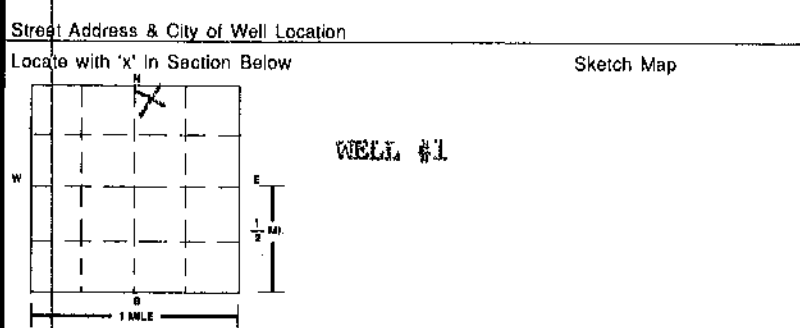


TAX NO: MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY PERMIT NO:
WATER WELL AND PUMP RECORD

1. LOCATION OF WELL
 County **Kalamazoo** Township Name **Richland** Fraction **NE 1/4 NW 1/4 NW 1/4** Section No. **29** Town No. **1S** Range No. **10W**

Distance and Direction from Road Intersection
One Mile North of Highway 41 & 3/4 Mile West of F Avenue East - Parchment, MI



3. OWNER OF WELL **Hidden Lake Conservancy**
 Address **c/o American Village Dev. Co. 4200 West Center St. Portage, MI 49024**
 Address Same as Well Location Yes No

4. WELL DEPTH: **165** ft. Date Completed **8 / 1 / 97**
 New Well Replacement Well

5. Cable Tool Rotary Driven Dug
 Hollow Rod Auger/Bored Jetted

6. USE: Household Type I Public Type III Public
 Irrigation Type IIa Public Heat Pump
 Test Well Type IIb Public LAKE RECHARGE

7. CASING: Steel Threaded Plastic Welded
 Other _____ Height: Above/Below Surface: **3** ft
 Diameter: **12** in. to **48** ft. depth Weight: _____ lbs./ft.
 BORE HOLE: Diameter: _____ in. to _____ ft. depth
 Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
 Type **SSWW** Diameter **10"**
 Slot/Gauze **0.018"** Length: **20'**
 Set Between **50** ft. and **70** ft.
 FITTINGS: K-Packer Bremer Check
 Blank Above Screen **2** ft. Other _____

9. STATIC WATER LEVEL: **5** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface **52** ft. After **8** hrs. Pumping at **662** G.P.M.
 Plunger Bailor Air Test Pump

11. WELL HEAD COMPLETION: Pitless Adapter 12" Above Grade
 Basement Offset Well House

12. WELL GROUTED? No Yes From _____ to _____ ft.
 Neat Cement Bentonite Other _____
 No. of Bags _____ Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type _____ Distance _____ ft. Direction _____
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. Capacity _____ G.P.M.
 TYPE: Submersible Jet Other _____
 PRESSURE TANK:
 Manufacturer's Name _____
 Model Number _____ Capacity _____ Gallons

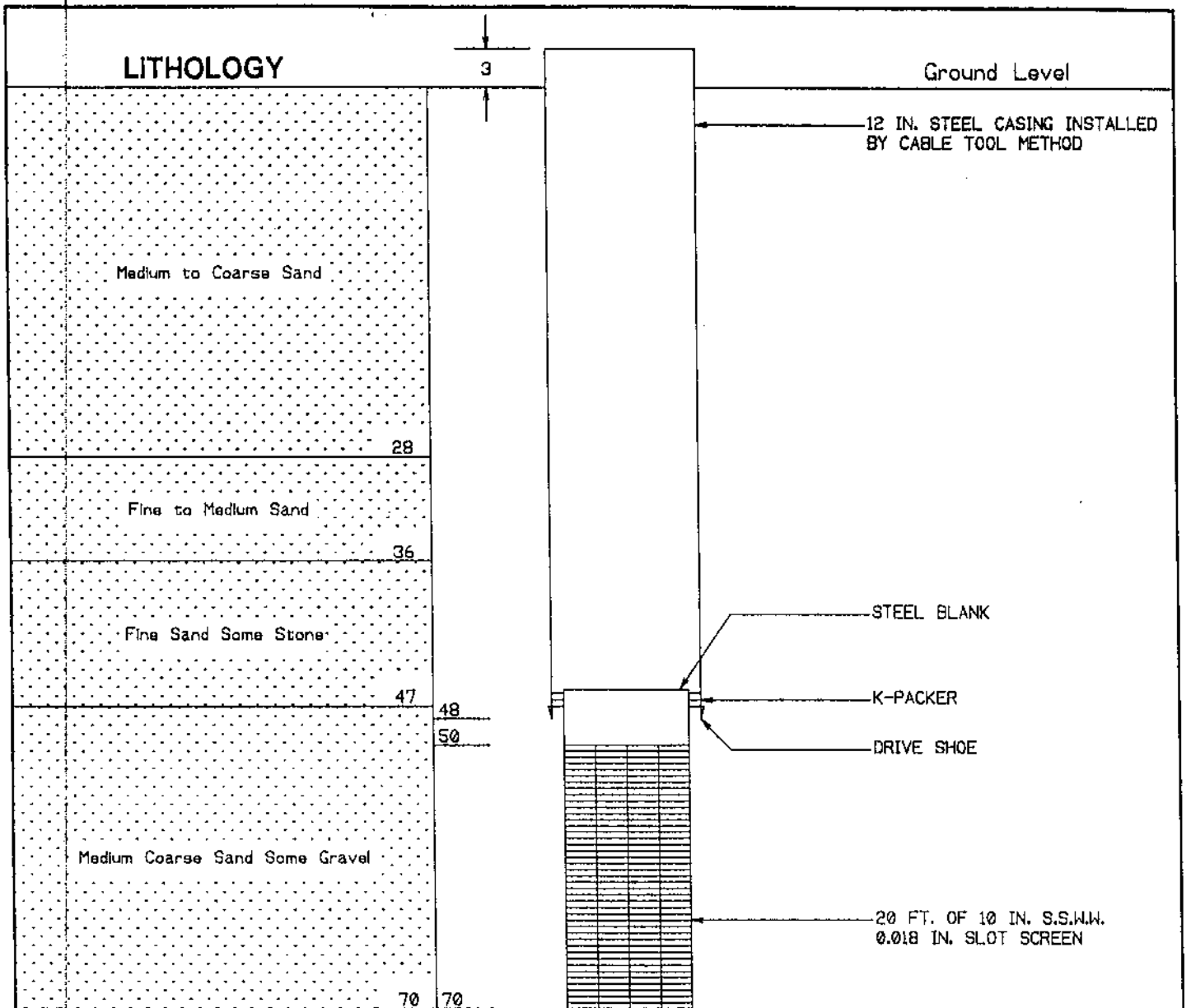
| 2. FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---------------------------------|----------------------|----------------------------|
| Medium to Coarse Sand | 28' | 28' |
| Fine to Medium Sand | 8' | 36' |
| Fine Sand, Some Stone | 11' | 47' |
| Medium Coarse Sand, Some Gravel | 23' | 70' |
| Very Fine Sand & Silt | 25' | 95' |
| Fine, Med. & Coarse Sand/gravel | 7' | 102' |
| Clay | 4' | 106' |
| Coarse Gravel Clean | 3' | 109' |
| Gravelly Clay | 12' | 121' |
| Silt to Fine Sand | 17' | 138' |
| Clay | 4' | 142' |
| Fine Sand, Silt & Clay | 18' | 160' |
| Soft Shale | 5' | 165' |
| USE A 2ND SHEET IF NEEDED | | |

15. ABANDONED WELL PLUGGED? Yes No
 Casing Diameter _____ in. Depth _____ ft.
 PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
 No. of Bags _____ Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)
A COPY OF OUR WELL PRINT IS ATTACHED.

