



If well telescopes, please sketch and show depths.

GROUND LEVEL


SECTION \_\_\_\_\_

Please indicate well location X.

Pump Capacity (GPM) <i>1000</i>	No. of Stages	Setting Depth FT.
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**PUMP TEST**

Well yielded **NO PUMP INSTALLED OR TESTED** GPM with a drawdown of \_\_\_\_\_ ft. after \_\_\_\_\_ hours of pumping

**LOG DATA**

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

Name of Organization Running Log \_\_\_\_\_

**GEOLOGICAL DATA (Office Use Only)**

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

Driller's Remarks  
 Layne File No. 22-9068

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