

WELL COMPLETION REPORT

3/71

K61

OSCAWANA

PUTNAM COUNTY DEPARTMENT OF HEALTH

Division of Environmental Health Services
COUNTY OFFICE BUILDING - CARMEL, NEW YORK

This report is to be completed by well driller and submitted to County Health Department together with laboratory report of analysis of water sample indicating water is of satisfactory bacterial quality before certificate of construction compliance is issued.

REPORT MUST BE SUBMITTED WITHIN 30 DAYS OF WELL COMPLETION

41 27 25 73 45 55

P1080

OWNER	NAME Ed Troischt		ADDRESS Richardville Road Carmel	
LOCATION OF WELL	(No. & Street) Richardville Road		(Town) Kent	(Lot Number) 1
PROPOSED USE OF WELL	<input checked="" type="checkbox"/> DOMESTIC	<input type="checkbox"/> BUSINESS ESTABLISHMENT	<input type="checkbox"/> FARM	<input type="checkbox"/> TEST WELL
	<input type="checkbox"/> PUBLIC SUPPLY	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> AIR CONDITIONING	<input type="checkbox"/> OTHER (Specify)
DRILLING EQUIPMENT	<input type="checkbox"/> ROTARY	<input checked="" type="checkbox"/> COMPRESSED AIR PERCUSSION	<input type="checkbox"/> CABLE PERCUSSION	<input type="checkbox"/> OTHER (Specify)
	CASING DETAILS		LENGTH (feet) 21	DIAMETER (inches) 6
		WEIGHT PER FOOT 19	<input checked="" type="checkbox"/> THREADED <input type="checkbox"/> WELDED	DRIVE SHOE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
				WAS CASING GROUTED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
YIELD TEST	<input type="checkbox"/> BAILED	<input type="checkbox"/> PUMPED	<input checked="" type="checkbox"/> COMPRESSED AIR	HOURS G.P.M. YIELD (G.P.M.) 15
WATER LEVEL	MEASURE FROM LAND SURFACE - STATIC (Specify feet) 10		DURING YIELD TEST (feet) Total Drawdown	Depth of Completed Well in feet below land surface: 176
SCREEN DETAILS	MAKE			LENGTH OPEN TO AQUIFER (feet)
	SLOT SIZE	DIAMETER (inches)	IF GRAVEL PACKED:	Diameter of well including gravel pack (inches):
				GRAVEL SIZE (inches) FROM (feet) TO (feet)

760, 5

DEPTH FROM LAND SURFACE FEET to FEET		FORMATION DESCRIPTION	Sketch exact location of well with distances, to at least two permanent landmarks.
0	2	Overburden	
2	176	gray granite	

If yield was tested at different depths during drilling, list below

FEET	GALLONS PER MINUTE

DATE WELL COMPLETED 4-11-84	DATE OF REPORT 9-14-84	WELL DRILLER (Signature) <i>[Signature]</i>
--------------------------------	---------------------------	--