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name _____

18. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
PEERLESS-MIDWEST, INC. 91-1980
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **51255 Bittersweet Rd., Granger, IN 46530**
 Signed Michael J. Savage Date **8/29/97**
 AUTHORIZED REPRESENTATIVE



NOTE: THIS WELL WAS DRILLED TO 165' WITH FOLLOWING LITHOLOGY
 70' TO 95' VERY FINE SAND & SILT
 95' TO 102' FINE, MEDIUM & COARSE SAND & GRAVEL
 102' TO 106' CLAY
 106' TO 109' COARSE GRAVEL CLEAN
 109' TO 121' GRAVELLY CLAY
 121' TO 138' SILT TO FINE SAND
 138' TO 142' CLAY
 142' TO 160' FINE SAND, SILT & CLAY / 160' TO 165' SOFT SHALE

City Parchment State Michigan

Well Location 1 Mile N. of Highway 41 & 3/4 Mile W. of F Ave. East

County Kalamazoo Twp. Richland T 1S R 10W NE 1/4 NW 1/4 NW 1/4 29

Test Rate 662 GPM
 Static Water Level 5 Ft.
 Pumping Level 52 Ft.
 Specific Capacity 14.1 GPM/Ft. D.D.
 Driller John Blatz
 Date Drilled 8-1-97 Job No. 13381

Well No. 1
 American Village Builders
 Parchment, Michigan



PEERLESS-MIDWEST, INC.
 51255 Bittersweet Road, Granger, IN 46530
 Water Supply Contractors

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

| | | | | | | | |
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| | | | | | | | |
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PERMIT NUMBER

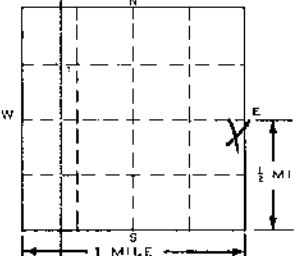
| | | | | | | | | | | | | | |
|---------------------------|--|-------------------------|--|-------------------------------|--|--------------------------------------|--|--------------------------|--|---------------------------|--|---------------------------|--|
| 1 LOCATION OF WELL | | County <u>KALAMAZOO</u> | | Township Name <u>RICHLAND</u> | | Fraction <u>NE 1/4 NE 1/4 SE 1/4</u> | | Section Number <u>29</u> | | Town Number <u>1 N 10</u> | | Range Number <u>10 EW</u> | |
|---------------------------|--|-------------------------|--|-------------------------------|--|--------------------------------------|--|--------------------------|--|---------------------------|--|---------------------------|--|

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below

Sketch Map:



3 OWNER OF WELL:
 Address BUD GAY
6369 N. 28th
RICHLAND MI
 Address Same As Well Location? Yes No

4 WELL DEPTH: 84 FT. Date Completed MO. 5 DAY 25 YEAR 94
 New Well
 Replacement Well

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jotted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

7 CASING: Diameter Steel Threaded Plastic Welded
 Height: Above/Below Surface T ft.
 Weight: _____ lbs/ft
 Grouded Drill Hole Diameter 8 in. to 78 ft. depth
 Drive Shoe Yes No

8 SCREEN: Not installed
 Type PVC Diameter 3"
 Slot/Grit 15 Length 6'
 Set between 78 ft. and 84 ft.
 FITTINGS: K-Packer Lead Packer Bremer Chuck
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL:
43 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
AIR ft. after 1 hrs. pumping at 30 G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adaptor 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From 0 to 78 ft.
 Neat cement Bentonite Other 4 lb Phy
 No. of bags of cement 6 Additives _____

13 Nearest source of possible contamination:
 Type Sewage Distance 50+ ft. Direction N
 Well disinfected upon completion? Yes No
 Was old well plugged? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name Myers
 Model number _____ HP 1/2 Volts 220
 Length of Drop Pipe 60 ft. capacity 10 G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK: _____
 Manufacturer's name _____
 Model number 203 Capacity _____ Gallons

| 2 FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---------------------------------|----------------------|----------------------------|
| <u>Brown clay</u> | <u>2</u> | <u>2</u> |
| <u>fine sand & gravel</u> | <u>38</u> | <u>40</u> |
| <u>water, sand & gravel</u> | <u>44</u> | <u>84</u> |

15. Remarks, elevation, source of data, etc.

17. Dig Operator's Name:
Mike Smith Jr

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Smith Well - Pump 08-1793
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 2800 Fern St BC
 Signed MJ Smith Date 5-31-94
 AUTHORIZED REPRESENTATIVE

RECEIVED
 MICH. DEPT. OF PUBLIC HEALTH
 JUN 24 94
 DIVISION OF ENVIRONMENTAL
 AND OCCUPATIONAL HEALTH

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

Geological Survey No.

Permit No. Page 1 of 1

| | | | | | |
|--|---------------------------|--|---|---|----------------------|
| County KALAMAZOO | Township Name RICHLAND | Fraction NW 1/4 NE 1/4 NW 1/4 | Section No 29 | Town No 1 S | Range Number 10 W |
| Distance And Direction From Road Intersection Well Address: 6374 E AVE, RICHLAND MI | | | Owner of Well: GARRY ST. JOHN Address: 6374 E AVE, MI Address Same as Well Location? <i>NO yes</i> | | |
| Locate with 'X' in Sec. Below | | Sketch Map | | Depth: 96 ft. Date Compl: 06/02/95 This is a: REPLACEMENT | |
| | | Equipment Used: CABLE TOOL Well Use: DOMESTIC | | Casing Type: STEEL Connection: THREADED | |
| | | | | Diam. 4 in. to 96 ft. Height ABOVE Surface 1 ft. Weight 1b./ft. | |
| Formation Description | | Thickness | Depth | Grouted Drill Hole 4 in. to 90 ft. Drive Shoe YES | |
| LIGHT BROWN SAND SOME GRAVEL | | 90 | 90 | Screen Type: PLASTIC Diam: 3 [] Not Installed | |
| LIGHT GREY WATER, SAND, GRAVEL | | 6 | 96 | SLOT 12 Length: 6'2" | |
| | | | | Set Between 91 ft. and 96 ft. | |
| | | | | Fittings: K-PACKER [X] Blank above screen: 1 ft. | |
| | | | | Static Level: 65 ft. Flow: NO | |
| | | | | Pumping Level below land surface: | |
| | | | | 67 ft. after 1 hrs. @ 30 GPM | |
| | | | | ft. after hrs. @ 0 GPM | |
| | | | | Well Head Completion: PITLESS ADAPTER | |
| | | | | Grouted from 25 to 0 ft. Material: BENTONITE | |
| | | | | Cement: bags Additive: | |
| | | | | Nearest source of possible contamination: | |
| | | | | Type: SEPTIC TANK Distance: 50 ft. | |
| | | | | Direction: E | |
| | | | | Well disinfected on completion? YES Old well plugged? YES | |
| | | | | Pump: [] Not Installed [] Installation Only | |
| | | | | Manufacturer's Name: MEYERS | |
| | | | | Model: 2N5212 HP: 0.5 Voltage: 230 | |
| | | | | Drop pipe: 80 ft. Capacity: 12 GPM | |
| | | | | Pump type: SUBMERSIBLE | |
| | | | | Pressure Tank Manufacturer's Name: CLAYTON MARK | |
| | | | | Model: 203 Capacity: 9 Gal. | |
| Remarks, elevation, source of data, etc. | | | WATER WELL CONTRACTOR'S CERTIFICATION: | | |
| RECEIVED MICH. DEPT. OF PUBLIC HEALTH JUL - 3 95 BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH | | | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. | | |
| | | | Registered Bus. Name: AMERICAN WELL DRILLING 1288 | | |
| Rig Operator's Name: BOB | | | Business Address: 8621 East C Avenue Richland, MI 49083 | | |

Authority: Act 369 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

Signed: *Robert J. Sawall Jr.* Date: 05/10/95
Authorized Representative

DEC 19 1978

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

| | | | | | | | | | | | | | |
|---|--|----------------------|--|----------------------------|--|---|--|---|--|--------------------|--|--------------------|--|
| 1 LOCATION OF WELL | | County <u>BAV.</u> | | Twp. <u>RICHLAND</u> | | Fraction <u>NE 1/4 NW 1/4 NE 1/4</u> | | Section No. <u>29</u> | | Town <u>1 N/S.</u> | | Range <u>10 W.</u> | |
| Distance And Direction from Road Intersections <u>5728 EST E AVE</u> | | | | | | OWNER No. _____ | | 3 OWNER OF WELL: <u>Ken Polder & YTC</u> Address _____ | | | | | |
| 2 FORMATION | | THICKNESS OF STRATUM | | DEPTH TO BOTTOM OF STRATUM | | 4 WELL DEPTH: (completed) <u>85</u> ft. Date of Completion <u>9-28-78</u> | | | | | | | |
| <u>Gravel</u> | | <u>18</u> | | <u>18</u> | | 5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> | | | | | | | |
| <u>Sand</u> | | <u>67</u> | | <u>85</u> | | 6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/> | | | | | | | |
| | | | | | | 7 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Diam. <u>4</u> in. to <u>81</u> ft. Depth Height: Above/Below surface <u>1</u> ft. Weight <u>11</u> lbs/ft. Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | | | | | | |
| | | | | | | 8 SCREEN: Type: <u>5/16" I</u> Dia.: <u>4"</u> Slot/Gauze <u>10</u> Length <u>4'</u> Set between <u>81</u> ft. and <u>85</u> ft. Fittings: <u>L.P.</u> | | | | | | | |
| | | | | | | 9 STATIC WATER LEVEL <u>65</u> ft. below land surface | | | | | | | |
| | | | | | | 10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping <u>50</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. | | | | | | | |
| | | | | | | 11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ | | | | | | | |
| | | | | | | 12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade | | | | | | | |
| | | | | | | 13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft. | | | | | | | |
| | | | | | | 14 SANITARY: Nearest Source of possible contamination _____ feet _____ Direction _____ Type _____ Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | |
| | | | | | | 15 PUMP: Manufacturer's Name <u>STA-RITE</u> Model Number <u>1450</u> HP _____ Length of Drop Pipe <u>20</u> ft. capacity _____ G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating | | | | | | | |
| 16 Remarks, elevation, source of data, etc. <u>FF</u> ADDED INFO BY DRILLER, ITEM NO. _____ *CORRECTED BY _____ ADDITION BY _____ ELEVATION _____ DEPTH TO ROCK _____ | | | | | | 17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Wm H Adams</u> <u>470</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>Walt Polder</u> Signed <u>Walt Polder</u> Date <u>9-28-78</u> AUTHORIZED REPRESENTATIVE | | | | | | | |

