

MICHIGAN DEPARTMENT OF CONSERVATION
GEOLOGICAL SURVEY DIVISION

WATER WELL RECORD

Page <u>1 of 1</u>		Permit No.	
Sample No.		Owner No.	
County Monroe	Twp. Milan	<i>SW 4SW 4SW 4</i> Sec. <i>29</i>	Town 5S N/5.
			Range 6E E/W.
Distance from Roads, Section Lines, etc. Far Road, off Milwaukee Rd., 100' set back - north of Milwaukee			

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Owner:
Yellow clay	15	15	Charles Fojtilo
Blue clay	55	70	Address:
Fine sand	10	80	Driller and Address:
Hardpan	21	101	Wm. Musgrave and Son
Dundee Limestone	38	139	Well Depth: Date of Completion
			139 ft. 8/27/65
			<input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Dug <input type="checkbox"/> R.C.
			<input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Bored
			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"/> Dewatering
			<input type="checkbox"/> Test Well <input type="checkbox"/> _____
			Casing: Diam. Height: Above/Below
			_____ in. to 106 ft. Depth surface _____ ft.
			_____ in. to _____ ft. Depth Type-Weight
			Screen:
			Type: none Dia: _____
			Slot/Gauze _____ Length _____
			Set between _____ ft. and _____ ft.
			Accessories:
			Water level:
			60 ft. XXXXXX below LSD
			_____ ft. above/below _____
			Meas. by Date
			Driller 8/27/65
			Drawdown:
			_____ ft. after _____ hrs. pumping 10 g.p.m.
			_____ ft. after _____ hrs. pumping _____ g.p.m.
			Meas. by Date
			Driller 8/27/65
			Flow:
			_____ g.p.m./g.p.h. Temp: _____ °F
			Water Quality in Parts Per Million:
			Iron (Fe) _____ Chlorides (Cl) _____
			Hardness _____
			Elevation:
			_____ ft. above
			Source of data:
			Drillers Record
			Record by:
			RPB Date: 9/24/65
Remarks:			
101 feet to rock. Monroe County Permit			

(517) 451-8394

DEQ MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER & RADIOLOGICAL PROTECTION DIVISION

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:

99-490

TAX NO:

1. LOCATION OF WELL

County

Monroe

Township Name

Milan

Fraction

SE 1/4 SW 1/4

Section No.

29

Town No.

55

Range No.

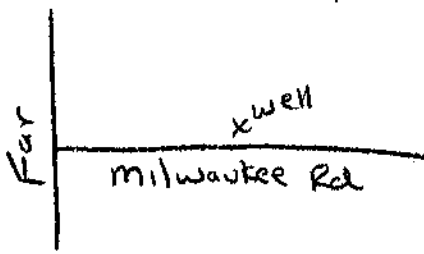
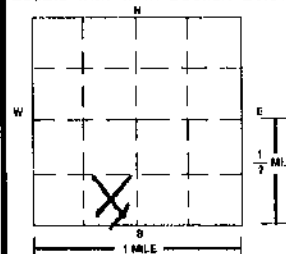
6E

Distance and Direction from Road Intersection

1/2 mile east of
Far Rd on north side of
Milwaukee Rd
Street Address & City of Well Location

Locate with 'x' in Section Below

Sketch Map



2. FORMATION DESCRIPTION

THICKNESS
OF
STRATUM

DEPTH TO
BOTTOM OF
STRATUM

Clay
Limestone

101

101

39

140

RECEIVED

SEP 08 1999

MONROE CO. HEALTH DEPT.
Environmental Health Div.

RECEIVED

MICH DEPT OF ENVIRONMENTAL QUALITY

OCT 05 1999

Drinking Water & Radiological Protection Division
Ground Water Supply Section
WELL CONSTRUCTION UNIT

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED?

☒ Yes ☐ No

Casing Diameter 4 in.

Depth 110 ft.

PLUGGING MATERIAL:

☒ Neat Cement

☐ Bentonite Slurry

☐ Cement/Bentonite Slurry

☐ Concrete Grout

☐ Bentonite Chips

No. of Bags 15

Casing Removed?

