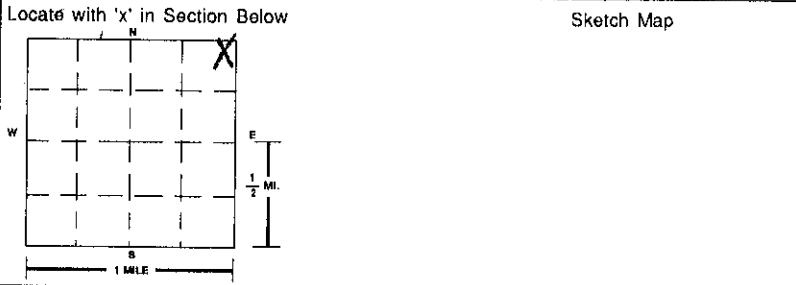


1. LOCATION OF WELL
 County **Oakland** Township Name **White Lake** Fraction **NE 1/4 NE 1/4 NE 1/4** Section No. **21** Town No. **3N** Range No. **8E**

Distance and Direction from Road Intersection
 Street Address & City of Well Location **1200 Lake Lane**



3. OWNER OF WELL **Images Plus**
 Address **481 Shoreview Waterford**
 Address Same as Well Location Yes No

4. WELL DEPTH: **53** ft. Date Completed **9 / 24 / 96**
 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 Welded
 Plastic Other
 Diameter: **4** in. to **49** ft. depth
 Weight: **10/40** lbs./ft.
 BORE HOLE: Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
 Type **Johnson** Diameter **3"**
 Slot Gauze **12** Length: **48"**
 Set Between **49** ft. and **53** ft.
 FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other

9. STATIC WATER LEVEL: **10** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
31 ft. After **1/2** hrs. Pumping at **65** 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 **42** ft.
 Neat Cement Bentonite Other
 No. of Bags **2** Additives

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type **Septic** Distance **56** ft. Direction **East**
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name **Redjacket**
 Model Number _____ HP **3/4** Volts **230**
 Length of Drop Pipe **31** ft. Capacity **18** G.P.M.
 TYPE: Submersible Jet Other
 PRESSURE TANK:
 Manufacturer's Name **X-trol**
 Model Number **WX250** Capacity **64** Gallons

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Gravel - rocks	0	8
Brown sand - gravel	37	45
Blue clay - gravel	3	48
Med. sand - gravel - water	5	53
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.)
Nit-0

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name **Charles Farren**

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.
Fettig Well Drilling **63-1976**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **2990 Towering Oaks Dr., White Lake**
 Signed **Randy K. [Signature]** Date **10-13-96**
 AUTHORIZED REPRESENTATIVE

1. LOCATION OF WELL
 County **Oakland** Township Name **White Lake** Fraction **NE 1/4 SW 1/4 SW 1/4** Section No. **21** Town No. **3N** Range No. **8E**

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 **Michael Farero**
700 Sunset

Address Same as Well Location Yes No

4. WELL DEPTH: **95** ft. Date Completed **9 / 26 96** 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: _____ ft

Diameter: **4** in. to **91** ft. depth Weight: **10/40** lbs./ft.

BORE HOLE: Drive Shoe Shale Packer

Diameter: _____ in. to _____ ft. depth

8. SCREEN: Not Installed Gravel-Packed
 Type **Johnson** Diameter **3"**
 Slot Gauze **10** Length: **48"**
 Set Between **91** ft. and **95** ft.

FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
63 ft. After **1** hrs. Pumping at **35** 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 **84** ft.
 Neat Cement Bentonite Other
 No. of Bags **3** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type **Septic** Distance **50** ft. Direction **East**
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name **Redjacket**
 Model Number _____ HP **1/2** Volts **115**
 Length of Drop Pipe **63** ft. Capacity **10** 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
Brown sand - gravel	0	15
Blue clay - gravel	76	91
Med. sand-gravel-water	4	95

OAKLAND COUNTY HEALTH DIVISION

96 NOV 12 P1:50

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 Mich. Dept. of Public Health
 NOV 27 1996

BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
 Casing Diameter **1 1/4** in. Depth **25** ft.
 PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
 No. of Bags **1** Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)
Nit-0

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name **Charles Farren**

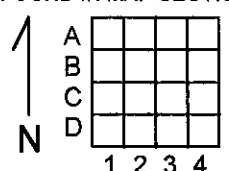
18. WATER WELL CONTRACTOR'S CERTIFICATION:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Fettig Well Drilling **63-1976**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **2990 Towering Oaks Dr., White Lake**
 Signed *Randy K. [Signature]* Date **9-30-96**
 AUTHORIZED REPRESENTATIVE

MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP REPORT

TAX NO.		PERMIT NO.
1. LOCATION OF WELL		

COUNT Oakland	TOWNSHIP WHITE LK	FRACTION SW 1/4 SW 1/4 NW 1/4	SECTION NO 21	TOWN N 3N	RANGE NO. 8E
----------------------	--------------------------	--------------------------------------	----------------------	------------------	---------------------

DISTANCE AND DIRECTION FROM INTERSECTION: WELL ADDRESS: 6777 HIGHLAND RD M 59 WHITE LK, MI 48383	3. OWNER OF WELL: RICK AMERICAN MARINE ADDRESS: 6777 HIGHLAND RD M 59 WHITE LK, MI 48383 <i>Shore Control & Sports Center</i> ADDRESS SAME AS WELL LOCATION: YES 887-7855
--	---

LOCATE WITH "X" BELOW OR FOUND IN MAP SECTION: 1B	SKETCH MAP: 
--	---

4. WELL DEPTH: 76 ft.	DATE COMPLETED 6/6/96	NEW WELL <i>5 employees</i>
---------------------------------	---------------------------------	--------------------------------

5. EQUIPMENT: ROTARY	
6. USE: DOMESTIC OTHER: _____	
7. CASING: PLASTIC Diameter 5 in. to 66 in. ft. depth BORE HOLE: Diameter 8 in. to 76 in. ft. depth	HEIGHT: above/below Surface: 1.00 ft. Weight: SDR21 lbs./ft. NONE

2. FORMATION DESCRIPTION:	THICKNESS	DEPTH
SAND	7	7
CLAY	2	9
SAND	27	36
		36
		36
CLAY	7	43
SAND	33	76
		76
		76
		76

8. SCREEN: GRAVEL PACKED	
Type: JOHNSON Diameter: 4 in. Slot/Gauze: 32 in. Length: 8 ft. Set Between: 76 ft. and 68 ft.	
FITTINGS: NON-TELESCOPE Blank Above Screen: 2 ft. other _____	

9. STATIC WATER LEVEL: 12 ft. Below Land Surface Flowing: NO	
10. PUMPING LEVEL: Below Land Surface 60 ft. After 1 hrs. Pumping at 35 G.P.M. AIR	

11. WELL HEAD COMPLETION: PITLESS ADAPTER	
12. WELL GROUTED YES From 5 to 63 ft. BENTONITE No. of Bags 3 Additives _____	

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:	
Type: None	Distance 55 ft. Direction N
Type: _____	Distance _____ ft. Direction _____

15. ABANDONED WELL PLUGGED? Casing Diameter: _____ in. Depth: _____ ft.	
PLUGGING MATERIAL: _____ No. of Bags: _____ Casing Removed? _____	

14. PUMP: PUMP INSTALLATION ONLY	
Manufacturer's Name: GOULDS Model Number: _____ HP: 1/2 Volts: 230 Length of Drop Pipe: 40 ft. Capacity: 12 G.P.M.	
TYPE: SUBMERSIBLE PRESSURE TANK: Manufacturer's Name: A.O. SMITH Model Number: V60 Capacity: 6 Gallons:	

16. REMARKS: (Elevation, Source of Data, etc.) OWNER, STATED THAT WELL IS 55' AWAY FROM SEPTIC TANK	
--	--

17. DRILLING MACHINE OPERATOR: Robert Fleming EMPLOYEE
--

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.	
FLEMING WELL DRILLING Registration No. 63-0357 445 M-15, Ortonville, Michigan 48462	
Signed <i>Don Fleming</i>	Date 6/6/96
Authorized Representative	

GEOLOGICAL SURVEY COPY

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

TAX NO:

PERMIT NO:

1. LOCATION OF WELL

County

Township Name

Fraction

Section No.

Town No.

Range No.

Oakland wite Lake
 Distance and Direction from Road Intersection
3/8 mile north of Highland Rd
200' East of Lake Ln
 Street Address & City of Well Location

3. OWNER OF WELL

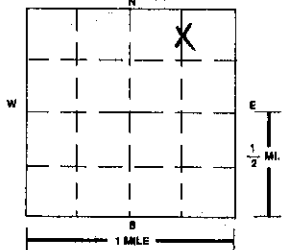
Address

Riveria Cont.
1230 Lake Ln

Address Same as Well Location Yes No

Locate with 'x' in Section Below

Sketch Map



4. WELL DEPTH:

Date Completed

New Well

50 ft.

5/10/96

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

Height: Above/Below

Plastic

Welded

Surface: 1 ft

Other

Diameter: 5 in. to 60 ft. depth

46 ft. depth

Weight: 296 lbs./ft.

BORE HOLE:

Diameter: 8 in. to 60 ft. depth

60 ft. depth

Drive Shoe

Shale Packer

8. SCREEN: Not Installed

Gravel-Packed

Type SS

Diameter 4"

Slot/Screen 40

Length:

Set Between _____ ft. and _____ ft.

FITTINGS: K-Packer

Bremer Check

Blank Above Screen 2' ft. Other _____

9. STATIC WATER LEVEL:

25 ft. Below Land Surface

Flowing

10. PUMPING LEVEL: Below Land Surface

35 ft. After 2 hrs. Pumping at 30 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 40 ft.

Neat Cement

Bentonite

Other _____

No. of Bags 2 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:

Type Septic Distance 85 ft. Direction north

Type Lake Distance 150 ft. Direction East

USE A 2ND SHEET IF NEEDED

14. PUMP: Not Installed

Pump Installation Only

Manufacturer's Name Goold's

Model Number 20 HP 3/4 Volts 230

Length of Drop Pipe 40 ft. Capacity 20 G.P.M.

TYPE: Submersible Jet Other _____

PRESSURE TANK:

Manufacturer's Name Chrysler

Model Number PC211 Capacity 15 Gallons 35

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.)

Lot of Big rocks mix in
with clay on top

17. DRILLING MACHINE OPERATOR:

Employee Subcontractor

Name Tim Kilclom

15. 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.

Glenn Hurley well
 REGISTERED BUSINESS NAME

2047
 REGISTRATION NO.

Address 2047 Bray Attica mi 48412

Signed [Signature] Date May 10 96

AUTHORIZED REPRESENTATIVE

Authority: Act 368 PA 1978

Completion: Required

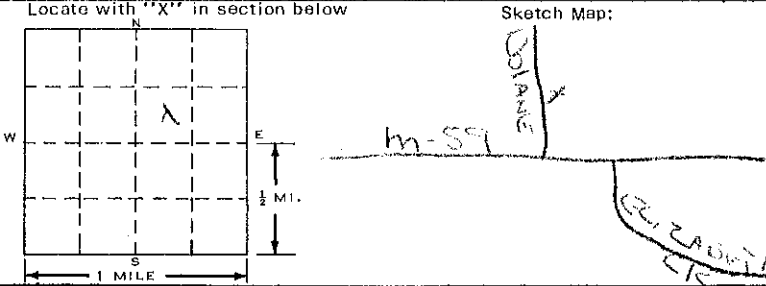
Penalty: Conviction of a violation of any provision is a misdemeanor.

