

HAR.
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8-23-61

WATER WELL DRILLERS LOG **CODED**

Date: 8-23, 1961, Driller: C. T. SWITZER WELL CO. County Harrison
(Name)

(1) Owner of land:	Description & Color of Materials Sand, Clay, Red Clay, Shell, etc.	Thick- ness Feet	Depth Feet
<u>Frank Andrews</u> (Name) <u>28 1/2 St & Thompson Rd</u> (Address)	<u>clay</u>	<u>0</u>	<u>55</u>
(2) Location: <u>1/4</u> , <u>1/4</u> , Sec. <u>32</u> , T. <u>R.</u>	<u>good sand</u>	<u>55</u>	<u>81</u>
<u>_____</u> miles <u>_____</u> of <u>_____</u> (distance) (direction) (Nearest Town)	<u>clay.</u>	<u>81</u>	<u>125</u>
(3) Topography: <u>X</u> (Hilly) (Flat) (Level)	<u>fine sand</u>	<u>125</u>	<u>186</u>
(4) Purpose of Well: <u>Domestic</u> (Domestic Irrigation Municipal, Industrial, Other)	<u>clay</u>	<u>186</u>	<u>202</u>
	<u>sand good</u>	<u>202</u>	<u>240</u>

Information upon completion of well:

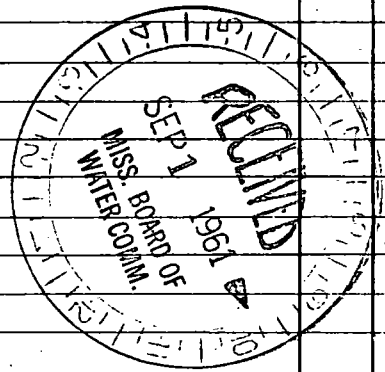
- (1) Diameter 2" inches.
- (2) Total Depth 240' feet.
- (3) Water Level 6" feet below top of ground.
- (4) Cased to 240', Size 2"
- (5) Screen: Size 2", Length 10'
- (6) Were any formations sealed against pollution?
X yes, _____ no.

If YES depth of formation _____

Why Health Dept Requirement

Drillers Remarks: _____

CODED



(Use Back Side)

Well No. _____

WATER WELL DRILLING REPORT

Date: _____

Owner's Name
Address
City
County
State
Zip

(1) Owner's Name _____
 (2) Location: _____
 (3) Topography: _____
 (4) Purpose of Well: _____

Information upon completion of well

(1) Diameter: _____
 (2) Total Depth: _____
 (3) Water level: _____ feet below top of ground.
 (4) Cased to: _____ size.
 (5) Screen size: _____ length.
 (6) Were any formations sealed against pollution? _____

If YES depth of formation _____

Why? _____

Drillers Remarks: _____