

Water Well Field Data Form

USGS Well No. _____ County Windsor

T _____ R _____ S 1/4 1/4 1/4

Local Well Name _____

Owner MPLP Substation West St.

Date 2/7 1994 Party JG

OLWR Permit No. MS-GW- _____ Quad Map _____

Health Department (PWS) Tag No. _____

GPS File No. _____ Elevation _____ ft.

Measuring Point Point on the Substation side of well

Previous Water Level _____ ft. Date _____

Tape down no.	1	2	3	4
Time	11:45			
Held	25.00	20.00		
Wet	6.92	1.93		
Difference	18.08	18.07		
MP Correction	6.1	6.1		
Water Level	11.98	11.97		
WL corr. to MSL				

Note: Provide sketch of location and/or measuring point on back if necessary.

Remarks: _____