GEOLOGICAL SURVEY COPY



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County OAKLAND		Township Name WHITE LAKE		Fraction 16 1/2 30 1/4 NW 1/4		Section Number 21		Town Number 3 CNS.		Range Number 8 (E.N.)	
Distance And Direction from Road Intersections 2 1/2 mile west on M-59 from ELIZABETH LAKE RD 1 1/2 mile north on DOLANE, FROM M-59						3 OWNER OF WELL: Address JAY PHELPS 1010 DOLANE MILFORD MI 48042					
Street address & City of Well Location M-59						4 WELL DEPTH: (completed) Date of Completion 59 ft. 6-11-87					
Locate with "X" in section below 						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 1 ft Diam. _____ Weight _____ lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
2 FORMATION		THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		8 SCREEN: Type: JOHNSON Dia.: 1 1/4" Slot/Gauze 10 Length 6 ft Set between 54 ft. and 59 ft. Fittings: 5 ft BLANK BREWER CHECK					
BROWN GRAVEL SAND		0		17		9 STATIC WATER LEVEL 19 ft. below land surface					
BLUE CLAY SOFT		18		31		10 PUMPING LEVEL below land surface 54 ft. after 1 1/2 hrs. pumping 10 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.					
HARD BLUE CLAY GRAVEL		32		50		11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____					
WATER BEARING SAND		51		59		12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade					
						13 Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> BEA SEAL Depth: From 0 ft. to 50 ft.					
						14 Nearest Source of possible contamination 55 feet EAST Direction SEPTIC Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
						15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating					
16 Remarks, elevation, source of data, etc. <p align="center">RECEIVED Mich. Dept. of Public Health JUL 27 1988</p>						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. Witekott Well Drilling 63-1856 REGISTERED BUSINESS NAME REGISTRATION NO. Address 3020 GLENGARY Signed Bob Witekott Date 4/11/88 AUTHORIZED REPRESENTATIVE					

WATER WELL AND PUMP RECORD

--	--	--	--	--	--	--	--

PERMIT NUMBER

1 LOCATION OF WELL	
County Oakland	Township Name White Lake
Fraction NW 1/4	Section Number 21
Town Number 3N N/S	Range Number 8E E/W

Distance And Direction From Road Intersection

Street Address & City of Well Location

Locate with "X" in Section Below

N

1 MILE

1/2 MI.

S

W

E

Sketch Map:

3 OWNER OF WELL: **Nelson Oliver**
755 Elkinford
Milford, MI 48042

Address

Address Same As Well Location? Yes No

4 WELL DEPTH: **82** FT.

Date Completed: **5** MO. **18** DAY **90** YEAR

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: Steel Threaded Plastic Welded

Diameter: **4** in. to **78** ft. depth

Height: Above/Below Surface _____ ft.

Weight **11** lbs./ft.

Grouted Drill Hole Diameter _____ in. to _____ ft. depth

Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Top Soil	1	1
Brown Sand and Gravel	12	13
Brown Clay	18	31
Brown Sand	27	58
Gray Gravel and Sand	24	82
Gray Clay and Gravel	1	83

8 SCREEN: Not Installed

Type **S/S W/W** Diameter **4"**

Slot/Gauze **15** Length **4'**

Set between **78** ft. and **82** ft.

FITTINGS: K-Packer Lead Packer Brammer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: **59** ft. below land surface Flow

10 PUMPING LEVEL: below land surface

65 ft. after **1 1/2** hrs. pumping at **15-18** 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 **15** ft.

Neat cement Bentonite Other _____

No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination

Type **septic tank** Distance **68** ft. Direction _____

Well disinfected upon completion? Yes No

Was old well plugged? Yes No **1 bag hole**

14 PUMP: Not Installed Pump Installation Only **Plug**

Manufacturer's name **Red Jacket**

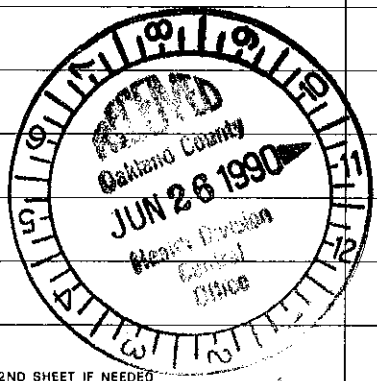
Model number **75UW1 12BC HP 3/4** Volts **230**

Length of Drop Pipe **65** ft. capacity **17+665'** G.P.M.

TYPE: Submersible Jet

PRESSURE TANK: Manufacturer's name **Clayton Mark**

Model number **203** Capacity **32** Gallons



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

RECEIVED
 Mich. Dept. of Public Health
 JUN 29 1990

17. Rig Operator's Name:

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.

A and D Drilling Co., Inc. **1562**
 REGISTERED BUSINESS NAME REGISTRATION NO.

Address **1838 Euler Rd. Brighton**

Signed *Ernest D. Vaughan*
 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

PART 127 ACT 368, P.A. 1978

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PERMIT NUMBER

1 LOCATION OF WELL									
County OAKLAND	Township Name WHITE LAKE	Fraction 1/4 NW 1/4 S 1/4	Section Number 21	Town Number 3 MS	Range Number 8 NW				
Distance And Direction From Road Intersection 200' SOUTH of I 59 40' west of Hill wood		3 OWNER OF WELL: Jim HART		Address 821 Hill wood 48042 Milford, MI		Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Street Address & City of Well Location Locate with "X" in Section Below		Sketch Map:		4 WELL DEPTH: (completed) 63 ft.		Date of Completion 6-13-90			
		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 type="checkbox"/> Threaded <input type="checkbox"/> Height: Above/Below <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Welded Surface 1 ft. 4 in. to 58 ft. depth Weight 11 lbs./ft. _____ in. to _____ ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
2 FORMATION DESCRIPTION		THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		8 SCREEN:			
Brown sandy clay		18'		18'		Type PVC Diameter 3" <input type="checkbox"/> Not Installed Slot/Gauze 10 slot Length 6' Set between 57 ft. and 63 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____			
Brown SAND + gravel		12'		30'		9 STATIC WATER LEVEL: 21 ft. below land surface <input type="checkbox"/> Flow			
Gray clay + gravel		6'		36'		10 PUMPING LEVEL: below land surface			
course Brown gravel Rocks		6'		42'		_____ ft. after 2 hrs. pumping at 35 G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.			
course WATER SAND + gravel		21'		63'		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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes From START to FINISH <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____			
						13 Nearest source of possible contamination Type SEPTIC Distance 60 ft. Direction WEST 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 GOULD'S Model number 10EJOS HP 1/2 Volts 230 Length of Drop Pipe _____ ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name CLAYTON MARKS Model number CM 202 Capacity 40 Gallons			
15. Remarks, elevation, source of data BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS						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. Jim Palmer Well Drilling 25-1936 REGISTERED BUSINESS NAME REGISTRATION NO. Address 61431 Cynnings Rd Davison 48423 Signed Jim Palmer Date 6-13-90 AUTHORIZED REPRESENTATIVE			

RECEIVED
 Mich. Dept. of Public Health
SEP 4 1990

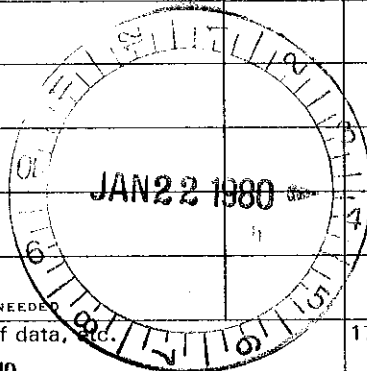
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WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		3 OWNER OF WELL: M. CASCHIGIAN, BLDG. 1150 WINDMILL LN.	
County <u>DAKLAND</u>	Township Name <u>WHITE LAKE</u>	Fraction <u>1/4 1/4 1/4</u>	Section Number <u>21</u> Town Number <u>T3NS.</u> Range Number <u>R8E/W.</u>
Distance And Direction from Road Intersections		Address <u>MILFORD MI. 48042</u>	
Street address & City of Well Location Locate with "X" in section below		4 WELL DEPTH: (completed) <u>42</u> ft. Date of Completion <u>11/29/79</u>	
<div style="border: 1px dashed black; width: 100%; height: 100%; position: relative;"> <div style="position: absolute; top: 0; left: 0; right: 0; text-align: center;">N</div> <div style="position: absolute; bottom: 0; left: 0; right: 0; text-align: center;">S</div> <div style="position: absolute; left: 0; top: 50%; bottom: 0; text-align: center;">W</div> <div style="position: absolute; right: 0; top: 50%; bottom: 0; text-align: center;">E</div> <div style="position: absolute; bottom: 0; right: 0; text-align: right;">1/2 MI.</div> <div style="position: absolute; bottom: 0; left: 0; text-align: left;">1 MILE</div> </div>		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"/>	
Sketch Map: <u>1085 Pinecrest</u> <u>MILFORD MI.</u> <u>PINECREST SHORES</u> <u>Sub.</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"/>	
2 FORMATION		7 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: <u>Above</u> / Below Surface <u>1</u> ft. Weight <u>11</u> lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	8 SCREEN: Type: <u>JOHNSON 5/8</u> Dia.: <u>4"</u> Slot/Gauze <u>12</u> Length <u>4</u> Set between <u>38</u> ft. and <u>42</u> ft. Fittings: <u>R. JACKER, BLANK & PLUG</u>
<u>BROWN CLAY + GRAVEL</u>	<u>5'</u>	<u>5'</u>	9 STATIC WATER LEVEL <u>112</u> ft. below land surface
<u>BROWN SAND + GRAVEL</u>	<u>24'</u>	<u>29'</u>	10 PUMPING LEVEL below land surface <u>75</u> ft. after <u>1</u> hrs. pumping <u>25</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.
<u>GRAY CLAY + GRAVEL. WATER</u>	<u>5'</u>	<u>34'</u>	11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____
<u>GRAY WATER SAND</u>	<u>5'</u>	<u>42'</u>	12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade
			13 Well Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.
			14 Nearest Source of possible contamination _____ feet _____ Direction _____ Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name <u>Red Jacket</u> Model Number <u>502W-CR9BC</u> HP <u>1/2</u> Volts <u>230</u> Length of Drop Pipe <u>20</u> ft. capacity <u>20</u> G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating
16 Remarks, elevation, source of data, etc.		17 WATER WELL CONTRACTOR'S CERTIFICATION:	
USE A 2ND SHEET IF NEEDED ADDED INFO BY DRILLER, ITEM NO. *CORRECTED BY **ADDITION BY ELEVATION DEPTH TO ROCK		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>BOB CAIN WELL DRILLING 1296</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address: <u>3154 E. COON LK. RD - Howell, MI.</u> Signed: <u>[Signature]</u> Date: <u>1/14/80</u> AUTHORIZED REPRESENTATIVE	



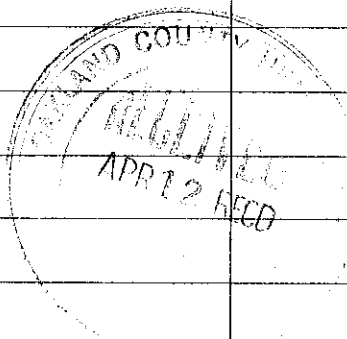


APR 17 1973

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL County Oakland Township Name White Lake Fraction NE NE NW 1/4 Section Number 21 Town Number 3 N Range Number 8 E		
Distance and Direction from Road Intersections 125 ft. W. of Elkinford 220 ft. S. of M-59		
Street address & City of Well Location 836 Elkinford		
Locate with "X" in section below 		
3 OWNER OF WELL: Henry Prokoff Address 7341 Biscayne Milford		
4 WELL DEPTH: (completed) 48 ft. Date of Completion 1-12-73		
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"/> Diam. _____ Height: Above/Below Surface 1 ft. 2 in. to 44 ft. Depth Weight 3.75 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Stood pipe in clay - drove</i>	40	40
<i>Water gravel</i>	8	48
8 SCREEN: Type: Slotted Dia.: 1 1/2" Slot/Gauze 12 Length 4 ft. 44 ft. and 48 ft. Set between _____ ft. and _____ ft. Fittings: _____		
9 STATIC WATER LEVEL 10 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade		
13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
14 Nearest Source of possible contamination 50 feet W Direction Septic tank Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc. ADDED INFO. BY DRILLER, <i>MEM</i> CORRECTED BY <i>CMJ</i> ADDITION <i>MEM</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. Fettig Well Drilling 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 1051 Round Lake Road Signed <i>Jerry L. Fettig</i> Date 4-11-73 AUTHORIZED REPRESENTATIVE



APR 17 1973

WATER WELL RECORD

ACT 294 PA 1966

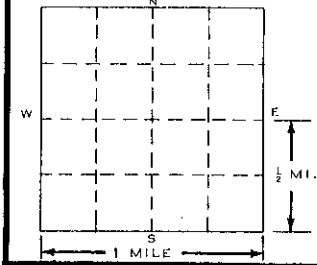
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County Oakland	Township Name White Lake	Fraction NE 1/4 NE 1/4 NW 1/4	Section Number 21	Town Number 3	Range Number 8 E
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Distance and Direction from Road Intersections
125 ft. W. of Elkinford
200 ft. S. of M-59

Street address & City of Well Location
824 Elkinford
 Locate with "X" in section below Sketch Map:



