

204100518

6" - 12" • Water Wells • Pump Installation • Exploration • Dual Rotary Air Rig • Pilings

10SD10

Owner name: Paul Grant

Mailing address: _____ City / Town: _____ Prov. / Terr. _____ Postal Code _____

Well Location Address: Street No. #9 Street name Castle drive City / Town Pineridge Wisc

Legal description: Lot _____ Plan _____ D.L. _____ Block _____

PID: _____ AND Description of well location (attach sketch if nec.): To right of house about 3/4 way down 30' out

NAD 83: Zone: _____ AND UTM Easting: 502 258 m Latitude: _____

UTM Northing: 6719812 m Longitude: _____

Method of drilling: air rotary dual rotary cable tool mud rotary auger driving jetting other (specify) _____

Orientation of well: vertical horizontal Ground elevation _____ ft (asl) Method: _____

Class of well: _____

Water supply wells, indicate water use: private domestic water supply system irrigation commercial or industrial other (specify) _____

LITHOLOGIC DESCRIPTION		Surficial Material								Bedrock Material								Color								Hardness				Water Content						Observations (e.g. other geological materials (e.g. boulders), est. water bearing flow (USgpm), or closure details)	
From ft (bgl)	To ft (bgl)	Clay	Silt	Till	Sand with clay/silt	Sand, fine-med	Sand, med-coarse	Sand with gravel	Siltstone/Shale	Sandstone	Conglomerate	Limestone	Basalt	Volcanic	Crystalline	Other Surficial Bedrock	Red	Orange	Brown	Tan	Light Grey	Blue	Green	Dark Grey	Very Hard	Hard	Dense / Stiff	Loose	Dry	Moist	Wet	High Production	Lost circulation	Not available			
0	1																																				organics
1	55																																				clean coarse
55	78																																				gravel layers
78	97																																				
97	113																																				12gpm
113	117																																				

CASING DETAILS						SCREEN DETAILS					
From ft (bgl)	To ft (bgl)	Dia in	Casing Material / Open Hole	Wall Thickness in	Drive Shoe	From ft (bgl)	To ft (bgl)	Dia in	Type	Slot Size	
0	113	6.5	Steel	2.19	RA						

Surface seal: Type _____ Depth _____ ft
Method of installation Poured Pumped Thickness _____ in
Backfill: Type _____ Depth _____ ft
Liner: PVC Other (specify): _____
Diameter _____ in Thickness _____ in
From _____ ft (bgl) To _____ ft (bgl)
Perforated: From _____ ft (bgl) To _____ ft (bgl)

Intake: Screen Open bottom Uncased hole
Screen type: Telescope Pipe size
Screen material: Stainless steel Plastic Other: _____
Screen opening: Continuous slot Slotted Perforated pipe
Screen bottom: Bail Plug Plate Other: _____
Filter pack: From _____ ft To: _____ ft Thickness: _____ in
Type and size of material: _____

DEVELOPED BY	FINAL WELL COMPLETION DATA
<input type="checkbox"/> Air lifting <input type="checkbox"/> Surging <input type="checkbox"/> Jetting <input type="checkbox"/> Pumping <input type="checkbox"/> Bailing Other (specify): _____ Total duration: _____ hrs Notes: _____	Total depth drilled: <u>117</u> ft Finished well depth: <u>113</u> ft (bgl) Final stick up: <u>18</u> in Depth to bedrock: _____ ft (bgl) SWL: <u>92</u> ft (bgl) Estimated well yield _____ USgpm Artesian flow: _____ USgpm, or Artesian pressure: _____ ft Type of well cap: <u>pitless</u> Well disinfected: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Where well ID plate is attached: _____

WELL YIELD ESTIMATED BY	OBVIOUS WATER QUALITY CHARACTERISTICS	WELL CLOSURE INFORMATION
<input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Air lifting <input type="checkbox"/> Bailing <input type="checkbox"/> Other (specify): _____ Rate: _____ USgpm Duration: _____ hrs SWL before test: _____ ft (btoc) Pumping water level: _____ ft (btoc)	<input type="checkbox"/> Fresh <input type="checkbox"/> Salty <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Sediment <input type="checkbox"/> Gas Colour / Odour: _____ Water sample collected: <input type="checkbox"/>	Reason for closure: _____ Method of closure: <input type="checkbox"/> Poured <input type="checkbox"/> Pumped Sealant Material: _____ Backfill material: _____ Details of closure: _____

WELL DRILLER (print clearly)	DATE OF WORK (yyyy/mm/dd)
Name (first, last): <u>Brian Mac Donnell</u> Consultant (if applicable; name & company): _____	Started: <u>Aug 2011</u> Completed: <u>Aug 2011</u> Comments: _____

Signature of Driller Responsible: Brian Mac Donnell

PLEASE NOTE: The information recorded in this well report describes the works and hydrogeologic conditions at the time of construction, alteration or closure as the case may be. Well yield, well performance and water quality are not guaranteed as they are influenced by a number of factors, including natural variability, human activities and condition of the works, which may change over time.