WATER WELL AND PUMP RECORD

PERMIT NUMBER

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

1 LOCATION OF WELL

| | | | | | |
|----------------------------|----------------------------------|---|-----------------------------|----------------------------|------------------------------|
| County <i>Kalamazoo</i> | Township Name <i>Richland</i> | Fraction <i>SE 1/4 SW 1/4 SE 1/4</i> | Section Number <i>29</i> | Town Number <i>1 MS</i> | Range Number <i>10 EW</i> |
|----------------------------|----------------------------------|---|-----------------------------|----------------------------|------------------------------|

Distance And Direction From Road Intersection
6763 East F. Ave.

Street Address & City of Well Location
Richland

Locate with "X" in Section Below

3 OWNER OF WELL:
Paul Jennings
Address
1747 East F. Ave. Richland
Address Same As Well Location? Yes No

4 WELL DEPTH: Date Completed *10/12/90*
127 FT. New Well Replacement Well

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

2 FORMATION DESCRIPTION

| FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|------------------------------------|----------------------|----------------------------|
| <i>Sand & gravel</i> | <i>60</i> | <i>60</i> |
| <i>Sand</i> | <i>15</i> | <i>75</i> |
| <i>soft gray clay</i> | <i>25</i> | <i>100</i> |
| <i>soft gray clay & gravel</i> | <i>15</i> | <i>115</i> |
| <i>muddy gravel</i> | <i>5</i> | <i>120</i> |
| <i>gravel</i> | <i>7</i> | <i>127</i> |

7 CASING: Diameter Steel Threaded Plastic Welded
Height: Above/Below Surface *1* ft. Weight *11* lbs./ft.
4 in. to *121* ft. depth
Grouded Drill Hole Diameter
Drive Shoe Yes No

8 SCREEN: Not Installed
Type *5 steel* Diameter *4"*
Slot/Gauge *15* Length *6'*
Set between *121* ft and *127* ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen *1* ft. Other _____

9 STATIC WATER LEVEL: *43* ft. below land surface Flow

10 PUMPING LEVEL: below land surface *43* ft. after *1* hrs. pumping at *50* G.P.M.
_____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From *0* to *25* ft.
 Neat cement Bentonite Other _____
No. of bags of cement *6* Additives _____

13 Nearest source of possible contamination
Type *Septic* Distance _____ ft. Direction _____
Well disinfected upon completion? Yes No
Was old well plugged? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name *Sta Kite*
Model number *20-F* HP *1* Volts *230*
Length of Drop Pipe *13* ft. capacity *20* G.P.M.
TYPE: Submersible Jet _____
PRESSURE TANK. Manufacturer's name *Con Air*
Model number *CT82* Capacity _____ Gallons

USE A 2ND SHEET IF NEEDED

15 Remarks, elevation, source of data, etc.
Permit # 8946

17. Rig Operator's Name:
Charlie J. (376)

16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Paul Sanders & Son 0112
REGISTERED BUSINESS NAME REGISTRATION NO.
Address *72819 211-40 Freestone*
Signed *R. Shovet* Date *10/16/90*
AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD
OCT 20 1990

Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

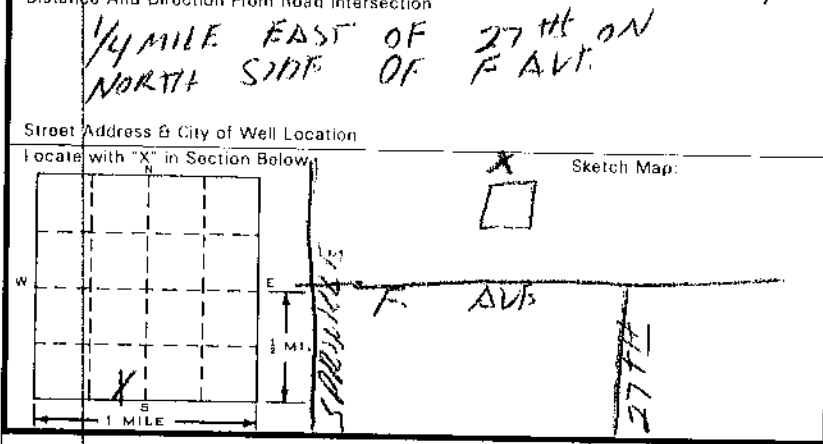
1 LOCATION OF WELL

County: Kalamazoo Township Name: RICHLAND Fraction: SE 1/4 SE 1/4 SW 1/4 Section Number: 29 Town Number: 1 Range Number: 10

Distance And Direction From Road Intersection: 1/4 MILE EAST OF 27th ON NORTH SIDE OF F. AVE.

Street Address & City of Well Location: _____

Locate with "X" in Section Below:



3 OWNER OF WELL: LINWOOD HAMES
 Address: 10263 LUCAS RD THREE RIVERS
 Address Same As Well Location? Yes No

4 WELL DEPTH: 63 FT. Date Completed: 5/22/89 New Well Replacement Well

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

7 CASING: Diameter: 5 in. to 3 ft. depth Steel Plastic Threaded Welded
3 in. to 2 ft. depth Grouted Drill Hole Diameter Height: Above/Below
0 in. to 2 ft. depth Drive Shoe Yes No

| 2 FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|------------------------------|----------------------|----------------------------|
| <u>LT BR SAND</u> | <u>10</u> | <u>10</u> |
| <u>TAN GRAVEL W/ CLAY</u> | <u>15</u> | <u>25</u> |
| <u>FINE TAN GRAVEL</u> | <u>30</u> | <u>55</u> |
| <u>MED TAN SAND W/ STONE</u> | <u>8</u> | <u>63</u> |

8 SCREEN: Not installed
 Type: SS Diameter: 3
 Slot/Gauge: 20 Length: 5
 Set between: 58 ft. and 63 ft.
 FITTINGS: K Packer Lead Packer Bromor Check
 Blank above screen 1 ft. Other: _____

9 STATIC WATER LEVEL: 28 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
31 ft. after 1/2 hrs. pumping at 30 G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From 0 to 25 ft.
 Neat cement Bentonite Other _____
 No. of bags of cement: 2 Additives: _____

13 Nearest source of possible contamination:
 Type: SEPTIC Distance: 60 ft. Direction: S.E.
 Well disinfected upon completion? Yes No
 Was old well plugged? Yes No

14 PUMP: Not installed Pump Installation Only
 Manufacturer's name: PJW
 Model number: HF10905 HP: 1/2 Volts: 220
 Length of Drop Pipe: 40 ft. capacity: 10 G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK: Manufacturer's name: WELL X TROL
 Model number: 203 Capacity: 50 Gallons

RECEIVED
 Mich. Dept. of Public Health
 SEP 14 1990
 BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWOS

15. Remarks, elevation, source of data, etc.
PROPERTY LOCATED ON F. AVE AS SHOWN

16. Dig Operator's Name:
Rich Clark

16. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
CLARK WELL DRILLING 1794
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address: 51533 N. NOTTAW RD, MENDON
 Signed: Julian Clark Date: 6/1/89
 AUTHORIZED REPRESENTATIVE

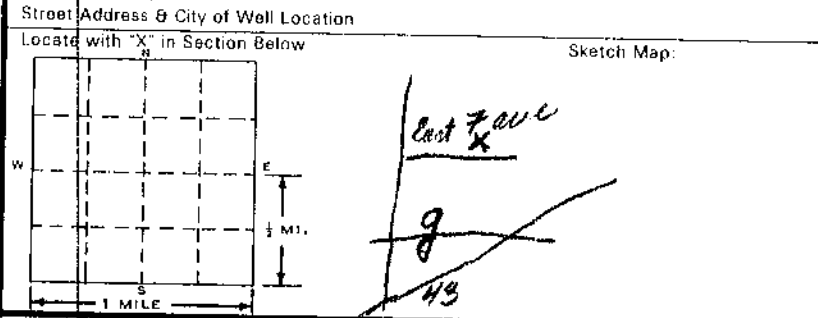
Authority: Act 368 PA 1978
 Completion: Required
 Penalty: Conviction of a violation of any provision is a misdemeanor.

