39651

Iowa Department of Natural Resources

Abandoned Water Well
Plugging Record

RECEIVED
AUG 23 2013

1. Owner:

Name: City of Early City: Early State: Iowa

Address: 107 Main Street Zip: 50535 Phone: (712) 273-5283

2. Well (Cistern) Location:

NE 1/4 of, SE 1/4 of, SE 1/4 of, Section 9, Twp. 88 N, Range 37 (West) East (circle one)

Sac County, Describe well location on property: Located just north of the abandoned fueling station south of Early on the west side of HWY 71.

3. Description: (Wnumber 39651?)

Well depth:	44 ft.	Casing material: (steel,) plastic, concrete, clay, brick, stone	(circle one)
Depth to water:	23 ft.		
Casing diameter:	12 in.	Type of construction: (drilled,) driven, bored, dug, augered	(circle one)
Yr. or decade constrd.:	1973?		
Depth of casing:	34 ft.	Check ☐ if this is a Monitoring Well	Well I D.:

Check ☐ if Cistern depth: _____ ft. diameter: _____ ft.

I certify this well has been plugged as required by rule 567-39.8 of the Iowa Administrative Code (IAC). I agree to provide any additional information the county or department may need concerning this well.

Signature of Owner: Sharon Ann Irwin Date Plugged: 07/02/13

If plugged by certified well contractor, complete this box:

I have plugged this well as required by rule 567-39.8 of the Iowa Administrative Code (IAC).

Signature of Contractor: _____ Cert. No. 7320

OR, *If plugged by well owner, complete this box:*

The property owner has plugged this well following requirements in rule 567-39.8 of the Iowa Administrative Code with the oversight and assistance of the designated county agent.

Signature of County Agent: N/A Date Approved: _____

Eligible for Grants-to-Counties cost share: ☐ YES ☐ NO (Determined by County Agent)

Complete one form for each well plugged and submit within 30 days to the local county agent:	or, only if no county agent is available, to:
	Water Supply Section **Department of Natural Resources** **900 East Grand Avenue** **Des Moines, IA 50319-0034**

DNR FORM (REV 12/95) **542-1226**