

WELL RECORD FORM

94997

PWSID# or PWTS No. <u>1415072</u>		PWTS Permit No. <u>20200493</u>		GeoSam WNumber (IGS use only) _____																																																																																								
Site Identification Property owner <u>City of Carroll</u> Other ID # <u>20</u> Address <u>627 North Adams St.</u> City <u>Carroll</u> Tenant _____ Well depth <u>193</u> ft Date completed <u>8 / 18 / 2020</u>			Drill Method <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Auger <input type="checkbox"/> Cable <input type="checkbox"/> Other _____ Hole size <u>36</u> inch from <u>0</u> ft to <u>103</u> ft <u>22</u> inch from <u>0</u> ft to <u>193</u> ft																																																																																									
Location County <u>Carroll</u> GPS coordinates (NAD83 datum) <u>42.0527780</u> Latitude <u>94.8686940</u> Longitude _____ <input checked="" type="checkbox"/> Decimal Degrees <input type="checkbox"/> Degrees, Decimal Minutes <input type="checkbox"/> Degrees, Minutes, Seconds <u>SE</u> 1/4 of the <u>25</u> TWP <u>84</u> RNG <u>35</u> E Show exact location of well in section grid with a dot (+). Sketch map of well location on property.			Casing or Loop Pipe Record all depth measurements from ground level (GL). Use + for above GL measurements.																																																																																									
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Remarks (including depth of lost drilling fluids, materials, or tools) _____ _____ _____			Pump Installation Date <u>1 / 22 / 2021</u> Type of pump <u>Vertical Turbine Pump</u> Depth to intake <u>115</u> ft Pump diameter <u>8</u> in Rated capacity <u>600</u> GPM																																																																																									
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Well Use <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Public supply <input type="checkbox"/> Livestock <input type="checkbox"/> Heat pump <input type="checkbox"/> Commercial <input type="checkbox"/> Irrigation # of borehole(s) _____ <input type="checkbox"/> Monitoring <input type="checkbox"/> Other _____			Well Development <input checked="" type="checkbox"/> Physical explain: <u>Surge blocked and pumped for 6 hours</u> <input type="checkbox"/> Chemical explain: _____																																																																																									
Contractor Company <u>Sargent Drilling</u> Address <u>2016 Industrial Park Road, Carroll, IA 51401</u> Driller <u>Derek Schweitzer</u> Certification no. <u>8338</u>																																																																																												



Mail form to Iowa Department of Natural Resources: 502 E. 9th St., Des Moines, IA 50319-0034

Or click here to e-mail form to: well.records@dnr.iowa.gov

Make copies for: well contractor, customer, and county health department

DNR Form
542-8170

