

WELL NO. 61439 LOCAL ID _____
 OWNER Pittman, Ralph W.

CONSTRUCTION DATE 7-23-85
 PURPOSE TEST PERMANENT

USE DOMESTIC AGRICULTURAL
 COMMERCIAL INDUSTRIAL
 IRRIGATION PUBLIC
 MONITOR DEWATERING
 HEAT PUMP RECHARGE HEAT PUMP SUPPLY
 OTHER (Specify) _____

IS THIS A REPLACEMENT WELL? YES NO
 ABANDONMENT DATE FOR OLD WELL N/A
 ABANDONMENT METHOD N/A

DRILLING METHOD
 AUGERED BORED CABLE TOOL
 DRIVEN JETTED AIR ROTARY
 MUD ROTARY REVERSE WASHED
 OTHER (Specify) _____
 TOTAL DEPTH DRILLED _____

CASING SEQUENCE

	1st	2nd	3rd	4th
CASING TOP	0'			
CASING BOTTOM	75'			
CASING DIAMETER	2"			
CASING MATERIAL	SCH 40 PVC			

SCREEN SEQUENCE

	1st	2nd	3rd	4th
SCREEN TOP	75'			
SCREEN BOTTOM	80'			
SCREEN DIAMETER	2"			
SCREEN MATERIAL	SCH 40 PVC			

WRITTEN APPROVAL FOR SCREENING/ GRAVEL PACKING DEEPER THAN ONE ANCHOR FEET MUST BE OBTAINED FROM DRREC

DRILL TYPE: CEMENT BENTONITE CLAY
 OTHER: _____
 FROM 3 TO 20 FEET
 NON-GRAVEL BACKFILL OF WELL ANNULUS
 TYPE 2 1/2" INCHES FROM 20 TO 75 FEET
 GRAVEL PACK: TYPE MORIE 1 & 2
 FROM 73 TO 80 FEET
 STATIC WATER LEVEL: DATE 7-23-85
12 FT. (Below, above, GROUND SURFACE)
 PUMPING WATER LEVEL 15 FT. BELOW GRADE
 AFTER 1 HOURS AT 60 GPM.

WELL HEAD COMPLETION:
 E: PILESS ADAPTOR
 OTHER CASING
18 INCHES ABOVE GRADE

TYPE OF PERMANENT PUMP INSTALLED

PUMP MANUFACTURE _____
 RATED CAPACITY (GPM) _____ N/A
 PUMP INTAKE SETTING _____ FT. BELOW GRADE
THE COMPLETED WELL IS?

- | | | |
|--|-------------------------------------|--------------------------|
| | YES | NO |
| A. AT LEAST 5' FROM ANY OVERHANG | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. AT LEAST 50' FROM ANY SEPTIC TANK | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. AT LEAST 10' FROM TOWN SEWER LINE | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. AT LEAST 100' FROM THE NEAREST EDGE OF ANY TILE FIELD | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

THE NEAREST NEIGHBORS (CIRCLE ONE)

SEPTIC, TILE FIELD CESSPOOL OR PRIVY
 IS 100' FROM COMPLETED WELL
 IS COMPLETED WELL LOCATED AS SHOWN ON APPLICATION FORM?
 IF NO, DESCRIBE LOCATION CHANGE OR OTHER COMMENTS

RECEIVED
 AUG 1 1985
 WATER SUPPLY

Rc22-07
 HEB

DRILLERS LOG DESCRIPTION	TOP OF STRATA	BOTTOM OF STR.
Topsoil	0	1
fine silty sand	1	12
10m silty med.	12	50
loose silty med.	50	55
fine silty med.	55	70
fine silty sand	70	95

SUPPLEMENTAL DRILLERS LOG ATTACHED YES NO
 PAGE 1 OF 1 PAGES
 COMPANY NAME LARSON WELLS, INC
 SIGNATURE OF DRILLER IN CHARGE _____ DATE 7-26-85