WATER WELL AND PUMP RECORD

1 LOCATION OF WELL

County Kalamazoo Township Richland Fraction 1/4 Section Number 29 Town Number 1 N S Range Number 10 EW

Distance And Direction From Road Intersection
on north side of East Ave about 1/2 to 3/4 mile east of Sprinkle Rd



3 OWNER OF WELL: Jack Arnold
Address 5967 E. 7 Ave Kalamazoo Mi 49004
Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) 98 ft. Date of Completion July 90

5 Cable tool Rotary Driven Dug
 Hollow rod Auger Jetted

6 USE: Domestic Type I Public Type III Public
 Irrigation Type IIa Public Heat pump
 Test Well Type IIb Public

7 CASING: Diameter Steel Plastic Throated Welded
4 in. to 77 1/2 ft. depth
54 in. to 77 1/2 ft. depth
Grouted Drill Hole Diameter
54 in. to 77 1/2 ft. depth
Height: Above/Below Surface 78 ft.
Weight 11 lbs./ft.
Drive Shoe Yes No

| 2 | FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---|-------------------------------|----------------------|----------------------------|
| | <u>0- Sand</u> | <u>85</u> | <u>85</u> |
| | <u>only sample taken 74ft</u> | | |
| | <u>Clay</u> | <u>3</u> | <u>88</u> |

8 SCREEN: Not installed
Type Stainless Diameter 4
Slot Gauge 15 Length 5
Set between 78 ft. and 83 ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen 1 ft. Other 5ft Below

9 STATIC WATER LEVEL: 56 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
60gpm surge plunger rig pump
 ft. after hrs. pumping at G.P.M.
 ft. after hrs. pumping at G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From 0 to 77 1/2 ft.
 Neat cement Bentonite Other 6 Bags
No. of bags of cement Additives

13 Nearest source of possible contamination
Type Septic not yet in Distance ft. Direction
Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name Meyers
Model number HP 1 Volts 230
Length of Drop Pipe 71 ft. capacity 10 G.P.M.
TYPE: Submersible Jet
PRESSURE TANK:
Manufacturer's name Well-X-trol
Model number WX 302 Capacity 22-24 Gallons

15. Remarks. elevation. source of data, etc.
Top of Screen 76 1/2
L F MCO. Galv Casing

16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Ray Leonard 13-0769
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 12248 E. Mich Battle Creek Mi 49017
Signed Ray Leonard Date 7 July 90
AUTHORIZED REPRESENTATIVE

RECEIVED
Mich. Dept. of Public Health
AUG 29 1990
BUREAU OF ENVIRONMENTAL AND
OCCUPATIONAL HEALTH-GWDS

N1018

JUL 13 1979

WATER WELL RECORD
ACT 294 PA 1965

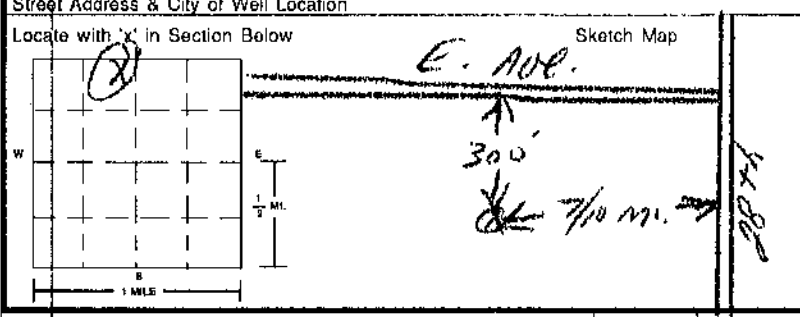
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

| 1 LOCATION OF WELL | | 3 OWNER OF WELL: | | | | | | | | | |
|---|----------------------------------|--|-----------------------------|-------------|-----------|-------------------|-----------|--|-----------|--|--|
| County <i>Kalamazoo</i> | Township Name <i>RICHLAND</i> | Fraction <i>5E 1/4 SW 1/4 SE 1/4</i> | Section Number <i>29</i> | | | | | | | | |
| Distance And Direction from Road Intersections <i>1/2 mi. west of 28 ave. on north side of Rd.</i> | | Town Number <i>1 N.S.</i> | | | | | | | | | |
| Street address & City of Well Location <i>6769 F-Ave Kalamazoo, MICH.</i> | | Range Number <i>10 SW.</i> | | | | | | | | | |
| Locate with "X" in section below | | Sketch Map: | | | | | | | | | |
| 2 FORMATION | | 4 WELL DEPTH: (completed) Date of Completion <i>50 ft. 9/28/78</i> | | | | | | | | | |
| | | 5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dip <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jotted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">THICKNESS OF STRATUM</th> <th style="width: 30%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><i>sand</i></td> <td><i>40</i></td> </tr> <tr> <td><i>water sand</i></td> <td><i>10</i></td> </tr> <tr> <td> </td> <td><i>50</i></td> </tr> </tbody> </table> | | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM | <i>sand</i> | <i>40</i> | <i>water sand</i> | <i>10</i> | | <i>50</i> | 6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/> | |
| | | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM | | | | | | | | |
| <i>sand</i> | <i>40</i> | | | | | | | | | | |
| <i>water sand</i> | <i>10</i> | | | | | | | | | | |
| | <i>50</i> | | | | | | | | | | |
| 7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface _____ ft. <i>2 in. to 47 ft. Depth</i> Weight _____ lbs./ft. <i>_____ in. to _____ ft. Depth</i> Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | 8 SCREEN: Type: <i>Johnson</i> Dia.: <i>1 1/2</i> Slot/Gauge: <i>10</i> Length: <i>3</i> Set between <i>47</i> ft. and <i>50</i> ft. Fittings: <i>closed shoe 1/4 coupling</i> | | | | | | | | | |
| 11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____ | | 9 STATIC WATER LEVEL <i>30</i> ft. below land surface | | | | | | | | | |
| 12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade | | 10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. | | | | | | | | | |
| 13 Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> <i>clay</i> Depth: From _____ ft. to _____ ft. | | 14 Nearest Source of possible contamination <i>50</i> feet <i>N</i> Direction <i>SEPTIC</i> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | |
| 15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name <i>STA-RITE</i> Model Number <i>SJJD</i> HP <i>3</i> Volts <i>230</i> Length of Drop Pipe <i>42</i> ft. capacity <i>10</i> G.P.M. Type: <input type="checkbox"/> *Submersible <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating | | 16 Remarks, elevation, source of data, etc. ADDED INFO BY DRILLER, ITEM NO. *CORRECTED BY **ADDITION BY ELEVATION DEPTH TO ROCK | | | | | | | | | |
| 17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Robert Jewell</i> W/O. REGISTERED BUSINESS NAME _____ REGISTRATION NO. <i>1288</i> Address <i>R#3 Dalton</i> Signed <i>Robert Jewell</i> Date <i>10/2/78</i> AUTHORIZED REPRESENTATIVE | | 16 USE A 2ND SHEET IF NEEDED | | | | | | | | | |

1. LOCATION OF WELL
 County KALAMAZOO Township Name Richland Fraction N1/4 N1/4 Section No. 29 Town No. 13 Range No. 10W

Distance and Direction from Road Intersection
7/10 mi. W. of 22th
300' So of E Ave.
 Street Address & City of Well Location

3. OWNER OF WELL Clayton St John
 Address 6340 E. Ave.
Richland, MI.
 Address Same as Well Location Yes No



4. WELL DEPTH: 149 ft. Date Completed 1/6/97
 New Well Replacement Well

5. Cable Tool Rotary Driven Dug
 Hollow Rod Auger/Bored Jetted

6. USE: Household Type I Public Type III Public
 Irrigation Type IIa Public Heat Pump
 Test Well Type IIb Public

7. CASING: Steel Threaded Plastic Welded
 Other _____
 Diameter: 4 in. to 145 ft. depth Weight: 11 lbs./ft.
 BORE HOLE: Drive Shoe Shale Packer
 Diameter: _____ in. to _____ ft. depth

| 2. FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---------------------------|----------------------|----------------------------|
| SAND + STONES | 65 | 65" |
| WATER SAND Fine | 20 | 85 |
| GRAY CLAY | 58 | 143 |
| WATER SAND | 6 | 149 |
| USE A 2ND SHEET IF NEEDED | | |

8. SCREEN: Not Installed Gravel-Packed
 Type Steel Diameter 4"
 Slot/Gauze 12 Length: 4'
 Set Between 145 ft. and 149 ft.
 FITTINGS: K-Packer Bremer Check
 Blank Above Screen 1 ft. Other _____