3 OWNER OF WELL: **Henry Prokoff**
 Address **7341 Biscayne Milford**

4 WELL DEPTH: (completed) Date of Completion
48 ft. **1-11-73**

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. **2** in. to **44** ft. Depth Height: Above/~~Below~~ Surface **1** ft.
 Weight **3.75** lbs./ft. Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
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Stood pipe in clay - drove	40	40
Water gravel	8	48

8 SCREEN:
 Type: **Slotted** Dia.: **1 1/4"**
 Slot/Gauze **12** Length **4 ft.**
 Set between **44** ft. and **48** ft.
 Fittings: _____

9 STATIC WATER LEVEL
10 ft. below land surface

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

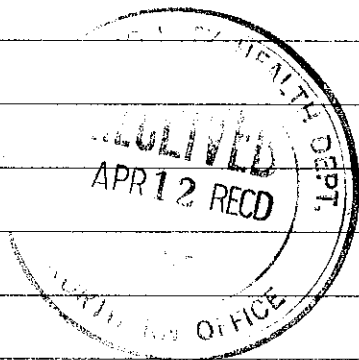
11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

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

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

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

15 PUMP: Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.
 ADDITIONAL INFO BY DRILLER, ITEM NO.
 CORRECTED BY
 ADDITION BY

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.
Fettig Well Drilling **0413**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **1057 Round Lake Road**
 Signed **Jerry B. Fettig** Date **4-11-73**
 AUTHORIZED REPRESENTATIVE

NOV 24 1972

WATER WELL RECORD
ACT 294 PA 1965

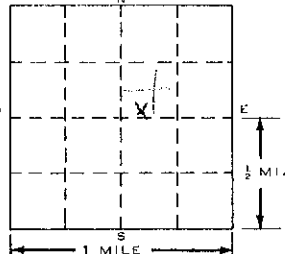
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County DALLAND	Township Name WHITE L.F.	Fraction SW 1/4 NE 1/4	Section Number 21	Town Number 3 N/S	Range Number 8 E/W
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Distance And Direction from Road Intersections
ON CHARLTON RD - 1/10 MILE SOUTH
OF M-59

Street address & City of Well Location
Locate with "X" in section below



Sketch Map:

3 OWNER OF WELL:
Address **CRATSMAN HUMMERS**
2808 RAVEN GLASS
WATERFORD

4 WELL DEPTH: (completed) **76'** ft. Date of Completion **9/13/72**

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
Diam. Surface **1'** ft.

4 in. to **72** ft. Depth Weight **10.78** lbs./ft.
4 in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
CLAY & SAND	22	
GRAVEL	6	28
CLAY	6	34
HARD PAN	20	54
CLAY & SAND	18	72
WATER SAND	4	76

8 SCREEN:
Type: **STAINLESS** Dia.: **3"**
Slot/Gauze **12** Length **4'**
Set between **72** ft. and **76** ft.
Fittings: **1' PACKER - 1' BLANK**

9 STATIC WATER LEVEL
30' ft. below land surface

10 PUMPING LEVEL below land surface
40' ft. after **30** hrs. pumping **30** g.p.m.

_____ ft. after _____ hrs. pumping _____ g.p.m.

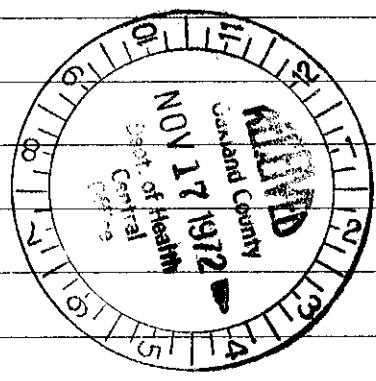
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
50' feet **N** Direction **SEPTIC** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **FW**
Model Number **5CC** HP **1/2** Volts **220**
Length of Drop Pipe **63** ft. capacity **22** G.P.M.
Type: Submersible Jet Reciprocating



USE A 2ND SHEET IF NEEDED

16 Remarks, elevation, source of data, etc.
ADDED INFO. BY DRILLER, **LEW AL**
CORRECTED BY: **cmj**
MODIFICATION BY:

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.
RAYLOR WELLS DRILL 0149
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **1055 WYMAN POINT**
Signed **[Signature]** Date **9/13/72**
AUTHORIZED REPRESENTATIVE

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

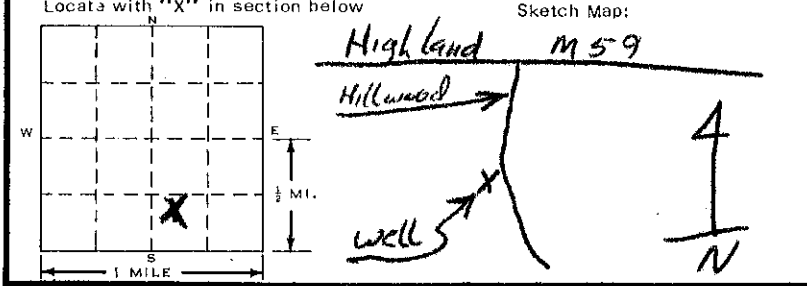
1 LOCATION OF WELL

County <u>Oakland</u>	Township Name <u>White Lake</u>	Fraction <u>N 1/4 SW 1/4 S 21/2</u>	Section Number <u>21</u>	Town Number <u>30 N.S.</u>	Range Number <u>8 E.W.</u>
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Distance And Direction from Road Intersections
1/4 mi S of M 59 on Hill wood
(Highland M)

Street address & City of Well Location
Same as 3

3 OWNER OF WELL:
James Mc Broom
Address
577 Hillwood
White Lake, Mich



4 WELL DEPTH: (completed) Date of Completion
50 ft. Mar 9-72

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. 2 in. to 50 ft. Depth
Height: Above/Below Surface 1 ft.
Weight 3.75 lbs./ft.
Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Brown Clay (sandy)</u>	<u>10'</u>	<u>10'</u>
<u>Blue Clay</u>	<u>20'</u>	<u>30'</u>
<u>Sand + Gravel</u>		
<u>Water Bearing</u>	<u>9'</u>	<u>39'</u>
<u>Blue Clay</u>	<u>4'</u>	<u>43'</u>
<u>Gravel with some</u>		
<u>sand</u>	<u>7'</u>	<u>50'</u>
<u>Water Bearing</u>		

8 SCREEN:
Type: Johnson Dia.: 1 1/4"
Slot/Groove 10 Length 3'
Set between 47 ft. and 50 ft.
Fittings: Bromer Check

9 STATIC WATER LEVEL
10 ft. below land surface

10 PUMPING LEVEL below land surface
10 ft. after 1 hrs. pumping 15 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
65 feet W Direction Septic Type
Well disinfected upon completion Yes No

15 PUMP: not installed
Manufacturer's Name Rapidayton
Model Number _____ HP 1/4 Volts 220
Length of Drop Pipe 21 ft. capacity 6 G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

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 Tabor Well Drilling 1173
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 8319 Legcor Union Lake
Signed [Signature] Date Mar 7-72
AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

PERMIT NUMBER							

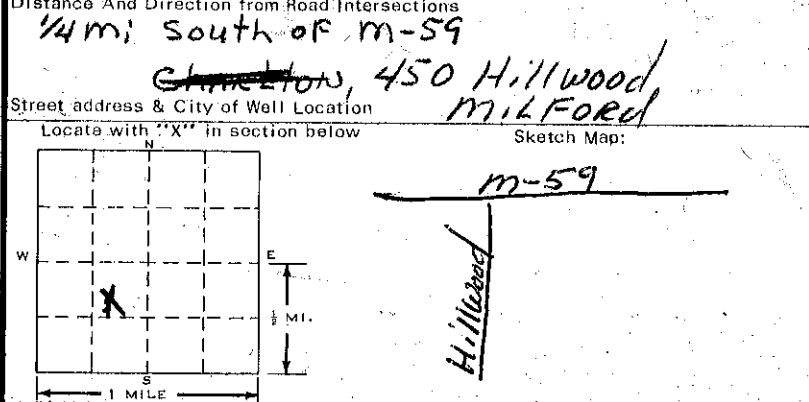
1 LOCATION OF WELL					
County OAKLAND	Township Name WHITE LAKE	Fraction SW 1/4 NE 1/4 SW 1/4			
		Section Number 21			
		Town Number 3 N/S			
		Range Number 8 E/W			
Distance And Direction From Road Intersection					
Street Address & City of Well Location					
Locate with "X" in Section Below	Sketch Map:				
2 FORMATION DESCRIPTION					
	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM			
clay-sand	20	20			
fine sand-water	13	33			
clay-sand	5	38			
sand-gravel-water	15	53			
			3 OWNER OF WELL: 697 Sunset		
			Address		
			Address Same As Well Location? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			4 WELL DEPTH: (completed) 53 ft. Date of Completion 6-3-88		
			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 type="checkbox"/> Steel <input type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Welded Height: Above/Below Surface 1 ft. Weight 10-20 lbs./ft. Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			8 SCREEN: <input type="checkbox"/> Not Installed Type Johnson Diameter 3" Slot/Gauge <input checked="" type="checkbox"/> 20 Length 4 ft. Set between 49 ft. and 53 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen 1 ft. Other 1 ft. blank		
			9 STATIC WATER LEVEL: 20 ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface 36 ft. after 60 G.P.M. ft. after 60 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 6 to 26 ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____					
13 Nearest source of possible contamination Type septic Distance 53 ft. Direction W 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 Red Jacks Model number _____ HP 3/4 Volts 220 Length of Drop Pipe 37 ft. capacity 18 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons					
USE A 2ND SHEET IF NEEDED					
15. Remarks, elevation, source of data, etc.					
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. Fettigs Well Drilling 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 5575 Jackson Blvd. Davisburg Signed <i>Jerry L. Fettig</i> Date 6-9-88 AUTHORIZED REPRESENTATIVE					

NOV 14 1977

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL				
County OAKLAND	Township Name White Lake	Fraction SW 1/4 NW 1/4 SE 1/4	Section Number 21	Town Number 3 N/1
Distance And Direction from Road Intersections 1/4 mi. south of m-59			Range Number 8 E/1	
Street address & City of Well Location Charlton, 450 Hillwood MILFORD				



3 OWNER OF WELL: **Mrs CLARK**

Address: **SAME**

4 WELL DEPTH: (completed) **50 ft.** Date of Completion **6/10/77**

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 **1** ft.
2 in. to **47** 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 - CLAY	20	20
SAND	30	50
Very Fine SAND	50-	?

8 SCREEN: Type: **836-10 STAINLESS** Dia.: **1 1/4"**
 Slot/Gauze **10** Length: **3 Foot**
 Set between **47** ft. and **50** ft.
 Fittings: _____

9 STATIC WATER LEVEL
14 ft. below land surface

10 PUMPING LEVEL below land surface
14 ft. after **1** hrs. pumping **20** 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
75 feet **S** Direction **SEPTIC** Type
 Well disinfected upon completion Yes No

15 PUMP: Not installed
 Manufacturer's Name **MEYERS**
 Model Number **HJ 50** HP **1/2** Volts **120**
 Length of Drop Pipe **30** ft. capacity **7** G.P.M.
 Type: Submersible Jet Reciprocating

USE A 2ND SHEET IF NEEDED

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.
Robert M. Haney 0340
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **4926 MAYCREST, PONTIAC**
 Signed Robert M. Haney Date **6/10/77**
 AUTHORIZED REPRESENTATIVE

MAR 27 1978

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Fraction SW 1/4 NW 1/4 SE 1/4	Section Number 21	Town Number T3 N4S.	Range Number R8 E44.
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Distance And Direction from Road Intersections

590 Hillwood, Milford Mich

Street address & City of well Location

Locate with "X" in section below

Sketch Map:

3 OWNER OF WELL:
BILL JOHNS
Address **590 Hillwood**
MILFORD, MICH 48042

4 WELL DEPTH: (completed) Date of Completion
55 ft. **15 Sept 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 **1** ft.
Diam. **2** in. to **52** ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Sand	3'	3'
Clay	9'	12'
CLAY SAND	3'	15'
SAND & GRAVEL	16'	31'
SAND, GRAVEL & CLAY	2'	33'
Clay	12'	45'
CLAY & SAND	2	47'
SAND (WATER)	8'	55'

8 SCREEN:
Type: **JOHNSON** Dia.: _____
Slot/Screen **12** Length **3'**
Set between **52** ft. and **55** ft.
Fittings: **1' BLANK & BREMER**

9 STATIC WATER LEVEL
27 ft. below land surface

10 PUMPING LEVEL below land surface
40 ft. after **1** hrs. pumping **15** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

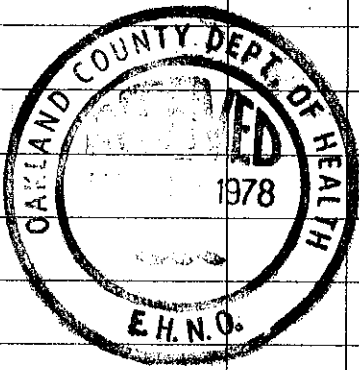
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
50 feet **W** Direction **Sytic** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

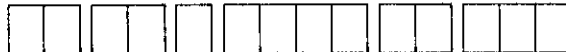
LOGGED INFO BY DRILLER, ITEM NO. _____
CORRECTED BY _____
ADDITION BY _____
ELEVATION _____
DEPTH TO ROCK _____

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.

