WELL COMPLETION REPORT

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C 172 C172 ~~41 25 34~~ ~~73 44 4~~ LAKE CARMEL 41 25 12 73 43 43

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**

P945

| | | | | |
|---|---|---|---|---|
| OWNER | NAME Creative Homes | | ADDRESS | |
| LOCATION OF WELL | Nigolik (No. & Street) | | (Town) | (Lot Number) |
| PROPOSED USE OF WELL | ☒ DOMESTIC | ☐ BUSINESS ESTABLISHMENT | ☐ FARM | ☐ TEST WELL |
| | ☐ PUBLIC SUPPLY | ☐ INDUSTRIAL | ☐ AIR CONDITIONING | ☐ OTHER (Specify) 750 S |
| DRILLING EQUIPMENT | ☒ ROTARY | ☐ COMPRESSED AIR PERCUSSION | ☐ CABLE PERCUSSION | ☐ OTHER (Specify) |

| CASING DETAILS | LENGTH (feet) | DIAMETER (inches) | WEIGHT PER FOOT | ☒ THREADED ☐ WELDED | DRIVE SHOE ☒ YES ☐ NO | WAS CASING GROUTED? ☒ YES ☐ NO |
|---|---|---|---|---|---|---|
| | 90' | 6" | 17 | | | |

| YIELD TEST | ☐ BAILED | ☐ PUMPED | ☒ COMPRESSED AIR | HOURS 7+ | G.P.M. 5 | YIELD (G.P.M.) 5 |
|---|---|---|---|---|---|---|

| WATER LEVEL | MEASURE FROM LAND SURFACE—STATIC (Specify feet) | DURING YIELD TEST (feet) | Depth of Completed Well in feet below Land surface: 500' |
|---|---|---|---|
| | | | |

| 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) |

| DEPTH FROM LAND SURFACE FEET | to FEET | FORMATION DESCRIPTION |
|---|---|---|
| 1 | 80' | hardpan overburden |
| 80' | 500' | fedrich shist |
| | | |
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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 | DATE OF REPORT | WELL DRILLER (Signature) |
|---|---|---|
| 1/23/85 | | R. Anderson |