FORM 9-1642

WELL SCHEDULE

U. S. DEPT. OF THE INTERIOR

WATER RESOURCES DIVISION

MASTER CARD

Record by: J. Shell
Source of data: Bowe
Date: 4/14
Map:

State:
County:
Latitude:
Longitude:
Lat-long accuracy:
Local well number:
Local use:
Owner or name:
Owner or name:
Ownership:
Use of water:
Use of well:
DATA AVAILABLE:
Hyd. lab. data:
Qual. water data:
Freq. sampling:
Pumpage inventory:
Pump intake setting:

WELL-DESCRIPTION CARD

SAME AS ON MASTER CARD

Depth well:
Depth cased:
Casing type:
Finish:
Method:
Drilled:
Driller:
Lift:
Power:
Descrip. MP:
Alt. LSD:
Water Level:
Date:
Drawdown:
QUALITY OF WATER DATA:
Sp. Conduct:
Temp:
Taste, color, etc.