Bill Johnson Drilling
REGISTERED BUSINESS NAME REGISTRATION NO. **0140**

Address **1055 Wynnwood Pontiac Mich**

Signed **Bill Johnson** Date **20 Sept 77**
AUTHORIZED REPRESENTATIVE



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL			3 OWNER OF WELL:		
County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <i>21</i>	Town Number <i>3 (N.S.)</i>	Range Number <i>8 (W.)</i>
Distance And Direction from Road Intersections <i>1/4 mi. West of M59 and Elizabeth Lake Rd intersection</i>			Address <i>George Connell 7745 Highland</i>		
Street address & City of Well Location Locate with "X" in section below			4 WELL DEPTH: (completed) Date of Completion <i>80 ft. 1-9-89</i>		
Sketch Map: 			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		
2 FORMATION			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		
			7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface _____ ft. Diam. <i>2 in.</i> to <i>27 ft.</i> Depth Weight _____ lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Sand gravel			8 SCREEN: Type: <i>Johnson</i> Dia.: <i>1 1/4</i> Slot/Gauze <i>12</i> Length <i>36'</i> Set between <i>77</i> ft. and <i>80</i> ft. Fittings:		
gray clay			9 STATIC WATER LEVEL <i>20</i> ft. below land surface		
gravel, clay			10 PUMPING LEVEL below land surface <i>26</i> ft. after <i>2</i> hrs. pumping <i>15</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.		
water bearing gravel			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____		
			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade		
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
			14 Nearest Source of possible contamination _____ feet Direction _____ Type _____ Well disinfected upon completion <input type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc. <i>RECEIVED Mich. Dept. of Public Health MAR 5 1989</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. <i>Wetters Pump & Well 63-1976</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>1051 Round LR Rd, Union Lake</i> Signed <i>Paul L. L...</i> Date <i>1-27-89</i> AUTHORIZED REPRESENTATIVE		

WATER WELL AND PUMP RECORD

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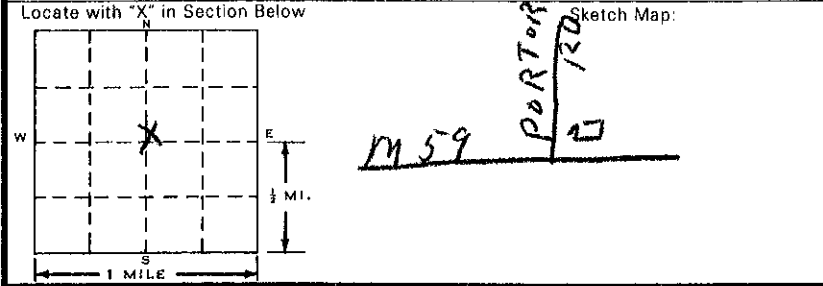
PERMIT NUMBER

1 LOCATION OF WELL					
County OAKLAND	Township Name WHITE LAKE	Fraction 1/4	Section Number 21	Town Number 3 N	Range Number 8 E

Distance And Direction From Road Intersection
NE CORNER OF M59 + PORTER RD

Street Address & City of Well Location

3 OWNER OF WELL:
ED S ESSHARI
Address **3625 DUPON DR**
STERLING HEIGHTS 48810
Address Same As Well Location? Yes No



4 WELL DEPTH: **84 FT.** Date Completed **8/89** New Well Replacement Well

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
0 - 15 SAND + GRAVEL	15	15
15 - 32 RED CLAY	17	32
32 - 60 SAND + CLAY	28	60
60 - 75 BLUE CLAY + SAND	15	75
75 - 80 BLUE CLAY	5	80
80 - 85 GRAVEL	5	85

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 Threaded Plastic Welded
Height: Above/Below Surface **1** ft.
Weight _____ lbs./ft.
Drive Shoe Yes No

8 SCREEN: Not installed
Type **JOHNSON** Diameter **1 1/2**
Slot/Groove **12** Length _____
Set between **80** ft and **85** ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **2** ft. Other _____

9 STATIC WATER LEVEL: **35** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
42 ft. after **1** hrs. pumping at **15** 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 _____ to _____ ft.
 Neat cement Bentonite Other _____
No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
Type **SPE TIC** Distance **85** 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 _____ Volts _____
Length of Drop Pipe **42** ft. capacity _____ G.P.M.
TYPE: Submersible Jet
PRESSURE TANK:
Manufacturer's name _____
Model number _____ Capacity _____ Gallons

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

17. Rig Operator's Name:

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.
B.W. LAYMAN & SONS INC 0406
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **4812 Eagle RD Highland MI**
Signed **Richard J. Layman** Date **10-9-89**
AUTHORIZED REPRESENTATIVE

RECEIVED
MICH. DEPT. OF PUBLIC HEALTH
NOV 29 1989
BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH SERVICES

WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL					
County Oakland	Township Name White Lake	Fraction SW 1/4 NW 1/4 SW 1/4	Section Number 21	Town Number 3 N/S	Range Number 8 E/W

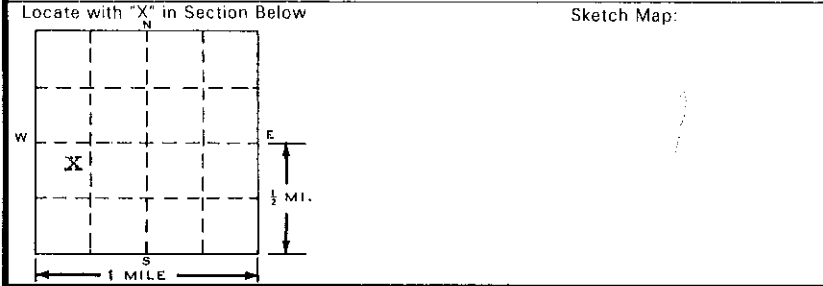
Distance And Direction From Road Intersection

Street Address & City of Well Location

3 OWNER OF WELL:
Burmeister

Address
705 Sunset

Address Same As Well Location? Yes No



4 WELL DEPTH: **53** FT. Date Completed **11/20/89** 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 Steel Plastic Threaded Welded

Height: Above ~~100~~ Surface **1** ft. Weight **10-40** lbs./ft.

Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
sand-gravel	33	33
clay-sand	10	43
sand-water	10	53

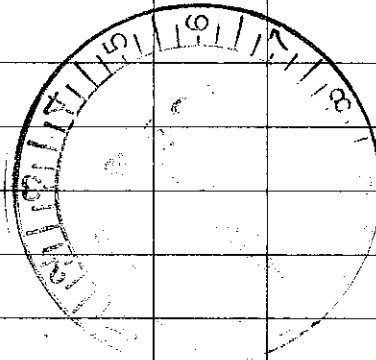
8 SCREEN: Not Installed
Johnson Type Diameter **3in.**
 Slot ~~3/32~~ **15** Length **48in.**
 Set between **49** ft. and **53** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **1** ft. Other _____

9 STATIC WATER LEVEL: 5 ft. below land surface <input type="checkbox"/> Flow
10 PUMPING LEVEL: below land surface 21 ft. after 1 hrs. pumping at 60 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 **30** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement **1/2** Additives _____

13 Nearest source of possible contamination Type septic Distance 500 ft. Direction west Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No
14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name Myres Model number _____ HP 1/2 Volts 220 Length of Drop Pipe 21 ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name Well-X-Trol Model number wx203 Capacity _____ Gallons



15. Remarks, elevation, source of data, etc.
Nitrates 0

17. Rig Operator's Name:
Ted Thayer

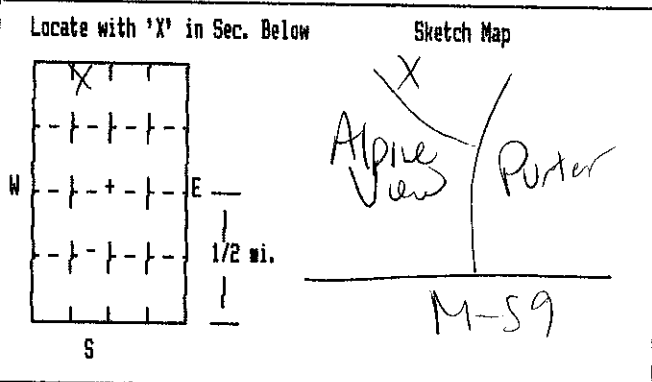
16. WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Fettig Well Drilling 0413
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **5575 Jackson Blvd. Davisburg 48019**
Signed *Jerry Fettig* Date **1-10-90**
AUTHORIZED REPRESENTATIVE

Authority: Act 388 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

1. LOCATION OF WELL
 County OAKLAND Township Name WHITE LAKE
 Fraction NW 1/4 NE 1/4 NW 1/4 Section No 21 Town No 3 N Range Number 8 E

Distance And Direction From Road Intersection
 WEST OF PORTER ON THE NORTH SIDE OF ALPINE VIEW COURT
 Well Addr: 7351 ALPINE VIEW COURT LOT 3



3. Owner of Well LARRY BAKER CUSTOM BUILDERS
 Address 7250 ALPINE VIEW COURT
 WHITE LAKE MI 48386
 Address Same as Well Location? NO

4. WELL DEPTH 120 ft. Date Compl 07/16/96 This is a: NEW WELL

5. EQUIPMENT USED: ROTARY
 6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
 Diam. 5 in. to 115 ft. Height ABOVE
 Surface 1 ft. Weight 1b./ft.
 Grouted Drill Hole Drive Shoe NO
 8 1/2 in. to 125 ft. Shale Packer NO
 in. to ft.

Formation Description	Thickness	Depth
YELLOW SAND	20	20
GRAY CLAY	25	45
GRAY GRAVEL	7	52
GRAY CLAY	58	110
GRAY GRAVEL	15	125

OAKLAND COUNTY HEALTH DIVISION
 AUG -6 P12-23
 '96

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 Mich. Dept. of Public Health
 OCT-10 1996

8. Screen Type: SLOTTED Diam: 5 [] Not Inst.
 SLOT 25 Length: 5
 Set Between 115 ft. and 120 ft.
 Fittings: [] Blank above scrns: ft

9. Static Level: 25 ft. Flow: [NI]

10. Pumping Level below land surface:
 115 ft. after 1 hrs. @ 50 GPM
 [] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: PITLESS ADAPTER

12. Grouted from 112 to 0 ft Material: BENSEAL
 Cement: 8 bags Additives: Supr Mud

13. Nearest source of possible contamination:
 Type: SEPTIC TANK Distance: 75 ft. Dir: SE
 Type: Distance: ft. Dir:

14. Pump: [] Not Installed [] Installation Only
 Manufacturer's Name: AEROMOTOR
 Model: 751250 HP: 0.75 Voltage: 230
 Drop pipe: 60 ft. Capacity: 18 GPM
 Pump type: SUBMERSIBLE
 Pressure Tank Manufacturer's Name : WELL X-TROL
 Model: 251 Capacity: 19 Gal.

15. Abandoned Well Plugged? NO
 Casing Diameter in. N/A
 Plugging Material: BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS
 No. of Bags Casing Removed?

16. Remarks, elevation, source of data, etc.
 PUMP - ANDY BIRCHMEIER

17. Drilling Machine Operator: [X] Employee [] Subcontractor
 Name SCOTT GRIFFIN

GW-2-228 9/93
 Authority: Act 368 PA 1978
 Completion: Required
 Penalty: Conviction of a violation of any provision is a misdemeanor.

