

If well telescopes please sketch and show depths.

10/10/00

GROUND LEVEL

		X	

SECTION 8

Please indicate well location X.

Pump Capacity (GPM) <u>8</u>	No. of Stages <u>2</u>	Setting Depth _____ FT.
---------------------------------	---------------------------	----------------------------

PUMP TEST

Well yielded _____ GPM with
a drawdown of _____ ft.
after _____ hours of pumping

LOG DATA

TYPE OF LOG RUN (Circle One): No Log Run
Electric, Gamma Ray, Density, Sonic, Neutron,
Other (Describe) _____

Name of Organization Running Log _____

GEOLOGIC DATA (Office Use Only)

Surface Elev.	Geologic Unit	Unit Thickness	Depth to Top
Subs. SWL	Date	Analysis	Aquifer Test

Driller's Remarks

If more than one screen, show location of each on sketch.