9. STATIC WATER LEVEL: 65 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
65 ft. After 1 hrs. Pumping at 50 G.P.M.
 Plunger Bailor Air Test Pump

11. WELL HEAD COMPLETION:
 Pitless Adapter 12" Above Grade
 Basement Offset Well House

12. WELL GROUTED? No Yes From 0 to 145 ft.
 Neat Cement Bentonite Other _____
 No. of Bags 5 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type Septic Distance 75 ft. Direction So.
 Type _____ Distance _____ ft. Direction _____

15. ABANDONED WELL PLUGGED? Yes No
 Casing Diameter 4 in. Depth 90 ft.
 PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
 No. of Bags 10 Casing Removed? Yes No

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe 84 ft. Capacity 12 G.P.M.
 TYPE: Submersible Jet Other _____
 PRESSURE TANK:
 Manufacturer's Name Champion
 Model Number CM 203 Capacity _____ Gallons 50

16. REMARKS: (Elevation, Source of Data, etc.)

18. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Dopp Pump Co. Inc. REGISTERED BUSINESS NAME REGISTRATION NO. 1771
 Address 6014 King Hwy Comstock
 Signed [Signature] Date _____
 AUTHORIZED REPRESENTATIVE

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name Jim Deernhaag

DEWATERING WELL RECORD
Act 218, P.A. 1972

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

NOV 28 1983

| | | | | | | | | | | | | | |
|---|--|--------------------------|--|--------------------------------|--|--|--|---------------------------|--|-------------------|--|--------------------|--|
| 1 LOCATION OF WELL | | County: Kalamazoo | | Township Name: Richland | | Fraction: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ | | Section Number: 29 | | Town Number: N/S. | | Range Number: E/W. | |
| STARTING POINT: Distance and Direction from Nearest Road Intersection IDLEWILD | | | | | | LOCATION: From Eng. Plan Sheet No. 29 Contract 2 Other: _____ Engineering Firm: Wilkins & Wheaton | | | | | | | |
| Locate with "X" in section below N W E S 1 MILE | | | | | | Sketch Map: | | | | | | | |
| PROJECT OWNER: Kalamazoo County | | | | | | Address: _____ | | | | | | | |
| Project Name: Gull Lake | | | | | | Type of <input checked="" type="checkbox"/> Sewer <input type="checkbox"/> Pumping Station | | | | | | | |
| Project <input type="checkbox"/> Foundations Other: _____ | | | | | | | | | | | | | |

| | | | | | |
|--|--|---|--|---|--|
| 2 <input type="checkbox"/> Single Well | | Well Depth — Range | | Date of Drilling | |
| <input checked="" type="checkbox"/> Several Wells: Total Number of Wells _____ | | _____ 19 ft. 21 ft. | | _____ 7 Month _____ 82 Year | |
| Total Distance Covered 280 ft, N/S/E/W | | | | | |
| Includes Wells From Station 2-57.24 to Station 5-38.22 | | 4 <input type="checkbox"/> Cable Tool <input type="checkbox"/> Rotary <input type="checkbox"/> Bored (Auger) | | | |
| | | <input type="checkbox"/> Jetted <input type="checkbox"/> Driven <input checked="" type="checkbox"/> clam | | | |

| 3 FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---------------------------------|----------------------|----------------------------|
| clay | 1 | 10 |
| sand-gravel | 10 | 21 |
| (USE REMARKS SECTION IF NEEDED) | | |

| | |
|--|--|
| 5 CONSTRUCTION DETAILS: <input type="checkbox"/> Drive Points <input type="checkbox"/> Rock Well | |
| <input type="checkbox"/> Natural Pack <input type="checkbox"/> Gravel Pack | |
| Drill Hole Size: Diam 40 in Depth _____ ft | |
| Casing: Diam 24 in Depth _____ ft | |
| Gravel Pack: From 0 ft to 21 ft | |
| Pack Material: _____ | |
| Screened From bottom ft to 6 ft | |

8 ABANDONMENT PROCEDURES:

Wells under 40 feet

Parent Material: from **1** ft to **21** ft

Finer Textured Soils: from _____ ft to _____ ft

Other: _____

Wells over 40 feet:

Bentonite-Fine Textured Soil Mixture from _____ ft to _____ ft

Other: _____

Special Cases: Gas Flowing Well

Bedrock _____

Grout

Bentonite Grout Neat Cement Grout

from _____ ft to _____ ft

6 STATIC WATER LEVEL **12** ft above/below land surface

7 DEWATERED LEVEL **21** ft

Pump Operated _____ hr/day,

Pump Capacity _____ gpm

Discharge Point _____

(river, pond, lake, storm sewer, etc.)

REMARKS: Water Quality, Gas, etc.

RECEIVED
 NOV 27 1983
 Michigan Department of
 Administration

ADDED INFO BY DRILLER, IT&M
 *CORRECTED BY
 **ADDITION BY
 ELEVATION
 DEPTH TO ROCK

9 ABANDONMENT CERTIFICATION

This well has been abandoned under my jurisdiction and this report is true to the best of my knowledge and belief.

DUNIGAN BROS., INC. **D1468**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER: _____

Address **911 E. South St., Jackson, MI**

Signed *David Dunigan* **8-10-82**

AUTHORIZED REPRESENTATIVE DATE

11 DRILLING CONTRACTOR'S CERTIFICATION

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

DUNIGAN BROS., INC. **D1468**

REGISTERED CONTRACTOR NAME: _____ REGISTRATION NUMBER: _____

Address **911 E. South St., Jackson, MI**

Signed *David Dunigan* **7-22-82**

AUTHORIZED REPRESENTATIVE DATE

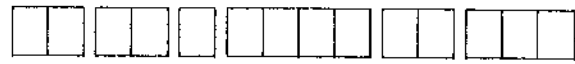
WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

| | | | |
|---|--------------------------|---|--|
| 1 LOCATION OF WELL | | | |
| County <i>Kalamazoo</i> | Twp <i>Rockland</i> | Fraction <i>N 1/4 NW 1/4 NW 1/4</i> | Section No. Town Range <i>29 15 10W</i> |
| Distance And Direction from Road Intersections <i>6132 East</i> | | OWNER No. _____ | 3 OWNER OF WELL: <i>Sparrow Inc</i> Address _____ |
| Street address & City of Well Location | | | |
| 2 | FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
| | <i>sand & gravel</i> | <i>60</i> | <i>60</i> |
| 4 WELL DEPTH: (completed) Date of Completion <i>60</i> ft. <i>Sept 16, 1965</i> | | | |
| 5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> _____ | | | |
| 6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/> _____ | | | |
| 7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below surface _____ ft. Diam. <i>2</i> in. to <i>5 7/8</i> ft. Depth _____ ft. Weight _____ lbs/ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | | |
| 8 SCREEN: Type: <i>Johnson</i> Dia.: <i>1 1/4</i> Slot/Gauze: <i>10</i> Length: <i>3 ft.</i> Set between <i>5 7/8</i> ft. and <i>60</i> ft. Fittings: _____ | | | |
| 9 STATIC WATER LEVEL: <i>46</i> ft. below land surface | | | |
| 10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. | | | |
| 11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ | | | |
| 12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adaptor <input checked="" type="checkbox"/> 12" Above Grade | | | |
| 13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft. | | | |
| 14 SANITARY: Nearest Source of possible contamination _____ feet _____ Direction _____ Type _____ Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 15 PUMP: Manufacturer's Name <i>Burk</i> Model Number <i>5H2D</i> HP <i>1/2</i> Length of Drop Pipe <i>52</i> ft. capacity <i>7</i> G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> _____ <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating | | | |
| 16 Remarks, elevation, source of data, etc. <i>APPROVED info. of Drilling Firm</i> <i>CONDUCTED BY:</i> _____ <i>ASSIGNMENT NO:</i> _____ | | 17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. CARROLL WAITE DRILLING COMPANY <i>0372</i> <i>4400 E. GLASS DRIVE</i> R. 1 REGISTRATION NO. PLAINWELL, MICHIGAN Address _____ Signed <i>Carroll Waite</i> Date <i>Oct 30 68</i> AUTHORIZED REPRESENTATIVE | |

2 JUN 2 1977



WATER WELL RECORD
ACT 294 PA 1965

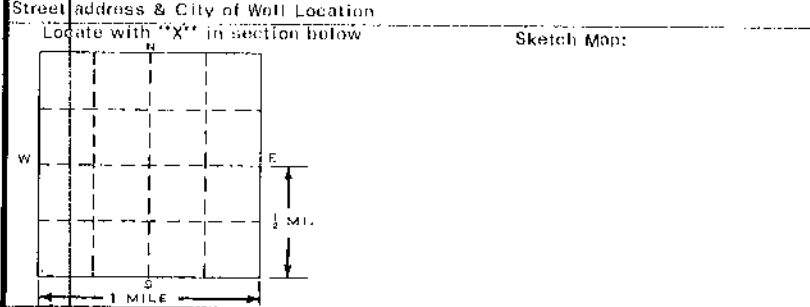
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

| | | | | | |
|-----------------------|----------------------------------|----------------------------------|-----------------------------|-----------------------------|-------------------------------|
| County Mal. | Township Name Richland | Fraction SW 1/4 Sec 29 | Section Number 29 | Town Number 1 #S. | Range Number 10 #W. |
|-----------------------|----------------------------------|----------------------------------|-----------------------------|-----------------------------|-------------------------------|

Distance And Direction from Road Intersections
3/4 Mi. E. of N. 25th St.
on F. Ave. E.