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.
 Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
 Business Address 10455 Easton Road New Lothrop MI 48460
 Signed *Edward Birkmeier* 07/17/96
 Authorized Representative Date

NICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

TAX NO:

PERMIT NO: Page of
1 1

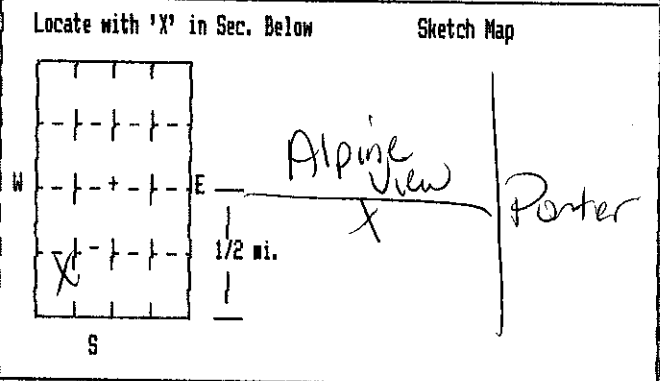
1. LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Fraction SW 1/4 NE 1/4 SW 1/4	Section No 21	Town No 3 N	Range Number 8 E
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Distance And Direction From Road Intersection
1/4 MILE WEST OF PORTER ROAD ON THE SOUTH SIDE OF PINE VIEW RD

Well Addr: 7500 ALPINE VIEW COURT LOT 9

3. Owner of Well LARRY BAKER CUSTOM BUILDERS
Address 7250 ALPINE VIEW COURT
WHITE LAKE MI 48386
Address Same as Well Location? NO



4. WELL DEPTH Date Compl This is a:
60 ft. 07/17/96 NEW WELL

5. EQUIPMENT USED: ROTARY
6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
Diam. Height ABOVE
5 in. to 52 ft. Surface 1 ft
in. to ft. Weight 1b./ft.
Grouted Drill Hole Drive Shoe NO
8 1/2 in. to 65 ft. Shale Packer NO
in. to ft.

Formation Description	Thickness	Depth
BROWN CLAY	10	10
GRAY CLAY	10	20
GRAVEL	10	30
GRAY CLAY	10	40
GRAY SAND	20	60
GRAY CLAY	5	65

8. Screen Type: SLOTTED Diam: 5 () Not Inst.
SLOT 15 Length: 7
Set Between 53 ft. and 60 ft.
Fittings: () Blank above scrn: ft

9. Static Level: 5 ft. Flow: (N)

10. Pumping Level below land surface:
58 ft. after 1 hrs. @ 25 GPM
() Plunger () Bailer (X) Air () Test Pump

11. Well Head Completion: PITLESS ADAPTER

12. Grouted from 52 to 0 ft Material: BENSEAL
Cement: 4 bags Additives: SUPER MUD

13. Nearest source of possible contamination:
Type: SEPTIC TANK Distance: 50 ft. Dir: WEST
Type: Distance: ft. Dir:

14. Pump: () Not Installed () Installation Only
Manufacturer's Name: AEROMOTOR
Model: A1275 HP: 0.75 Voltage: 230
Drop pipe: 40 ft. Capacity: 18 GPM
Pump type: SUBMERSIBLE
Pressure Tank Manufacturer's Name: WELL X-TROL
Model: 251 Capacity: 19 Gal.

15. Abandoned Well Plugged? NO
Casing Diameter in. Depth ft.
Plugging Material:
No. of Bags Casing Removed?

16. Remarks, elevation, source of data, etc.
PUMP - ANDY BIRCHMEIER

17. Drilling Machine Operator: (X) Employee () Subcontractor
Name BARRY BROWN

GW-2-228 9/93
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision
is a misdemeanor.

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.
Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
Business Address 10655 Easton Road New Lothrop MI 48460
Signed: *Edward Birkmeier* 07/18/96
Authorized Representative Date

OAKLAND COUNTY HEALTH DIVISION
96 AUG -6 P12-23
RECEIVED
Mich. Dept. of Public Health
OCT 10 1996
BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWDS

TAX NO:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

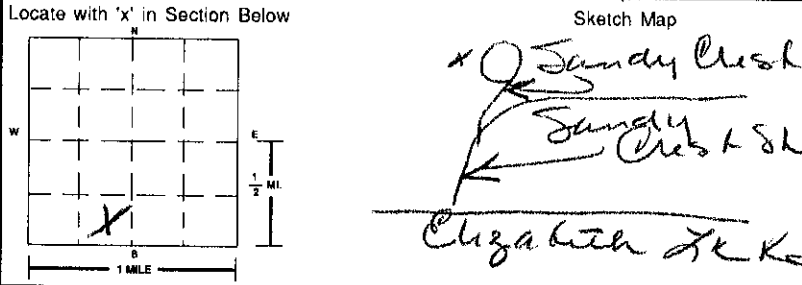
PERMIT NO:

1. LOCATION OF WELL
County Oakland

Township Name White Hk. Fraction NW 1/4 Sec 14 T4N R3E Section No. 31 Town No. 3W Range No. 8E

Distance and Direction from Road Intersection
2 1/2 mi. N. of Elizabeth St.
Rt.
Street Address & City of Well Location 8820 Sandy Crest Ct.

3. OWNER OF WELL
Address M. Jerry Dinkley
8820 Sandy Crest Ct.
White Hk. MI 48386
Address Same as Well Location Yes No



4. WELL DEPTH: 64 ft. Date Completed 6/6/96
 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 59 ft. depth Weight: 5012 lb/ft
_____ in. to _____ ft. depth

BORE HOLE: Drive Shoe Shale Packer
Diameter: 8 1/2 in. to 64 ft. depth
_____ in. to _____ ft. depth

8. SCREEN: Not Installed Gravel-Packed
Type Wire Wrapped Plastic Other _____
Slot/Gauze #15 Length: 5 ft.
Set Between 59 ft. and 64 ft.
FITTINGS: 1/2" Packer Bremer Check
 Blank Above Screen _____ ft. Other _____

9. STATIC WATER LEVEL: 17 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
58 ft. After 1/2 hrs. Pumping at 40 G.P.M.
 Plunger Bailer A/P Test Pump

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

12. WELL GROUTED? No Yes From 49 to 0 ft.
 Neat Cement Bentonite Other _____
No. of Bags 7 Additives C2 Mud.

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type Septic Distance 50 ft. Direction W.
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name Moulds
Model Number 123805 HP 1/2 Volts 115
Length of Drop Pipe 40 ft. Capacity 12 G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name Wau Betz
Model Number WR 120 Capacity 33 Gallons 105

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Brown Clay, Sand & Gravel</u>	<u>6'</u>	<u>6'</u>
<u>Brown Coarse Sand & Gravel</u>	<u>22'</u>	<u>28'</u>
<u>Gray Clay & Gravel</u>	<u>3'</u>	<u>31'</u>
<u>Blue Clay, (Dry)</u>	<u>5'</u>	<u>36'</u>
<u>Blue Clay, Sand & Gravel</u>	<u>20'</u>	<u>56'</u>
<u>(Gray, Black) Coarse Sand (Some Shell)</u>	<u>8'</u>	<u>64'</u>

OAKLAND COUNTY HEALTH DIVISION
96 OCT -3 P12:19
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Mich. Dept. of Public Health
NOV 06 1996
BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter 2 in. Depth ? ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags 1 1/2 Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)
well to corroded to measure

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name J. Ward

15. 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.
J. Ward & Son Inc.
REGISTERED BUSINESS NAME 0058 REGISTRATION NO.
Address 6458 E. Washington, Clarkston
Signed J. Ward, P.E. Date 6/6/96
AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL				
County OAKLAND	Township Name WHITE LAKE	Fraction 1/4	Section Number 21	Town Number 3 N
Range Number 8 E				

Distance And Direction From Road Intersection
N-E CORNER M59+ PORTOR

Street Address & City of Well Location
Locate with "X" in Section Below

Sketch Map:

3 OWNER OF WELL:
ED ESSHAKI
Address **3625 DUPON DR STERLING HEIGHTS 48310**

Address Same As Well Location? Yes No

4 WELL DEPTH: _____ FT. Date Completed MO. DAY YEAR

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 Steel Threaded Plastic Welded

Height: Above/Below Surface _____ ft.
Weight _____ lbs./ft.

Grouted Drill Hole Diameter _____ in. to _____ ft. depth
Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
2 IN WELL PLUGGED		
58 FT PUMPED		
BOTTOM TO TOP		
TYPE A CEMENT		

8 SCREEN: Not Installed

Type _____ Diameter _____

Slot/Gauze _____ Length _____

Set between _____ ft. and _____ ft.

FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

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

10 PUMPING LEVEL: below land surface _____ 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 **58** ft.

Neat cement Bentonite Other **TYPE A WATER**

No. of bags of cement **25** Additives _____

13 Nearest source of possible contamination Type _____ 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 _____

Model number _____ HP _____ Volts _____

Length of Drop Pipe _____ ft. capacity _____ G.P.M.

TYPE: Submersible Jet

PRESSURE TANK: Manufacturer's name _____

Model number _____ Capacity _____ Gallons

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

17. Rig Operator's Name:

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.

B.W. Layman & Son's Inc. 0406
 REGISTERED BUSINESS NAME REGISTRATION NO.

Address **4812 EAGLE HIGHLAND DR**

Signed **Richard [Signature]** Date **10-9-89**

AUTHORIZED REPRESENTATIVE

RECEIVED
 Mich. Dept. of Public Health
 NOV 29 1989
 DIVISION OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-SWDS

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

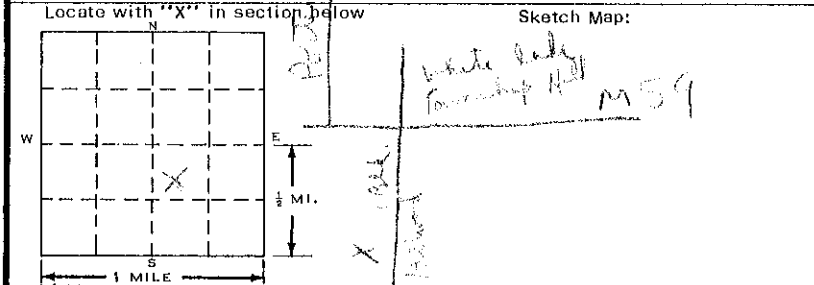
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County <i>DuRoch</i>	Township Name <i>White Lake</i>	Fraction <i>SE 1/4 NW 1/4 E 1/4</i>	Section Number <i>321</i>	Town Number <i>31 N.S.</i>	Range Number <i>8 E/W.</i>
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Distance And Direction from Road Intersections

Street address & City of Well Location



3 OWNER OF WELL:
Address *Cyacki*
853 H. Road

4 WELL DEPTH: (completed) Date of Completion
68 ft. *9-21-88*

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. _____
Height: Above/Below Surface _____ ft.
Weight _____ lbs./ft.
Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>gravel</i>		<i>20</i>
<i>gray sand</i>	<i>20</i>	<i>25</i>
<i>clay</i>	<i>25</i>	<i>37</i>
<i>partly sand</i>	<i>37</i>	<i>57</i>
<i>white heavy sand</i>	<i>57</i>	<i>68</i>

8 SCREEN:
Type: *Johnson* Dia.: *1 1/4*
Slot/Gauze *10* Length *36*
Set between *65* ft. and *68* ft.
Fittings:

9 STATIC WATER LEVEL
24 ft. below land surface

10 PUMPING LEVEL below land surface
40 ft. after *2* hrs. pumping *20* 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
50 feet *E* Direction *Septic* Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

Handwritten notes and signatures in this section.

