kenneth Greiner Certification no. 2771