☐ Yes ☐ No

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

17. DRILLING MACHINE OPERATOR:

☒ Employee ☐ Subcontractor

Name Phillip Gordon

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.

Gordon & Sons

REGISTERED BUSINESS NAME

Address 3768 M50 Tipton MI 49287

Signed Phillip L. Gordon

AUTHORIZED REPRESENTATIVE

Date 8-10-99

46-2039

REGISTRATION NO.

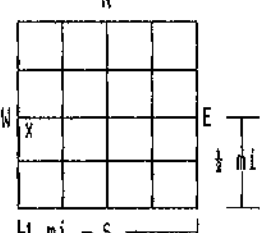
GEOLOGICAL SURVEY COPY

EQP 2017 (12/96)

**MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD**

PERMIT NUMBER:

98-6131

1 LOCATION OF WELL		58757629001		Tax Parcel No. 581102900300	
County MONROE	Township Name MILAN	Fraction NW 1/4 NW 1/4 SW 1/4	Section No. 29	Town No. 05 S	Range No. 06 E
Distance And Direction From Road Intersection BET. COUPER / CONE 10572 FAR, MILAN 48160 Street Address & City of Well Location			3 OWNER OF WELL MYRTLE KANITZ Address 10572 FAR MILAN, MI 48160 Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Locate with 'x' in Section Below <div style="text-align: center;">N  E</div>			Sketch Map:		
2 FORMATION DESCRIPTION			4 WELL DEPTH: 115.0 ft. Date Completed 09/12/98 <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Replacement Well		
			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/Bored <input type="checkbox"/> Jetted		
			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 II Public <input type="checkbox"/> Heat Pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIB Public		
			7 CASING: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Plastic <input type="checkbox"/> Height: Above Surface 1.0 ft. Diameter 4.00 in. to 0.0 ft. depth Weight ___ lbs/ft. 0.00 in. to 0.0 ft. depth Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Grouted Drill Hole Diameter 0.00 in. to 0.0 ft. depth 0.00 in. to 0.0 ft. depth		
			8 SCREEN <input type="checkbox"/> Not Installed Type Stainless Steel Diameter 0.00 SLOT 0.000 Length 0.0 Set between 0.00 ft. and 0.00 ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremner Check <input type="checkbox"/> Blank above screen 0.0 ft. Other		
9 STATIC WATER LEVEL: 21.00 ft. below land surface <input type="checkbox"/> Flow			10 PUMPING LEVEL: below land surface 46 ft. after 4.0 hrs. pumping at 10 G.P.M. 0 ft. after 0.0 hrs. pumping at 0 G.P.M.		
11 WELL HEAD COMPLETION: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> 12" above grade <input type="checkbox"/> Basement offset <input type="checkbox"/> Approved pit			12 WELL GROUTED? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes From ___ to ___ ft. <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other ___ No. of bags of cement ___ Additives ___		
13 Nearest source of possible contamination Type Septic Distance 50 ft. Direction NE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name GRUNDFOS Model number HP 1/2 Volts ___ Length of Drop Pipe 100 ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name ___ Model number ___ Capacity 10 Gallons		

RECEIVED

SEP 30 1998

MONROE CO. HEALTH DEPT.
Environmental Health Division

15 Remarks, elevation, source of data, etc.
A.O.S. 5-GAL. TANK / WELL CONVERSION ONLY

Data Source: MDNR

17 ~~Reg~~ Operator's Name:

Allen Shidler

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.

SHIDLER & WILDER WELLS & PUMP

0752

REGISTERED BUSINESS NAME

REGISTRATION NO.

Address **17333 IDA CENTER RD PETERSBURG, MI 49270**

Signed

Nancy Wilder
AUTHORIZED REPRESENTATIVE

Date **9-28-98**

AUTHORITY: Act 368 PA 1978 COMPLETION: Required PENALTY: Conviction of a violation of any provision is a misdemeanor

