

WELL COMPLETION REPORT

3/71

C110

CROTON FALLS

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

P909

41 21 18 75 42 17

OWNER	NAME <i>Maple Grove</i>		ADDRESS	
LOCATION OF WELL	(No. & Street) <i>Englewood Terrace</i>		(Town) <i>Malabar N.Y.</i>	(Lot Number) <i>10541</i>
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 checked="" type="checkbox"/> ROTARY	<input type="checkbox"/> COMPRESSED AIR PERCUSSION	<input type="checkbox"/> CABLE PERCUSSION	<input type="checkbox"/> OTHER (Specify)
	CASING DETAILS	LENGTH (feet) <i>21'</i>	DIAMETER (Inches) <i>6"</i>	WEIGHT PER FOOT <i>17</i>
YIELD TEST	<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
	<input type="checkbox"/> BAILED	<input type="checkbox"/> PUMPED	<input checked="" type="checkbox"/> COMPRESSED AIR	HOURS <i>7+</i> G.P.M. <i>5</i> YIELD (G.P.M.) <i>5</i>
WATER LEVEL	MEASURE FROM LAND SURFACE - STATIC (Specify feet)		DURING YIELD TEST (feet)	
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)

505 5

Depth of Completed Well in feet below Land surface: *400'*

DEPTH FROM LAND SURFACE		FORMATION DESCRIPTION
FEET	to FEET	
<i>1'</i>	<i>11'</i>	<i>overburden</i>
<i>11'</i>	<i>400'</i>	<i>bedrock schist</i>

Sketch exact location of well with distances, to at least two permanent landmarks.

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

FEET	GALLONS PER MINUTE

DATE WELL COMPLETED <i>11/27/83</i>	DATE OF REPORT	WELL DRILLER Signature <i>M. Anderson</i>
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