

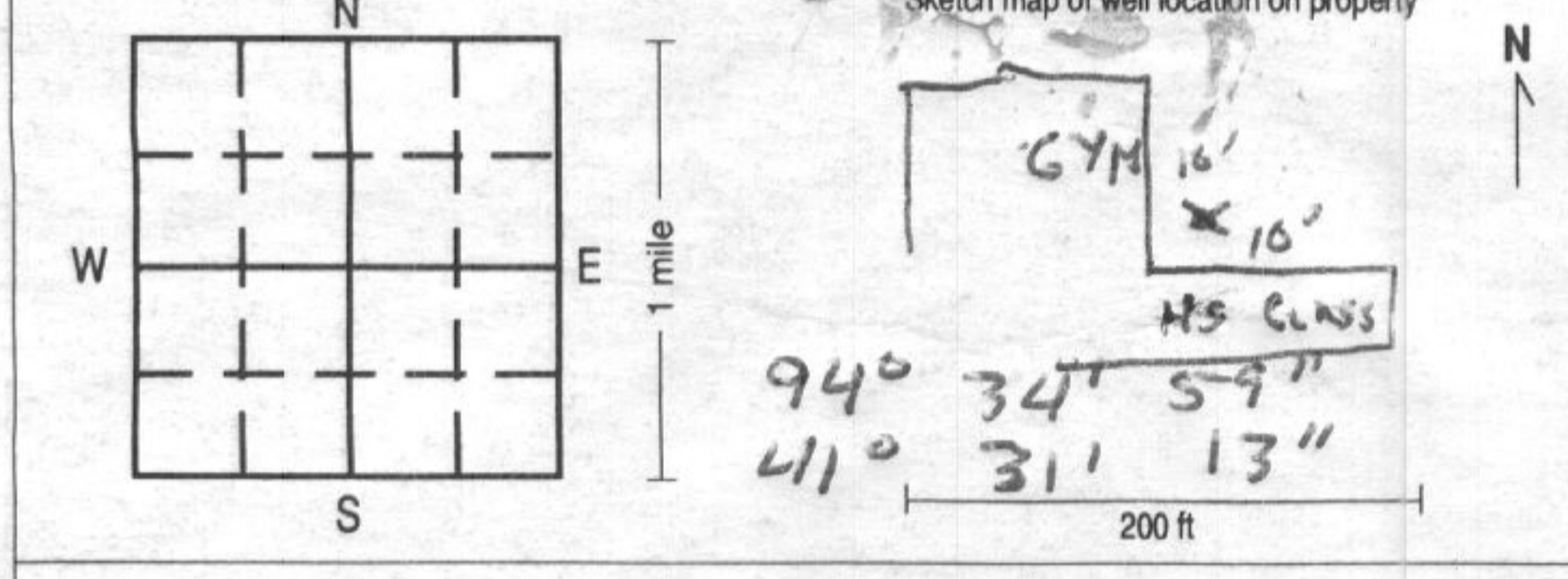
Site identification
 Property Owner Adair-Casco Community Schools Well Number 1
 Address 3384 INDIAN STREET ADAIR
 Tenant 310 samples
 Well Depth 300 ft Date Completed 10/28/99

Drill method rotary auger cable other _____
Hole size
6 inch from 0 ft to 360 ft hole size continued _____ inch from _____ ft to _____ ft
 _____ inch from _____ ft to _____ ft _____ inch from _____ ft to _____ ft

Location County GUTHRIE
 _____ mi. N and _____ mi. E of intersection of _____ and _____
All 1/4 of the SW 1/4 of the SW 1/4 of Sec 30 TWP 78N R1G 32E
OF 5th PRIME MERIDIAN (W)
 Show exact location of well in section grid with a dot (•).

Casing Drive shoe (yes/no) _____ Pitless adaptor (yes/no) _____

Size (ID/OD)	Type / Wt	Depth top	Depth bottom	Amount (length)
(A diagonal line is drawn across this table)				



Perforated or slotted casing? (yes/no) NO
 Perforated / slotted from _____ ft to _____ ft
 Perforated / slotted from _____ ft to _____ ft

Casing grouted? (yes/no) YES

Type	Depth Top	Depth Bottom	Amount
<u>20% Bentonite</u>	<u>0</u>	<u>300</u>	

upland hillside valley Elevation (if known) _____

Formation log

From	To	Color	Hardness	Formation description
0	10			
10	20			
20	30			
30	40			
40	50			
50	60			
60	70			
70	80			
80	90			
90	100			
100	110			
110	120			
120	130			
130	140			
140	150			
150	160			
160	170			
170	180			
180	190			
190	200			

use additional sheets as needed

Well screen? (yes/no) NO

Diameter	Slot size	Depth Top	Depth Bottom	Length	Material

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

Well developed? (yes/no) _____
 Explain GEO-THERMAL WELL WITH 1" POLYETHYLENE UBEND PIPE

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 _____ ft to _____ ft
 Final water level (static water level) _____ ft (below / above) GL.
 Pumping water level _____ ft below GL; tape airline E-line
 At yield of _____ GPM; orifice volumetric estimate Date _____

Water quality test? (yes/no) NO Date tested _____/_____/_____
 Tested by _____
 Test results _____

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

Well use

<input type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Industrial
<input type="checkbox"/> Livestock	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Test Well	<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Other <u>GEO-THERMAL</u> (explain)

Contractor TRI-COUNTY REFRIGERATION
Address P.O. BOX 67, PLANO, IA
Driller JAMES BEAR Certification no. 40134