

If well telescopes, please sketch and show depths.

GROUND LEVEL

SECTION _____

Please indicate well location X .

Pump Capacity (GPM) 42	No. of Stages 15	Setting Depth (Ft.) 147
PUMP TEST Well yielded _____ GPM with a drawdown of _____ feet after _____ hours of pumping.		
LOG DATA		
TYPE OF LOG	No Log Run <input type="checkbox"/>	Electric <input type="checkbox"/>
Gamma Ray <input type="checkbox"/>	Density <input type="checkbox"/>	Sonic <input type="checkbox"/>
Other (Describe) _____		
Name of Organization Running Log _____		
GEOLOGIC DATA (Office Use Only)		
Surface	Geologic Unit	Unit Thickness
Subs. SWL	Date	Analysis
		Aquifer Test
Driller's Remarks .		

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