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.
ACT. S. Pumpwell *603 1976*
REGISTERED BUSINESS NAME REGISTRATION NO.
Address *1051 Road 101 Rd. Hamlet*
Signed *Randy K. ...* Date *12-1-88*
AUTHORIZED REPRESENTATIVE

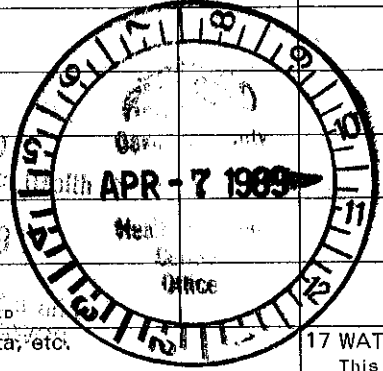
WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL			
County Oakland	Township Name White Lake	Fraction NW 1/4 SE 1/4	Section Number 21
Distance And Direction from Road Intersections 3 blocks South on Elkinford off M-59 on the left. 440 ELKINFORD		Town Number 3N N/S.	
Street address & City of Well Location 440 ELKINFORD		Range Number 8E E/W.	
Locate with "X" in section below		Sketch Map:	
2 FORMATION		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown & Blue clay		32	32
Fine dirty sand		33	65
GRAVEL & CLAY		11	76
SAND		3	79
3 OWNER OF WELL:			
Address Dimitri SITAR 440 ELKINFORD WILKINSON			
4 WELL DEPTH: (completed) Date of Completion			
79 ft. 2-1-88			
5			
<input type="checkbox"/> Cable tool <input checked="" 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"/>			
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. 5 in. to 75 ft. Depth		Height: Above/Below Surface 1 ft.	
_____ in. to _____ ft. Depth		Weight 5021 lbs./ft.	
Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
8 SCREEN:			
Type: Stainless Dia.: 3"			
Slot/Gauge 12 Length 4'			
Set between 75 ft. and 79 ft.			
Fittings: K-Packer 3 1'-Tail			
9 STATIC WATER LEVEL			
22 ft. below land surface			
10 PUMPING LEVEL below land surface			
30' ft. after 1 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: <input type="checkbox"/> In Approved Pit			
<input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade			
13 Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Neat Cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Bentonite			
Depth: From Top ft. to 60 ft.			
14 Nearest Source of possible contamination			
50 feet East Direction Septic Type			
Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15 PUMP: <input type="checkbox"/> Not installed			
Manufacturer's Name RED TACKET			
Model Number 762 HP 1/2 Volts 220			
Length of Drop Pipe 40 ft. capacity 12 G.P.M.			
Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating			
16 Remarks, elevation, source of data, etc.			
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.			
RAY LALONE Well Drilling 0140			
REGISTERED BUSINESS NAME		REGISTRATION NO.	
Address 3155 Oakhill Clarkson MI 48016			
Signed Ray Lalone		Date 2/1/88	
AUTHORIZED REPRESENTATIVE			

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Mich. Dept. of Public Health
APR 13 1989



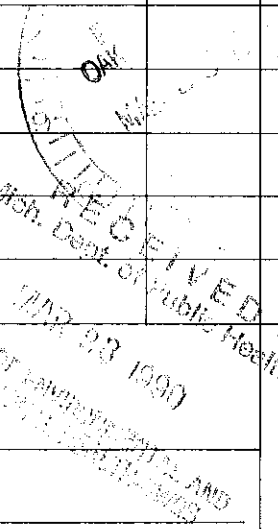
USE A 2ND SHEET, IF NEEDED

WATER WELL AND PUMP RECORD

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PERMIT NUMBER

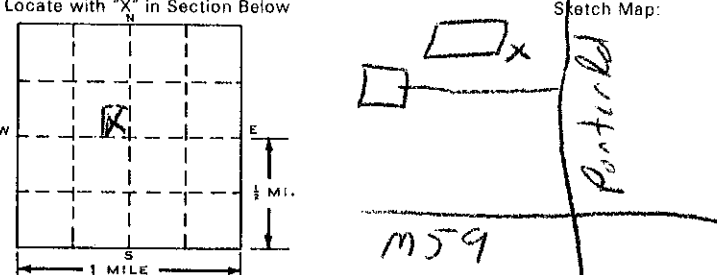
1 LOCATION OF WELL		
County <u>Oakland</u>	Township Name <u>White Lake</u>	Fraction <u>SW 1/4 NW 1/4 SE 1/4</u>
		Section Number <u>21</u>
		Town Number <u>3</u> (NS)
		Range Number <u>8</u> (EW)
Distance And Direction From Road Intersection		
Street Address & City of Well Location		
Locate with "X" in Section Below		
<div style="display: flex; align-items: center;"> <div style="border: 1px dashed black; padding: 5px; margin-right: 10px;"> <p style="font-size: small;">Sketch Map:</p> </div> <div style="margin-left: 10px;"> <p><u>Highland Rd.</u></p> <p><u>Hillwood</u></p> </div> </div>		
2 FORMATION DESCRIPTION		THICKNESS OF STRATUM
		DEPTH TO BOTTOM OF STRATUM
<u>Brown sand</u>		<u>5</u>
<u>gravel</u>		<u>12</u>
<u>clay</u>		<u>17</u>
<u>fine grey sand</u>		<u>18</u>
<u>water sand</u>		<u>35</u>
		<u>8</u>
		<u>43</u>
		<u>6</u>
		<u>49</u>
3 OWNER OF WELL:		
Address <u>Payne</u>		
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4 WELL DEPTH: <u>49</u> FT. Date Completed <u>10-2-89</u>		
<input type="checkbox"/> New Well <input checked="" type="checkbox"/> Replacement Well		
5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Dug		
<input checked="" 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"/> Height: Above/Below		
<input type="checkbox"/> Plastic <input type="checkbox"/> Welded		
<u>2</u> in. to <u>46</u> ft. depth		
<u>1 1/4</u> in. to <u>49</u> ft. depth		
Grouted Drill Hole Diameter		
Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8 SCREEN: <input type="checkbox"/> Not Installed		
Type <u>Johnson</u> Diameter <u>1 1/4</u>		
Slot/Gauze <u>10</u> Length <u>36"</u>		
Set between <u>46</u> ft. and <u>49</u> ft.		
FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input checked="" type="checkbox"/> Bremer Check		
<input type="checkbox"/> Blank above screen _____ ft. Other _____		
9 STATIC WATER LEVEL: <u>23</u> ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface		
<u>40</u> ft. after <u>2</u> hrs. pumping at <u>15</u> 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 checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____		
No. of bags of cement <u>1</u> Additives _____		
13 Nearest source of possible contamination		
Type <u>septic</u> Distance <u>50</u> ft. Direction <u>W</u>		
Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was old well plugged? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only		
Manufacturer's name _____		
Model number _____ HP _____ Volts _____		
Length of Drop Pipe _____ ft. capacity _____ G.P.M.		
TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____		
PRESSURE TANK: Manufacturer's name _____		
Model number _____ Capacity _____ Gallons		
USE A 2ND SHEET IF NEEDED		
15. Remarks, elevation, source of data, etc.		
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.		
REGISTERED BUSINESS NAME <u>Fether's Pump Well</u> REGISTRATION NO. <u>3-197</u>		
Address <u>251 Board St. White Lake</u>		
Signed <u>Randy K. Gurnea</u> Date <u>8-1-89</u>		
AUTHORIZED REPRESENTATIVE		



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 <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>SW 1/4 Sec 21</i>
Distance And Direction From Road Intersection <i>north of M59 on Porter Rd west side of rd</i>		Section Number <i>21</i>
Street Address & City of Well Location Locate with "X" in Section Below		Town Number <i>3 NB</i>
		Range Number <i>8 E/W</i>
2 FORMATION DESCRIPTION		
	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Brown Sand & Gravel</i>	<i>60</i>	<i>60</i>
<i>Blue Clay</i>	<i>15</i>	<i>75</i>
<i>Fine Dirty Grey Sand</i>	<i>8</i>	<i>83</i>
<i>Grey Petty Sand</i>	<i>9</i>	<i>92</i>
<i>Med Fine Grey Sand</i>	<i>4</i>	<i>94</i>
<i>Coarse Grey Gravel</i>	<i>1</i>	<i>97</i>
3 OWNER OF WELL: <i>Bill Dunham</i>		
Address <i>985 Porter Rd White Lake Mich.</i>		
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
4 WELL DEPTH: <i>97</i> FT.	Date Completed MO. DAY YEAR <i>1 30 89</i>	<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 <input type="checkbox"/> Jatted <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 type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Welded	Height: <input checked="" type="checkbox"/> Above <input type="checkbox"/> Below Surface <i>1</i> ft. Weight <i>10.79</i> lbs./ft.	
<i>4</i> in. to <i>93</i> ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth _____ in. to _____ ft. depth	Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8 SCREEN: <input type="checkbox"/> Not Installed Type <i>Stainless</i> Diameter <i>3 5/8"</i> Slot/Gauze <i>10</i> Length <i>4'</i> Set between <i>93</i> ft. and <i>97</i> ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input 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>50</i> ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface <i>53</i> ft. after <i>2</i> hrs. pumping at <i>20</i> G.P.M. _____ ft. after _____ hrs. pumping at _____ 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes From <i>10</i> to <i>60</i> ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement <i>7</i> Additives _____		
13 Nearest source of possible contamination Type <i>septic</i> Distance <i>65</i> ft. Direction <i>w</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <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>Myers</i> Model number <i>50</i> HP <i>1/2</i> Volts <i>230</i> Length of Drop Pipe <i>63</i> ft. capacity <i>10</i> G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name <i>Welltek</i> Model number <i>203</i> Capacity <i>80</i> Gallons		

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

17. Rig Operator's Name:
Richard Hayman Jr 63-1920

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.

B. Whayman & Sons 0406
REGISTERED BUSINESS NAME REGISTRATION NO.

Address: *4812 E. 9th Rd*

Signed: *[Signature]* Date: *1-30-89*

AUTHORIZED REPRESENTATIVE

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

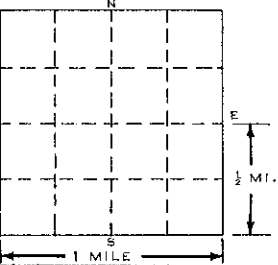

1 LOCATION OF WELL			3 OWNER OF WELL:		
County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>NE 1/4 NW 1/4 SE 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N 8</i>	Range Number <i>8 E</i>
Distance And Direction From Road Intersection <i>1/4 mi S of M-59 on W side of Elksford</i>			Address <i>2254 E Highland Rd Highland</i>		
Street Address & City of Well Location <i>773 Elksford Milford Mi.</i>			Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Locate with "X" in Section Below			Date of Completion <i>3/20/86</i>		
			4 WELL DEPTH: (completed) <i>66 ft.</i>		
			5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input checked="" 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. Weight <i>3.75</i> lbs./ft.		
			Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
2 FORMATION DESCRIPTION			8 SCREEN:		
			<input type="checkbox"/> Not Installed Type <i>Stainless</i> Diameter <i>1 1/4</i> Slot/Screen <i>10</i> Length <i>3</i> Set between <i>63</i> ft and <i>66</i> ft.		
<i>Gravel & Stones</i> <i>15</i> <i>15</i>			FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input checked="" type="checkbox"/> Bremer Check <input checked="" type="checkbox"/> Blank above screen <i>1</i> ft. Other _____		
<i>Br. sand & Br. Clay</i> <i>20</i> <i>35</i>			9 STATIC WATER LEVEL:		
<i>Br. sand.</i> <i>31</i> <i>66</i>			<i>42</i> ft. below land surface <input type="checkbox"/> Flow		
			10 PUMPING LEVEL: below land surface		
			<i>50</i> ft. after <i>1</i> hrs. pumping at <i>10</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"/> 4" 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 <i>Septic</i> Distance <i>60</i> ft. Direction <i>W</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			14 PUMP:		
			<input type="checkbox"/> Not Installed <input checked="" type="checkbox"/> Pump Installation Only Manufacturer's name <i>Gould</i> Model number <i>6507</i> HP <i>3/4</i> Volts <i>220</i> Length of Drop Pipe <i>50</i> ft. capacity <i>6</i> G.P.M. TYPE: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Jet <i>Deep Well</i> PRESSURE TANK: <i>Well-x-Trol</i> Manufacturer's name _____ Model number <i>202</i> Capacity <i>42</i> Gallons		
USE A 2ND SHEET IF NEEDED					
15. Remarks, elevation, source of data, etc.			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>Ernest C. Mours 63-1154</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>840 N. Antwerp Highland</i> Signed <i>Michael Mours</i> Date <i>3/28/86</i> AUTHORIZED REPRESENTATIVE		

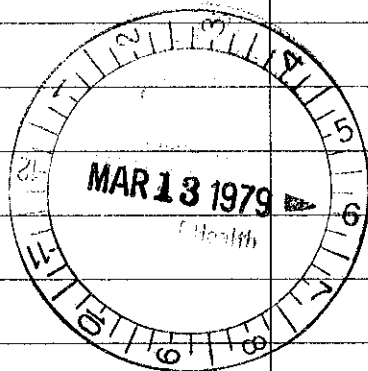
RECEIVED
 Mich. Dept. of Public Health
AUG 11 1986
 Bureau of Environmental and Occupational Health/GWQS

