FORM 9-1642
(1-68)

WELL SCHEDULE
U. S. DEPT. OF THE INTERIOR
GEOLOGICAL SURVEY
WATER RESOURCES DIVISION

MASTER CARD

Record by: [Name]
Source of data: [Place]
Date: 7-2-58
Map

State: [State Abbreviation]
County: [County Name]
(Town)

Latitude: [Latitude]
Longitude: [Longitude]
Sequential number: [Number]

Lat-long accuracy:

Local well number: [Number]
Local use:

Owner or name: [Name]
Address:

Ownership:

Use of:

Well:

Data Available:

Hyd., lab. data:
Qual. water data:

Freq. sampling:

Aperture cards:

Log data:

Well Description Card:

SAME AS MASTER CARD
Depth well:
Depth cased:
Finish:
Method:
Drilled:
Date:
Driller:

Lift:
Power:

Descrip. MP:

Alt. LSD:
Water Level:

Date:

Drawdown:

Quality of Water Data:

Sp. Conduct:

Taste, color, etc.

pH = 6.3

[Other Data]