Street address & City of Well Location
6099 F. Ave. E.
Mal.



3 OWNER OF WELL:
Dale Hydar
Address
6099 F. Ave. E.
Mal.

4 WELL DEPTH: (completed) Date of Completion
98 ft. **1-6-77**

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded Height: Above/Below Surface _____ ft.
4 in. to 94 ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

| 2 FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|-------------|----------------------|----------------------------|
| TOP Soil | | 2 |
| Clay Sand | | 6 |
| Clay | | 12 |
| Gravel | | 21 |
| Clay | | 35 |
| Gravel | | 77 |
| Fine Sand | | 80 |
| Clay | | 92 |
| Sand | | 98 |

8 SCREEN:
Type: **Johnson S.S.** Dia.: **4"**
Slot/Gauze **.018** Length **4**
Set between **94** ft. and **98** ft.
Fittings: **K Ricker**

9 STATIC WATER LEVEL
54 ft. below land surface

10 PUMPING LEVEL below land surface
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adaptor 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
50 feet **50'** Direction **Septic** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **Acromotor**
Model Number **SD19-75** HP **3/4** Volts **230**
Length of Drop Pipe **84** ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

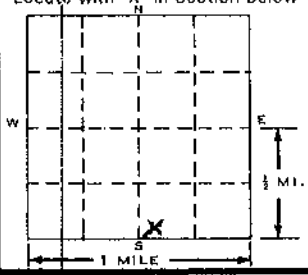
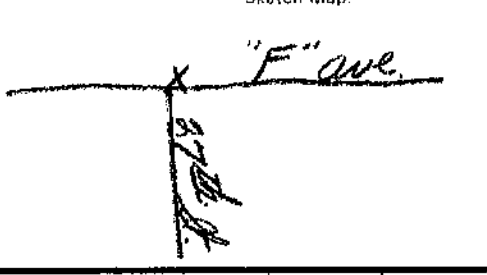
16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY **B**
**ADDITION BY
ELEVATION
DEPTH TO ROCK

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Richard Rump 0208
REGISTERED BUSINESS NAME REGISTRATION NO.
Address: **R. J. Rump** **5514** **6165burg**
Signed _____ Date **4-4-77**
AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

| | | |
|---|----------------------------------|--|
| 1 LOCATION OF WELL | | |
| County <i>Kalamazoo</i> | Township Name <i>Richland</i> | Fraction <i>SE 1/4 SW 1/4 SW 1/4</i> Section Number <i>29</i> Town Number <i>1 N/S</i> Range Number <i>10 E/W</i> |
| Distance And Direction From Road Intersection <i>corner of 27th St. & "F" ave. on "F" ave. 6501 "F" ave. Kalamazoo, Mich.</i> | | 3 OWNER OF WELL: <i>Arie Gritter</i> Address <i>6501 "F" ave. Kalamazoo, Mich.</i> Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Street Address & City of Well Location <i>6501 "F" ave. Kalamazoo, Mich.</i> | | 4 WELL DEPTH: (completed) <i>76</i> ft. Date of Completion <i>8-20-86</i> |
| Locate with "X" in Section Below  | | 5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jettied <input type="checkbox"/> |
| Sketch Map:  | | 6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input type="checkbox"/> |
| 2 FORMATION DESCRIPTION | | 7 CASING: Diameter <input checked="" type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above/Below Surface <i>1</i> ft. Weight <i>11.0</i> lbs./ft. Grouted Drill Hole Diameter <i>COUPLING</i> Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | | 8 SCREEN: <input type="checkbox"/> Not Installed Type <i>Johnson Stainless</i> Diameter <i>4"</i> Slot/Gauge <i>10</i> Length <i>4'</i> Set between <i>72</i> ft. and <i>76</i> ft. FITTINGS: <input type="checkbox"/> K-Packer <input checked="" type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer check <input checked="" type="checkbox"/> Blank above screen <i>1</i> ft. Other <i>Plug</i> |
| THICKNESS OF STRATUM | | 9 STATIC WATER LEVEL: <i>49</i> ft. below land surface <input type="checkbox"/> Flow |
| DEPTH TO BOTTOM OF STRATUM | | 10 PUMPING LEVEL: below land surface <i>49</i> ft. after <i>1/2</i> hrs. pumping at <i>60</i> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M. |
| <i>Brown clay & Gravel mixed</i> | <i>15</i> | 11 WELL HEAD COMPLETION: <input checked="" type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit |
| <i>Coarse Sand</i> | <i>4</i> | 12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From _____ to _____ ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other <i>Sand</i> No. of bags of cement _____ Additives _____ |
| <i>Sand</i> | <i>16</i> | 13 Nearest source of possible contamination Type _____ Distance _____ ft. Direction _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>Gravel</i> | <i>7</i> | 14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name <i>Stai-Rite</i> Model number <i>20-SP-4E02P 1</i> Volts <i>230</i> Length of Drop Pipe <i>59</i> ft. capacity <i>20</i> G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet |
| <i>Gravel & Brown clay mixed</i> | <i>7</i> | PRESSURE TANK: Manufacturer's name <i>Well-x-Trol</i> Model number <i>WX-203</i> Capacity <i>32</i> Gallons |
| <i>Water Sand</i> | <i>27</i> | 15. Remarks, elevation, source of data, etc. <i>3</i> |
| 16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Glenn Hennessee Well Drilling 1711</i> REGISTERED BUSINESS NAME _____ REGISTRATION NO. _____ Address <i>1834 N. 37th St. Kalamazoo, Mich.</i> Signed <i>Glenn Hennessee</i> Date <i>8-20-86</i> AUTHORIZED REPRESENTATIVE | | |

RECEIVED
 MICH. Dept. of Public Health
 SEP 29 1986
 Bureau of Environmental and Occupational Health - GWQS

2 MAY 18 1978

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

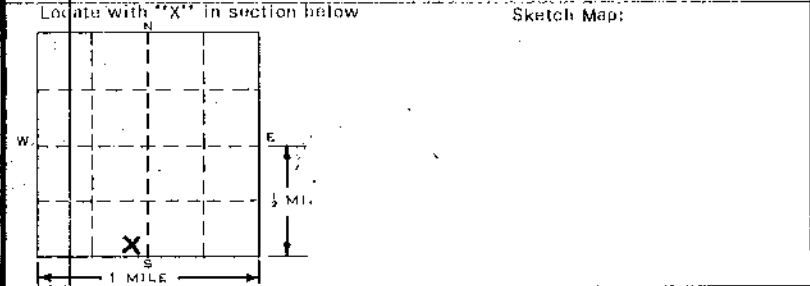
1 LOCATION OF WELL

| | | | | | |
|----------------------|-----------------------------------|-----------------------------------|-----------------------------|------------------------------|--------------------------------|
| County MAL | Township Name RICH LAND | Fraction 5/16 5/16 5/16 | Section Number 29 | Town Number 1 N.S. | Range Number 10 E.W. |
|----------------------|-----------------------------------|-----------------------------------|-----------------------------|------------------------------|--------------------------------|

Distance And Direction from Road Intersections
6603 EST F. AVE

Street address & City of Well Location

3 OWNER OF WELL:
Address **LARRY Tiller**
6603 EST F AVE
MAL.



4 WELL DEPTH: (completed) Date of Completion
62 ft. 4-78

2 FORMATION

| FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|-------------|----------------------|----------------------------|
| SAND | 62 | 62 |

5 Cable tool Rotary Driven Dug
 Hollow rod Jotted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded
Diam. **4 in.** to **5 8 ft.** Depth
Height: Above/Below Surface **1** ft.
Weight **11** lbs./ft.
Drive Shoe? Yes No

8 SCREEN:
Type: **3/4 STEEL** Dia.: **4"**
Slot/Gauze **10** Length **4'**
Set between **58** ft. and **62** ft.
Fittings: **L.P.**