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 Oakland	Township Name White Lake	Fraction 1/4 1/4 1/4	Section Number 21	Town Number 3 N N/S.	Range Number 8 E E/W.																														
Distance And Direction from Road Intersections						3 OWNER OF WELL:																													
Street address & City of Well Location Same						Address Dick Reimer 7107 Sunset Ct. Milford, Mich. 48042																													
Locate with "X" in section below 						Sketch Map: Parcel 5 Lots 253-254																													
2 FORMATION						4 WELL DEPTH: (completed) Date of Completion 64 ft. June 7, 1978																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">FORMATION</th> <th style="width: 10%;">THICKNESS OF STRATUM</th> <th style="width: 10%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td>Brown clay</td> <td style="text-align: center;">8</td> <td style="text-align: center;">8</td> </tr> <tr> <td>Fine sand</td> <td style="text-align: center;">10</td> <td style="text-align: center;">18</td> </tr> <tr> <td>Med. brown sand</td> <td style="text-align: center;">21</td> <td style="text-align: center;">39</td> </tr> <tr> <td>Blue clay</td> <td style="text-align: center;">7</td> <td style="text-align: center;">46</td> </tr> <tr> <td>Blue clay/stones</td> <td style="text-align: center;">8</td> <td style="text-align: center;">54</td> </tr> <tr> <td>Sand/gravel/blue clay</td> <td style="text-align: center;">5</td> <td style="text-align: center;">59</td> </tr> <tr> <td>Water sand/gravel</td> <td style="text-align: center;">5</td> <td style="text-align: center;">64</td> </tr> </tbody> </table>						FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Brown clay	8	8	Fine sand	10	18	Med. brown sand	21	39	Blue clay	7	46	Blue clay/stones	8	54	Sand/gravel/blue clay	5	59	Water sand/gravel	5	64	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"/>					
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8 SCREEN: Johnson Stainless Dia.: 1 1/2 in. Slot/Gauze 10 slot Length 3 ft. Set between 61 ft. and 64 ft. Fittings: 5 ft. tailpiece - Bremer check						9 STATIC WATER LEVEL 12 ft. below land surface																													
10 PUMPING LEVEL below land surface _____ ft. after 1 hrs. pumping 15 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade						13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.																													
14 Nearest Source of possible contamination _____ feet _____ Direction _____ Type _____ Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name Myers Model Number HJ 50S HP 1/2 Volts 115 Length of Drop Pipe 21 ft. capacity _____ 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 B **ADDITION BY B 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. Lloyd L. Wyckoff 0705 REGISTERED BUSINESS NAME REGISTRATION NO. Address 160 Polyvadera-Union Lake, Mich. 48085 Signed  Date 1-8-79 AUTHORIZED REPRESENTATIVE																													





✓ APR 25 1978

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

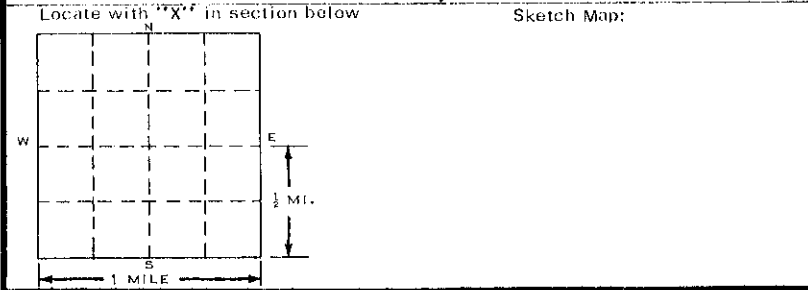
1 LOCATION OF WELL

County <i>Oakland</i>	Township Name <i>White Lake Twp.</i>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number <i>21</i>	Town Number <i>3 N.E.</i>	Range Number <i>8 E.W.</i>
--------------------------	---	---	-----------------------------	------------------------------	-------------------------------

Distance And Direction from Road Intersections

Street address & City of Well Location
684 Charlton

3 OWNER OF WELL:
Address
Duichristy Miller
3195 Union Rd. Rd.
Union Rd 48085



4 WELL DEPTH: (completed) *52'* ft. Date of Completion *9/77*

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Borod

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

7 CASING: Threaded Welded
Diam. *2"* in. to ___ ft. Depth
Height: Above/Below Surface ___ ft.
Weight ___ lbs./ft.
Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
-----------	----------------------	----------------------------

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Red Clay.</i>		<i>21'</i>
<i>Sand, Gravel + Clay.</i>	<i>15'</i>	<i>36'</i>
<i>Blue Clay</i>	<i>10'</i>	<i>46'</i>
<i>Water Sand.</i>		<i>52'</i>

8 SCREEN: Type: *RED HEAD* Dia.: *1 1/2"*
Slot/Screen *10* Length *4'*
Set between *48* ft. and *52* ft.
Fittings: *DREAMER CHECK*

9 STATIC WATER LEVEL *35* 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 Adapter 12" Above Grade

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

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

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

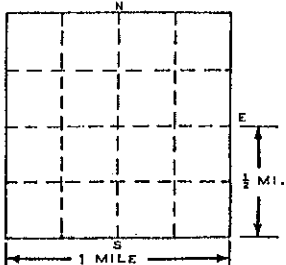
ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY *B*
**ADDITION BY *B*
ELEVATION _____
DEPTH TO ROCK _____

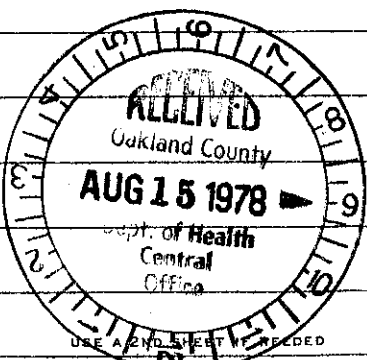
17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
J. Ward REGISTERED BUSINESS NAME REGISTRATION NO. *0058*
Address *6255 CRANKMANE CHARLSTON*
Signed *J. Ward* AUTHORIZED REPRESENTATIVE Date *9/77*

AUG 17 1978

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL														
County <u>Oakland</u>	Township Name <u>White Lake</u>	Fraction <u>1/4</u> <u>1/4</u> <u>1/4</u>	Section Number <u>21</u>	Town Number <u>3</u> N/W	Range Number <u>8</u> E/W									
Distance And Direction from Road Intersections <u>500' South off M-59</u>			3 OWNER OF WELL: <u>FRANK GOSHA</u>											
Street address & City of Well Location <u>812 Charlton, Milford</u>			Address <u>812 Charlton</u>											
Locate with "X" in section below 			4 WELL DEPTH: (completed) Date of Completion <u>58 ft.</u> <u>4/30/78</u>											
2 FORMATION			5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" 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"/>											
THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM			7 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: Above/Below Surface <u>1</u> ft. Weight _____ lbs./ft. Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>											
			8 SCREEN: Type: <u>STAINLESS SLOT</u> Dia.: <u>1 1/2"</u> Slot/Gauze <u>12</u> Length <u>3'</u> Set between <u>55</u> ft. and <u>58</u> ft. Fittings: _____											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;"><u>CLAY & SAND</u></td> <td style="width: 15%;"><u>20</u></td> <td style="width: 15%;"><u>20</u></td> </tr> <tr> <td><u>Loam Clay</u></td> <td><u>15</u></td> <td><u>35</u></td> </tr> <tr> <td><u>SAND & GRAVEL</u></td> <td><u>23</u></td> <td><u>58</u></td> </tr> </table>			<u>CLAY & SAND</u>	<u>20</u>	<u>20</u>	<u>Loam Clay</u>	<u>15</u>	<u>35</u>	<u>SAND & GRAVEL</u>	<u>23</u>	<u>58</u>	9 STATIC WATER LEVEL <u>35</u> ft. below land surface		
<u>CLAY & SAND</u>	<u>20</u>	<u>20</u>												
<u>Loam Clay</u>	<u>15</u>	<u>35</u>												
<u>SAND & GRAVEL</u>	<u>23</u>	<u>58</u>												
			10 PUMPING LEVEL below land surface <u>35</u> ft. after <u>1</u> hrs. pumping <u>20</u> 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade											
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.											
			14 Nearest Source of possible contamination <u>50</u> feet <u>N</u> Direction <u>SUPPLY</u> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
			15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name <u>Meyers</u> Model Number <u>VIM450</u> HP <u>1/2</u> Volts <u>110</u> Length of Drop Pipe <u>42</u> ft. capacity <u>8</u> G.P.M. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating											
16 Remarks, elevation, source of data, etc.			17 WATER WELL CONTRACTOR'S CERTIFICATION:											
ADDED INFO BY DRILLER, ITEM NO. *CORRECTED BY <u>B</u> **ADDITION BY _____ ELEVATION _____ DEPTH TO ROCK _____			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Robert M. Hixney</u> <u>0340</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>4926 Marquette Blvd., No. 48254</u> Signed <u>Robert M. Hixney</u> Date <u>5/17/78</u> AUTHORIZED REPRESENTATIVE											



JUL 28 1978

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name White Lake	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Section Number 21	Town Number 5 N.B.	Range Number 8 E.W.
--------------------------	------------------------------------	---	-----------------------------	------------------------------	-------------------------------

Distance And Direction from Road Intersections
500' South off M-59

Street address & City of Well Location
812 CHARLTON, MILFORD

Locate with "X" in section below Sketch Map:

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
CLAY & SAND	20	20'
Blue Clay	15	35
SAND & GRAVEL	23	58

3 OWNER OF WELL: **FRANK GOSHA**
Address **812 CHARLTON**

4 WELL DEPTH: (completed) **58 ft.** Date of Completion **4/30/78**

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. _____ Height: Above/Below Surface **1** ft. Weight _____ lbs./ft. Drive Shoe? Yes No

8 SCREEN: Type: **STAINLESS SLOT** Dia.: **1 1/4"**
Slot/Gauze **12** Length **3'**
Set between **55** ft. and **58** ft.
Fittings: _____

9 STATIC WATER LEVEL
35 ft. below land surface

10 PUMPING LEVEL below land surface
35 ft. after **1** hrs. pumping **20** 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
50 feet **N** Direction **SEPTIC** Type _____
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **Meyers**
Model Number **VMH50** HP **1/2** Volts **110**
Length of Drop Pipe **42** ft. capacity **8** 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.

Robert M. Haney **0340**
REGISTERED BUSINESS NAME REGISTRATION NO.

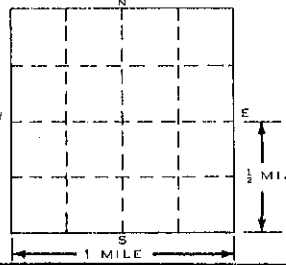
Address **4926 MAUREST Pontiac 48054**

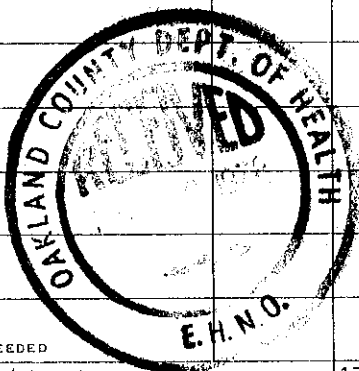
Signed **Robert M. Haney** Date **5/17/78**
AUTHORIZED REPRESENTATIVE

2 APR 27 1977

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		3 OWNER OF WELL:	
County Oakland	Township Name White Lake	Fraction $\frac{1}{4} \frac{1}{4} \frac{1}{4}$	Section Number 21 Town Number T3N N/S. Range Number R8E E/W.
Distance And Direction from Road Intersections 90' North of Taylor Trail & 135' West of Sunset		Address Ron Green 485 Sunset Milford, Michigan	
Street address & City of Well Location 485 Sunset, Milford Locate with "X" in section below 		4 WELL DEPTH: (completed) 95 ft. Date of Completion 9-22-77	
2 FORMATION		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"/>	
THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	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"/>	
Sand and caly brown	18'	7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface 1 ft.	
Sand brown	17'	4 in. to 91 ft. Depth Weight 11.00 lbs./ft. in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Clay and gravel gray	18'	8 SCREEN: Type: Slot SS Dia.: 3" Slot size 7 Length 48" Set between 91 ft. and 96 ft. Fittings: Neoprene packer	
Gravel gray	1'	9 STATIC WATER LEVEL 38 ft. below land surface	
Sand muddy gray	27'	10 PUMPING LEVEL below land surface 80 ft. after 2 hrs. pumping 20 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.	
Sand fine gray	14'	11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____	
		12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade	
		13 Well Grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Clay slurry Depth: From 0 ft. to 25 ft.	
		14 Nearest Source of possible contamination 50 feet West Direction Septic Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name Red Jacket Model Number 100N1 8CC HP 1 Volts 220 Length of Drop Pipe 70 ft. capacity 18 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating	
16 Remarks, elevation, source of data, etc. ADDED INTO 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. Neds Water Well Works Inc. 0756 REGISTERED BUSINESS NAME REGISTRATION NO. Address 2372 Dexter Road, Pontiac, Michigan Signed <i>J. H. Niedzelski</i> Date 10-27-77 AUTHORIZED REPRESENTATIVE	



3 MAY 11 1977



WATER WELL RECORD
ACT 294 PA 1965

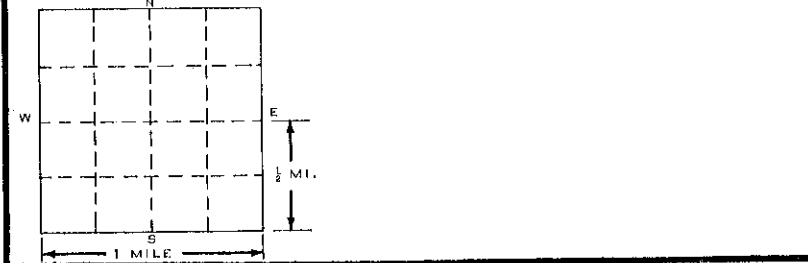
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Oakland	Township Name White Lake	Fraction SW 1/4 SW 1/4 ne 1/4	Section Number 21	Town Number 3 N/S.	Range Number 8 E/W.
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Distance And Direction from Road Intersections
75 Ft. w. of Taylor Trail
1000 Ft. W. of Sunset Dr.

