Wel 6

WELL CONSTRUCTOR'S REPORT TO WISCONSIN STATE BOARD OF HEALTH

See Instructions on Reverse Side

1. County Ozaukee { Town ☑ / Village ☐ / City ☐ } Cedarburg (Check one and give name)

2. Location SW¼ of SE¼ of sec. 26 T 10 N R 21 E
Name of street and number of premise or Section, Town and Range numbers

3. Owner ☑ or Agent ☐ Arno Boeker
Name of individual, partnership or firm

4. Mail Address 663 No. 4th Ave. Cedarburg
Complete address required

5. From well to nearest: Building 10 ft; sewer — ft; drain — ft; septic tank — ft; dry well or filter bed — ft; abandoned well — ft.

6. Well is intended to supply water for: Home

7. DRILLHOLE:

Dia. (in.)	From (ft.)	To (ft.)	Dia. (in.)	From (ft.)	To (ft.)
10	0	40			
6	40	133			

8. CASING AND LINER PIPE OR CURBING:

Dia. (in.)	Kind and Weight	From (ft.)	To (ft.)
6	19.4# Well Casing	0	74

9. GROUT:

Kind	From (ft.)	To (ft.)
Clay slurry	0	74

10. FORMATIONS:

Kind	From (ft.)	To (ft.)
Clay	0	70
Limestone	70	72
Sand	72	74
Limestone	74	133

RECEIVED
NOV 11 1957
ENVIRONMENTAL SANITATION

Construction of the well was completed on: Oct 16 1957

The well is terminated 10 inches ☑ above, below ☐ the permanent ground surface.

Was the well disinfected upon completion? Yes ✓ No ____

Was the well sealed watertight upon completion? Yes ✓ No ____

11. MISCELLANEOUS DATA:

Yield test: 10 Hrs. at 10 GPM.

Depth from surface to water-level: 35 ft.

Water-level when pumping: 45 ft.

Water sample was sent to the state laboratory at: Madison (City) on Oct 16 1957

Signature Robert Demuth
Registered Well Driller

631 So. Wash. Ave. Cedarburg, Wis.
Complete Mail Address

Please do not write in space below

Rec'd ____ No. ____

Ans'd ____

Interpretation ____

	10 ml	10 ml	10 ml	10 ml	10 ml
Gas—24 hrs.					
48 hrs.					
Confirm					
B. Coli					

Examiner ____

OZ6108