9 STATIC WATER LEVEL
46 ft. below land surface

10 PUMPING LEVEL below land surface
50 ft. after **1** hrs. pumping **50** p.m.
_____ ft. after _____ hrs. pumping _____ p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
_____ foot _____ Direction _____ Type
Well disinfected upon completion Yes No

15 PUMP: Not installed.
Manufacturer's Name **STA-RITE**
Model Number **145P** HP **1/2** Volts **220**
Length of Drop Pipe **48** ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY **B**
**ADDITION BY
ELEVATION
DEPTH TO ROCK
USE A 2ND SHEET IF NEEDED

16 Remarks, elevation, source of data, etc.
#1222

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Walt Adams **436**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **MAL.**
Signed **Walt Adams** Date **4-78**
AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

Completion is required under authority of Part 127 Act 368 PA 1978
Failure to comply is a misdemeanor

PERMIT NO:

99-0231

TAX NO:

1. LOCATION OF WELL
County Kalamazoo

Township Name Richland

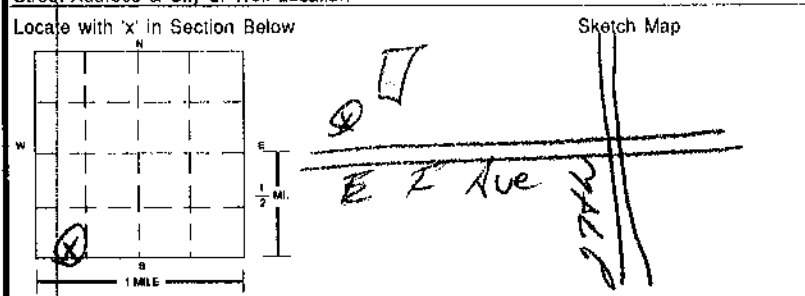
Fraction SE 1/4 SW 1/4

Section No. 29

Town No. 15

Range No. 10W

Distance and Direction from Road Intersection
1/8 mi. W of 27th
90' No of E F Ave



3. OWNER OF WELL
Address William Kuitema
6093 E F Ave
Address Same as Well Location Yes No

4. WELL DEPTH: 116 ft. Date Completed 5-28-99
 New Well Replacement Well

5. Cable Tool Rotary Driven Dug
 Hollow Rod Auger/Bored Jetted

6. USE: Household Type I Public Type III Public
 Irrigation Type IIa Public Heat Pump
 Test Well Type IIb Public

7. CASING: Steel Threaded Plastic Welded
 Other _____ Height: Above/Below Surface: 1 ft.

Diameter: 5 in. to 111 ft. depth Weight: 3 lbs./ft.
BORE HOLE: Diameter: 9 in. to 111 ft. depth Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type Wainless Steel Diameter 4"
Slot/Gauze 20 Length: 5'
Set Between 111 ft. and 116 ft.
FITTINGS: PK-Packer Bremer Check
 Blank Above Screen 1 ft. Other _____

9. STATIC WATER LEVEL: 55 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface 90 ft. After 1 hrs. Pumping at 20 G.P.M.
 Plunger Bailor Air Test Pump

11. WELL HEAD COMPLETION: Pitless Adapter 12" Above Grade
 Basement Offset Well House

12. WELL GROUTED? No Yes From 0 to 111 ft.
 Neat Cement Bentonite Other _____
No. of Bags 9 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type Septic Distance 504 ft. Direction N6
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name McDonald
Model Number 21075K2 HP 3/4 Volts 230
Length of Drop Pipe 90 ft. Capacity 10 G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK: Manufacturer's Name ELBI
Model Number DV 1000 Capacity 9.0 Gallons

| 2. FORMATION DESCRIPTION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|--------------------------|----------------------|----------------------------|
| Brown Clay + Sand | 12' | 12' |
| medium Gravel + Sand | 7' | 19' |
| Fine Gravel + Sand | 26' | 45' |
| Sand | 33' | 78' |
| Grey Clay + Sand | 32' | 110' |
| Sand | 1' | 111' |
| with in Bearing Sand | 5' | 116' |

JUN 15 1999

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter _____ in. Depth _____ ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags _____ Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)
old well still in use at time of installation.

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name Rob Lucy

18. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Katz Well Drilling Inc 13-1593
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 1479 E Michigan Ave B.C.
Signed Rob Lucy Date 5-28-99
AUTHORIZED REPRESENTATIVE

APR 28 1976

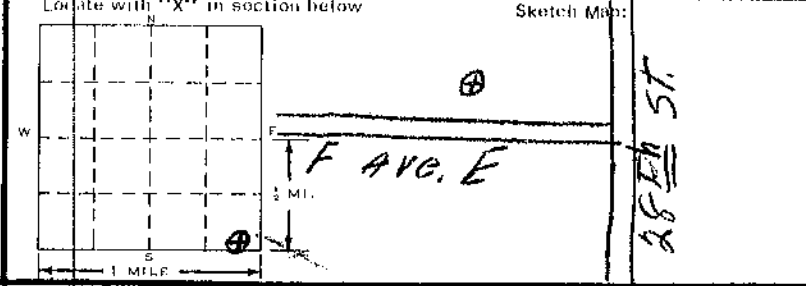
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH PAT

1 LOCATION OF WELL

| | | | | | |
|----------------------------|----------------------------------|----------------------------------|-----------------------------|------------------------------|------------------------------|
| County Kalamazou | Township Name Richland | Fraction SE 1/4 SE 1/4 | Section Number 29 | Town Number 1 N.S. | Range Number 10 W. |
|----------------------------|----------------------------------|----------------------------------|-----------------------------|------------------------------|------------------------------|

Distance and Direction from Road Intersections
500' West of ~~ROAD~~ 28th ST
AND 60' North of F Ave. E



3 OWNER OF WELL:
Address
DAVID VANDEL LINDEN
6915 E. F AVE
RICHLAND, MICH

4 WELL DEPTH: (completed) **100** ft. Date of Completion **4-25-76**

5 Cable tool Rotary Driven Aug
 Hollow rod Jotted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded Diam. _____ Height: Above/Below Surface _____ ft.
Weight _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION

| FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---------------|----------------------|----------------------------|
| SANDY CLAY | 10 | 10 |
| CLAY | 15 | 25 |
| SAND & GRAVEL | 75 | 100 |

8 SCREEN:
Type: **STAINLESS** Dia.: **3"**
Slot/Gauge **15** Length **5'**
Set between **95** ft. and **100** ft.

Fittings: **3" PLUG / 1" PACKER / 3" X 18" NIPPLE**

9 STATIC WATER LEVEL
42 ft. below land surface

10 PUMPING LEVEL below land surface
70 ft. after **3** hrs. pumping **50** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
60 feet **N.** Direction **Septic** Type
Well disinfected upon completion Yes No

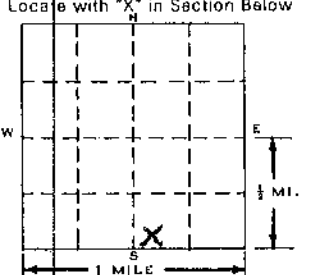
15 PUMP: Not installed
Manufacturer's Name **FLINT & WALLING**
Model Number **7BA12** HP **3/4** Volts **230**
Length of Drop Pipe **63** ft. capacity **20** G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY **JD**
**ADDITION BY
ELEVATION
DEPTH TO ROCK

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Bob Water Well Drilling - 0118
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **10842 Cobb Rd Delton**
Signed **Robert Hennessy** Date **4-25-76**
AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

