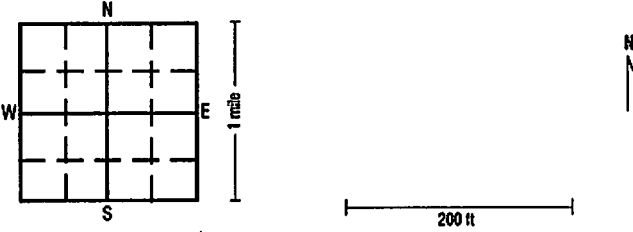


Site identification
 Property Owner Monmouth, City of Well Number 2
 Address 501 N. Division Monmouth, IA
 Tenant _____
 Well Depth 210 ft Date completed 4/1/05

Location County Jackson
 _____ mi. N and _____ mi. E of intersection of _____ and _____
City Limits 1/4 of the _____ 1/4 of the _____ Sec _____ TWP 8th RANG 10E
 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	8			Till
8	9			SAND
9	41			Limestone + Shale
41	47	Yellow		Limestone
47	48	Brown		Shale
48	53			Limestone
53	54	Brown		Shale
54	76	Yellow		Limestone w/ Chert
76	78	Brown		Shale
78	82	Yellow		Limestone
82	121	White/Yellow		Dolomite
121	183	Yellow/white		Dolomite
183	210	Gray		Limestone

use additional sheets as needed

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

Well use

<input type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Commercial
<input type="checkbox"/> Livestock	<input checked="" type="checkbox"/> Public supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Test well	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Other _____

(explain)

Drill method rotary auger cable other _____
Hole size
18 inch from 0 ft to 41 ft
13 inch from 41 ft to 210 ft

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

Casing Drive shoe (yes/no) Pileless adapter (yes/no)

Size (I/O)	Type / WT	Depth top	Depth bottom	Amount (length)
14" OD	375 Steel	+1	41	42
10" SD	26 PVC	38	83	44

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)
*			

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 A.R.
 (pumped, airlifted, bailed) for 16 hrs at 120 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 41 ft to 160 ft seepage well
 Static water level 20 ft (below/above) GL; tape airline E-line estimate
 Pumping water level _____ ft below GL; tape airline E-line estimate
 At yield of _____ GPM; orifice volumetric estimate
 Measurements taken at _____; _____ (AM/PM) Date ____/____/____

Water quality test? yes / no) Date tested ____/____/____
 Tested by Hygenic Lab

Contractor Gingerich Well
 Address 1331 Hwy 1 Kalona IA 52247
 Driller Kent Guyer Certification no. 2639