Iowa Department of Natural Resources Geological Survey Bureau
109 Trowbridge Hall, Iowa City, IA 52242-1319 PH (319) 335-1575

WELL RECORD 59065

Permit No. 2004-372W

Site identification

Property Owner Johnson Co. Ag Well Number ____
Address 4265 Oak Crest Hill Rd Iowa City
Tenant ____
Well Depth 450 ft Date completed 6 / 18 / 04

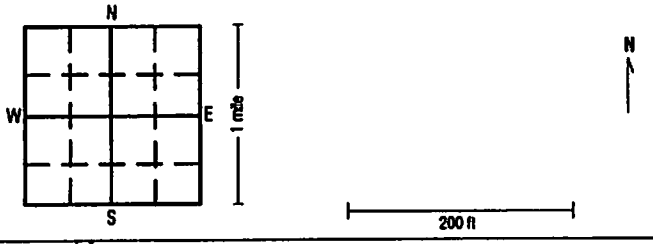
Location

County Johnson

____ mi. N/S and ____ mi. E/W of intersection of ____ and ____

SE 1/4 of the SE 1/4 of the NE 1/4 of Sec 28 TWP 79N RNG 6 E/W

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



☐ upland ☒ hillside ☐ valley Elevation (if known) ____

Formation log

From	To	Color	Hardness	Formation description
0	27			Clay
27	35			Sand
35	161			Blue Clay
161	273			Limestone
273	442			Silurian
442	450			Maquoketa Shale

use additional sheets as needed

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

Well use

☐ Domestic ☐ Livestock ☐ Test well
☐ Municipal ☒ Public supply ☐ Irrigation
☐ Commercial ☐ Monitoring ☐ Other ____ (explain)

Drill method

☒ rotary ☐ auger ☐ cable other ____

Hole size

18 inch from 0 ft to 161 ft
13 inch from 161 ft to 296 ft

hole size continued
7 7/8 inch from 296 ft to 450 ft
____ inch from ____ ft to ____ ft

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

Casing

Drive shoe (yes / no) Pitless adapter (yes / no)

Size (ID/OD)	Type / Wt	Depth top	Depth bottom	Amount (length)
14" .025	Steel	+5	162	167
8" SCH40	Steel	+1	296	297

Perforated or slotted casing? (yes / no)

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

Casing grouted? (yes / no) Placement method Cement

Type	Depth Top	Depth bottom	Amount (vol/wt)
Cement	0	162	140 cu/ft
Cement	0	296	130 cu/ft

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 ____ depth ____ ft
Gravel packed (yes / no) from ____ ft to ____ ft
type ____ amount ____

Well developed? (yes / no)

Explain air
(pumped, airlifted, bailed) for ____ hrs at ____ 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 296 ft to 440 ft ☐ seepage well
Static water level 45 ft (below / above) GL; ☒ tape ☐ airline ☐ E-line ☐ estimate
Pumping water level 200 ft below GL; ☐ tape ☐ airline ☐ E-line ☐ estimate
At yield of 70 GPM; ☐ orifice ☐ volumetric ☐ estimate
Measurements taken at ____ : ____ (AM / PM) Date ____ / ____ / ____

Water quality test? (yes / no) Date tested ____ / ____ / ____

Tested by ____

Contractor Gingerich Well
Address 1321 Laust Ave Kalona IA 52247
Driller Kent Gingerich Certification no. 4006

white copy – Iowa DNR, Geological Survey Bureau blue copy – Well Contractor pink copy – Customer yellow copy – County Health Officer