| | | |
|---|----------------------------------|---|
| 1 LOCATION OF WELL | | |
| County <i>Kalamazoo</i> | Township Name <i>Richland</i> | Fraction <i>SE 1/4 SW 1/4</i> |
| Distance and Direction from Road Intersection <i>200 ft. East of 27th St. on East "F" ave.</i> | | Section Number <i>29</i> |
| Street Address & City of Well Location <i>6559 " " " Kalamazoo, Mich.</i> | | Town Number <i>1 N(S)</i> |
| Locate with "X" in Section Below | | Range Number <i>10 E(W)</i> |
| <div style="display: flex; align-items: center;">  <div style="margin-left: 20px;"> <p>Sketch Map:</p> <p><i>East "F" ave. x</i></p> <p><i>27th St.</i></p> </div> </div> | | |
| 2 FORMATION DESCRIPTION | | |
| | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
| <i>Brown clay & Gravel mixed</i> | <i>15</i> | <i>15</i> |
| <i>coarse sand</i> | <i>4</i> | <i>19</i> |
| <i>sand</i> | <i>16</i> | <i>35</i> |
| <i>Gravel</i> | <i>7</i> | <i>42</i> |
| <i>Gravel & Brown clay mixed</i> | <i>6</i> | <i>48</i> |
| <i>Water sand</i> | <i>28</i> | <i>76</i> |
| 3 OWNER OF WELL | | |
| Name <i>Dave Limmer</i> | | |
| Address <i>6559 East "F" ave. Kalamazoo, Mich.</i> | | |
| Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 4 WELL DEPTH: (completed) | | |
| Depth <i>76</i> ft. | | Date of Completion <i>3-31-87</i> |
| 5 | | |
| <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/> | | |
| 6 USE: | | |
| <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input type="checkbox"/> Irrigation <input type="checkbox"/> Type IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public <input type="checkbox"/> | | |
| 7 CASING: | | |
| Diameter <input checked="" type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded | | Height: Above/Below Surface <i>1</i> ft. |
| Grouted Drill Hole Diameter <i>4</i> in. to <i>72</i> ft. depth | | Weight <i>110</i> lbs./ft. |
| | | <i>COUPLING</i> |
| | | Drive Shear <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 8 SCREEN: | | |
| Type <i>Johnson Stainless</i> <input type="checkbox"/> Not Installed | | |
| Diameter <i>4"</i> | | |
| Slot/Gauge <i>10</i> Length <i>4'</i> | | |
| Set between <i>72</i> ft. and <i>76</i> ft. | | |
| FITTINGS: <input type="checkbox"/> X-Packer <input checked="" type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check | | |
| <input checked="" type="checkbox"/> Blank above screen <i>1</i> ft. Other <i>Plug</i> | | |
| 9 STATIC WATER LEVEL: | | |
| <i>48</i> ft. below land surface <input type="checkbox"/> Flow | | |
| 10 PUMPING LEVEL: below land surface | | |
| <i>48</i> ft. after <i>1/2</i> hrs. pumping at <i>60</i> G.P.M. | | |
| _____ ft. after _____ hrs. pumping at _____ G.P.M. | | |
| 11 WELL HEAD COMPLETION: | | |
| <input checked="" type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit | | |
| 12 WELL GROUTED? | | |
| <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From _____ to _____ ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other <i>sand</i> | | |
| No. of bags of cement _____ Additives _____ | | |
| 13 Nearest source of possible contamination | | |
| Type _____ Distance _____ ft. Direction _____ | | |
| Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 14 PUMP: | | |
| <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only | | |
| Manufacturer's name <i>Fair</i> | | |
| Model number <i>SDL 210</i> HP <i>1/2</i> Volts <i>230</i> | | |
| Length of Drop Pipe <i>59</i> ft. capacity <i>10</i> G.P.M. | | |
| TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet | | |
| PRESSURE TANK: <i>Well-x-Trol</i> | | |
| Manufacturer's name <i>WX-203</i> Capacity <i>32</i> Gallons | | |
| Model number _____ Capacity _____ Gallons | | |
| 15 Remarks, elevation, source of data, etc. | | |
| <i>3</i> | | |
| 16. WATER WELL CONTRACTOR'S CERTIFICATION: | | |
| This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. | | |
| <i>Glen Liversee Well Drilling 1711</i> | | |
| REGISTERED BUSINESS NAME _____ REGISTRATION NO. _____ | | |
| Address <i>4224 N. 3rd St. Kalamazoo, Mich.</i> | | |
| Signed <i>Glen Liversee</i> Date <i>3-31-87</i> | | |
| AUTHORIZED REPRESENTATIVE | | |

RECEIVED
 Mich. Dept. of Public Health
 JUN 03 1987
 Bureau of Environmental and
 Occupational Health (4705)

USE A 2ND SHEET IF NEEDED

Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

| | | | | | |
|----------------------------|----------------------------------|---|-----------------------------|--------------------------------|--------------------------------|
| County KALAMAZOO | Township Name RICHLAND | Fraction NE 1/4 NE 1/4 NW 1/4 | Section Number 29 | Town Number 1 N.W.S. | Range Number 10 E.W. |
|----------------------------|----------------------------------|---|-----------------------------|--------------------------------|--------------------------------|

Distance And Direction from Road Intersections

Street address & City of Well Location
6654 E AVE E. RICHLAND

Locate with "X" in section below

Sketch Map:

3 OWNER OF WELL:

Address
**DR. ROGER SMITH
2024 SKYLER
KALAMAZOO MI**

4 WELL DEPTH: (completed) Date of Completion
113 ft. 6-28-82

5 Cable tool Rotary Driven Dug
 Hollow rod Jotted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded Height: Above/Below Surface **1** ft.
Diam. **4** in. to **108** ft. Depth Weight **30** lbs./ft.
in. to **113** ft. Depth Drive Shoe? Yes No

8 SCREEN:
Type: **JOHNSON** Dia.: **3"**
Slot/Gauge: **10** Length **5'**
Set between **108** ft. and **113** ft.
Fittings: **ISAPAC O 3X12 NIPPLE**

9 STATIC WATER LEVEL
88 ft. below land surface

10 PUMPING LEVEL below land surface
108 ft. after **1** hrs. pumping **30** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 12" Above Grade

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination
100 foot **S** Direction **SEWAGE** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **STANDARD**
Model Number _____ HP **1/2** Volts **220**
Length of Drop Pipe **93** ft. capacity **10** G.P.M.
Type: Submersible Jet Reciprocating

| 2 | FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|---|------------------------|----------------------|----------------------------|
| | Black dirt | 2 | 2 |
| | sand & gravel | 10 | 12 |
| | sand, gravel, clay mix | 6 | 18 |
| | Water sand | 22 | 40 |
| | Blue clay | 3 | 43 |
| | sand & gravel | 18 | 61 |
| | Water sand | 14 | 75 |
| | Blue clay | 7 | 82 |
| | sand & clay mix | 15 | 97 |
| | Blue clay | 3 | 100 |
| | Water sand & gravel | 13 | 113 |

16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY
*ADDITION BY
ELEVATION
DEPTH TO ROCK

17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
B&H WELL DRILLING **08-1793**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **11196 S. WALLER RD** **OSHTON, MI**
Signed **M.R. Smith** Date **9-22-82**
AUTHORIZED REPRESENTATIVE

JUN 15 1978

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

| | | | | | |
|--|-------------------------|---|--------------------------|---|-------------------------|
| County Kalamazoo | Twp. Richland | Fraction SE 1/4 SW 1/4 SE 1/4 | Section No. 29 | Town 1 W.S. | Range 10 E/W. |
| Distance And Direction from Road Intersections 1/4 MILE WEST OF 28th ST ON F AVE | | OWNER No. | | 3 OWNER OF WELL: PAUL HITCHCOCK Address 6835 EAST F AVE KALAMAZOO MICH | |
| Street address & City of Well Location | | | | | |

2 FORMATION

| FORMATION | THICKNESS OF STRATUM | DEPTH TO BOTTOM OF STRATUM |
|--------------------------|----------------------|----------------------------|
| SAND GRAVEL | 18 | 18 |
| SAND CLAY | 18 | 36 |
| CLAY | 10 | 46 |
| GRAVEL | 20 | 66 |
| FINE SAND | 10 | 76 |
| COARSE WATER SAND | 9 | 85 |

4 WELL DEPTH: (completed) Date of Completion

85 ft. 5-2-77

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

6 USE: Domestic Public Supply Industry
 Irrigation Air Conditioning Commercial
 Test Well

7 CASING: Threaded Welded
 Diam. **4** in. to **80** ft. Depth
 Height: Above/Below surface **1** ft.
 Weight _____ lbs./ft.
 Drive Shoe? Yes No

8 SCREEN:
 Type: **JOHNSON** Dia.: **3"**
 Slot/Gauze **10** Length **5 FOOT**
 Set between **80** ft. and **85** ft.
 Fittings: **K-PAC 3x12 Nipple**

9 STATIC WATER LEVEL
65 ft. below land surface

10 PUMPING LEVEL below land surface
 _____ ft. after _____ hrs. pumping _____ g.p.m.
 _____ ft. after _____ hrs. pumping _____ g.p.m.

11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter 42" Above Grade

13 GROUTING:
 Well Grouted? Yes No
 Material: Neat Cement
 Depth: From _____ ft. to _____ ft.

14 SANITARY:
 Nearest Source of possible contamination
50' feet North direction Sewage Type
 Well disinfected upon completion Yes No

15 PUMP:
 Manufacturer's Name **Myers**
 Model Number **SG 525 A** HP **1/2**
 Length of Drop Pipe **22** ft. capacity **12** G.P.M.
 Type: Submersible
 Jet Reciprocating

16 Remarks, elevation, source of data, etc.

APPROVED INFO BY DRILLER, ITEM NO.
 *CORRECTED BY **JS**
 **ADDITION BY _____
 ELEVATION _____
 DLFPH TO ROCK _____

17 WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

BWH well Drilling **0267**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **1196 S. wall ch rd Detroit Mich**
 Signed **Robert Heyward** Date **5-2-77**
 AUTHORIZED REPRESENTATIVE