



MISSOURI DEPARTMENT OF
NATURAL RESOURCES
DIVISION OF
GEOLOGY AND LAND SURVEY
(573) 368-2165

REF NO	DATE RECEIVED	
CR NO	07/17/1995	
STATE CERT NO APPROVED DATE	CHECK NO.	
A049156 04/18/1996		
DATE ENTERED	ROUTE	REVENUE NO.
PHASE 1 PHASE 2 PHASE 3	WO1 / PCD / PLT	
07/27/1995 01/01/1000 12/28/2005		

**DOMESTIC/MULTIFAMILY WELL RECORD
AND PUMP INFORMATION DATA**

INFORMATION SUPPLIED BY WELL OR PUMP INSTALLATION CONTRACTOR		DNR VARIANCE NUMBER _____
OWNER NAME N	TELEPHONE (OPTIONAL)	CASING DEPTH NUMBER _____ Applicable only if casing depth or variance were obtained from DNR
OWNER ADDRESS	CITY	STATE MO ZIP
ADDRESS OF WELL (IF DIFFERENT THAN ABOVE)	CITY	STATE MO ZIP

PROPOSED USE OF WELL **SEE BACK OF FORM FOR WELL CLASSIFICATIONS**

WATER SUPPLY TO A PRIVATE RESIDENCE OR UP TO 3 PRIVATE RESIDENCES (DOMESTIC WELL)
 WATER SUPPLY TO 4 PRIVATE RESIDENCES OR UP TO 14 PRIVATE RESIDENCES AT A NON-COMMERCIAL FACILITY (MULTIFAMILY WELL)
 WATER SUPPLY TO A CHURCH WITH A CONGREGATION LESS THAN 25 PEOPLE (DOMESTIC WELL-CHURCH)

WATER USE INFORMATION VERIFIED BY OWNER SIGNATURE X _____ (SIGNATURE REQUIRED)
 ALL WELLS MUST PRODUCE LESS THAN 70 GPM TO THE SURFACE, SERVE LESS THAN 25 PEOPLE AND HAVE LESS THAN 15 CONNECTIONS-otherwise use high yield/public well record DATE: _____

CASING DETAILS

CASING LENGTH 84 FT. O.D. OF CASING 6.63 IN. DIAMETER OF DRILL HOLE 8.63 IN.
 CASING MATERIAL STEEL PLASTIC CONCRETE
 POSITION OF GROUT SEAL BOTTOM FULL LENGTH TOP

CASING GROUT MATERIAL CEMENT TYPE 1 HI-EARLY BENTONITE SLURRY CHIPS GRANULAR PELLETS
 METHOD OF GROUT INSTALLATION GRAVITY POS. DISPLACEMENT OPEN HOLE TREMIE
 PRESSURE GROUT THROUGH CASING THROUGH TREMIE
 DRILLING SUSPENDED NO YES 0 HRS
 NO. OF SACKS USED 0.0 POUNDS PER SACK _____

LINER DETAILS

LENGTH 0 FT. O.D. OF LINER 0.0 IN. LINER MATERIAL STEEL PLASTIC
 POSITION OF SEAL FULL LENGTH BOTTOM TOP

LINER GROUT MATERIAL CEMENT TYPE 1 HI-EARLY BENTONITE SLURRY CHIPS GRANULAR PELLETS
 METHOD OF GROUT INSTALLATION GRAVITY POS. DISPLACEMENT OPEN HOLE TREMIE
 LINER USED TO: HOLD BACK FORMATION SEAL OUT UNDESIREABLE AQUIFER CONDITIONS PREVENT RUST
 NO. OF SACKS USED 0.0 POUNDS PER SACK _____ ABANDONED WELL ON SITE? YES NO PLUGGED? YES NO

LOCATION OF WELL

LAT. _____ LONG. _____ COUNTY _____

DEPTH TO FIRST GROUNDWATER 0.0 FEET PUMP RATE 10.0 GPM
 WELL YIELD 15.0 GPM PUMP SET DEPTH 320.0 FEET
 STATIC WATER LEVEL 100.0 FEET PUMP INSTALLATION DATE _____
 WELL COMPLETION DATE 03/23/1995 pump info required this record or on pump card

Please be aware that we do not guarantee the accuracy of the data. It is submitted to us by a third party and has not been field verified.

DEPTH		FORMATION DESCRIPTION	(OPTIONAL) ELEVATION	LEGAL LOCATION (OPTIONAL)	AREA S2
FROM	TO				
0.0	30.0	OB			
30.0	250.0	GLS			
250.0	280.0	SHALE			
280.0	430.0	GLS			
430.0	456.0	MIXED LS			

OTHER INFORMATION OR LOCATION DATA (OPTIONAL)

I HEREBY CERTIFY THE WELL/PUMP INFORMATION DESCRIBED HEREIN IS TRUE AND ACCURATE

PRIMARY CONTRACTOR SIGNATURE DALE LETT	PERMIT NUMBER 002408	DATE
WELL DRILLER SIGNATURE DALE LETT	PERMIT NUMBER 002408	DATE
PUMP INSTALLER SIGNATURE	PERMIT NUMBER	DATE
APPRENTICE DRILLER SIGNATURE	PERMIT NUMBER	DATE
APPRENTICE PUMP SIGNATURE	PERMIT NUMBER	DATE

DEPTH TO BEDROCK 0.0 FEET
 TOTAL DEPTH 456.0 FEET