Street address & City of Well Location
Taylor Trail



3 OWNER OF WELL:
Lilley Homes
Address

4 WELL DEPTH: (completed) Date of Completion
51 ft. **2-25-77**

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 **1** ft.
Weight **3.75** lbs./ft.
2 in. to **47** ft. Depth
in. to ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
-------------	----------------------	----------------------------

Stood pipe in clay drove		
p ip		30
Clay and Gravel	15	45
Water Gravel	6	51

8 SCREEN:
Type: **slotted** Dia.: **1 1/4**
Slot/Gauze **12** Length **4 ft.**
Set between **47** ft. and **50** ft.
Fittings: **2 In. Check**

9 STATIC WATER LEVEL
6 ft. below land surface

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

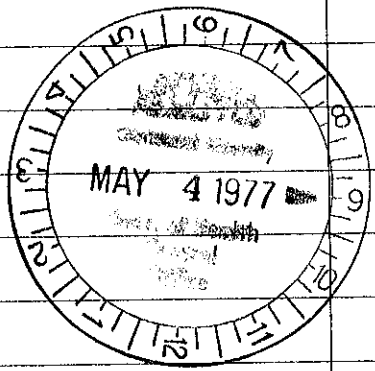
11 WATER QUALITY in Parts Per Million:
Iron (Fe) Chlorides (Cl)
Hardness Other

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

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

14 Nearest Source of possible contamination
50 feet **S** Direction **S. Tank** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name
Model Number HP Volts
Length of Drop Pipe ft. capacity G.P.M.
Type: Submersible
 Jet 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.
Fettig Well Drilling **0413**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **5575 Jackson Blvd. Davisburg, Mi.**
48019
Signed **George J. Fettig** Date **3-23-77**
AUTHORIZED REPRESENTATIVE

3 NOV 12 1976

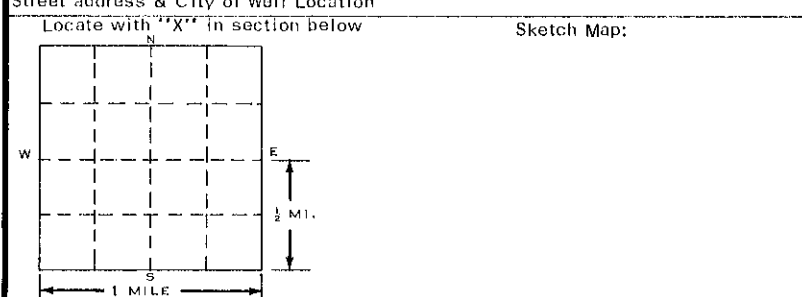
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>NW 1/4 NW 1/4 SW 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N/S.</i>	Range Number <i>8 E/W.</i>
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Distance And Direction from Road Intersections
40 ft. N. of Moorcroft St.
175 ft. E. of Hillwood Drive
 Street address & City of Well Location
700 Hillwood



3 OWNER OF WELL:
 Address
Mr. Dangerfield
700 Hillwood
Milford

4 WELL DEPTH: (completed) Date of Completion
52 ft. *1-20-76*

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 *XXXX* ft.
 2 in. to 48 ft. Depth Weight *3.75* lbs./ft.
 _____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Stood pipe in clay - drove</i>		<i>18</i>
<i>Clay & Gravel</i>	<i>20</i>	<i>38</i>
<i>Clay</i>	<i>7</i>	<i>45</i>
<i>Water gravel</i>	<i>7</i>	<i>52</i>

8 SCREEN:
 Type: *Slotted* Dia.: *1 1/2"*
 Slot/Gauze *12* Length *4 ft.*
 Set between *48* ft. and *52* ft.
 Fittings: _____

9 STATIC WATER LEVEL
27 ft. below land surface

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

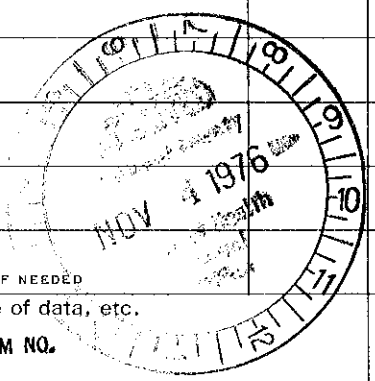
11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

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

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

14 Nearest Source of possible contamination
50 feet *W* Direction *septic tank* Type _____
 Well disinfected upon completion Yes No

15 PUMP: Not installed
 Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRILLER, ITEM NO. _____
 *CORRECTED BY _____
 **ADDITION BY *B*
 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.
Fetty Well Drilling *0413*
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address *1051 Round Lake Road*
 Signed *Jerry L. Fetty* Date *9-22-76*
 AUTHORIZED REPRESENTATIVE

3

SEP 17 1979

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

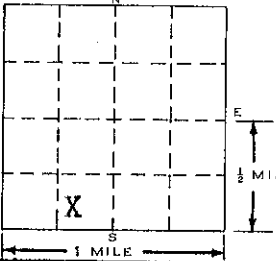
County Oakland	Township Name White Lake	Fraction SE 1/4 SW 1/4 NE 1/4	Section Number 21	Town Number 3 N/S.	Range Number 8 E/W.
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Distance And Direction from Road Intersections

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:

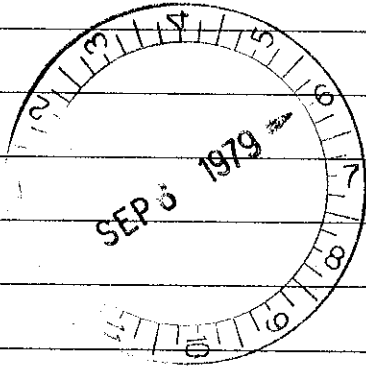


Lot 247
Brendel Heights

2 FORMATION

THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
----------------------	----------------------------

Yellow Sand		4
Gray Sand-Blue Clay	30	34
Med. Sand-Rocks-Water	20	54



16 Remarks, elevation, source of data, etc.

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

3 OWNER OF WELL:

Pat Alexander
380 Sunset

Address

4 WELL DEPTH: (completed)

54 ft. **4-29-79**

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. _____
 Height: Above/Below Surface _____ ft.
 Weight _____ lbs./ft.
 Drive Shoe? Yes No

8 SCREEN:

Type: **Johnson** Dia.: **3"**
 Slot: ~~xxx~~ **12** Length **48"**
 Set between **50** ft. and **54** ft.
 Fittings: **1ft. Nipple, K-Pack**

9 STATIC WATER LEVEL

Flow ft. below land surface

10 PUMPING LEVEL below land surface

31 ft. after **1** 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

50 feet **West** Direction **Septic** Type
 Well disinfected upon completion Yes No

15 PUMP:

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

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.

Fettig Well Drilling **0413**
 REGISTERED BUSINESS NAME REGISTRATION NO.

Address **5575 Jackson Blvd. Davisburg**

Signed **Jerry L. Fettig** Date **7-5-79**
 AUTHORIZED REPRESENTATIVE

JUN 13 1990



WATER WELL RECORD

ACT 294 PA 1965

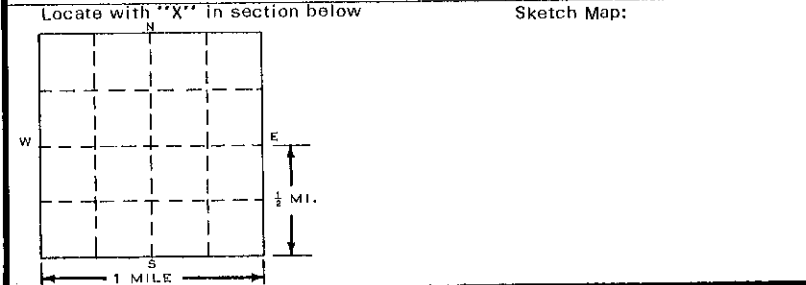
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Oakland	Township Name White Lake	Fraction SE 1/4 SW 1/4 NE 1/4	Section Number 21	Town Number 3 N/S.	Range Number 8 E/W.
--------------------------	------------------------------------	---	-----------------------------	------------------------------	-------------------------------

Distance And Direction from Road Intersections
1/4 mile S. of M59
75 ft. W. of Elkinford

Street address & City of Well Location



3 OWNER OF WELL:

Allen
 Address **601 Elkinford**

4 WELL DEPTH: (completed)

66 ft. Date of Completion **7-11-79**

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"/> _____

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		

7 CASING: Threaded Welded

Height: Above/Below Surface 1 ft.
 Weight 1079 lbs./ft.
 Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Set Pipe in		
Clay & Gravel	30	30
Drove		
Brown Sand & Gravel	25	55
Water & Gravel	11	66

8 SCREEN:

Type: S.S. Dia.: 3"
 Slot/Cave 10 Length 4 ft.
 Set between 62 ft. and 66 ft.
 Fittings:

9 STATIC WATER LEVEL

35 ft. below land surface

10 PUMPING LEVEL below land surface

60 ft. after 2 hrs. pumping 60 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

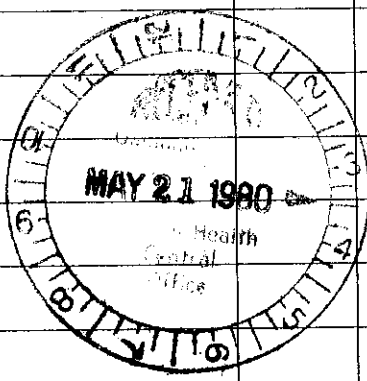
Neat Cement Bentonite _____
 Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination

50 feet West Direction Septic Type
 Well disinfected upon completion Yes No

15 PUMP:

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



16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRILLER ITEM NO.
 CORRECTED BY
 *ADDITION BY *B*
 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.
Fettig Well Drilling **0413**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **5575 Jackson Blvd., Davisburg**
 Signed *Jerry J. Fettig* Date **7-25-79**
 AUTHORIZED REPRESENTATIVE

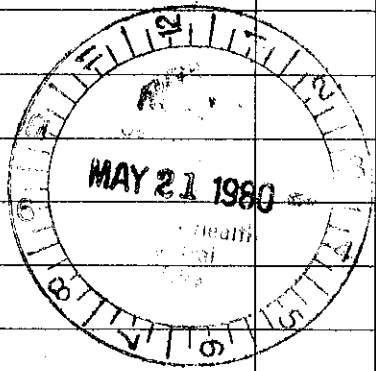
2 JUN 13 1990

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH



1 LOCATION OF WELL													
County Oakland		Township Name White Lake		Fraction NE 1/4 NE 1/4 NE 1/4		Section Number 21		Town Number 3 N/S.		Range Number 8 E/W.			
Distance And Direction from Road Intersections				3 OWNER OF WELL: Address Clarence T. Haus 1131 Lake Lane Milford, M I 48042									
Street address & City of Well Location				4 WELL DEPTH: (completed) Date of Completion 51 ft. 9-26-79									
Locate with "X" in section below				Sketch Map: 									
2 FORMATION Brown Clay Gray Sand-Blue Clay Coarse to Med. Sand&Gravel And WATER				THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM		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		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		7 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: Above/Below Surface _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
						4 _____ in. to _____ ft. Depth _____ in. to _____ ft. Depth		_____ ft. Depth _____ ft. Depth		_____ ft. Depth _____ ft. Depth		_____ ft. Depth _____ ft. Depth	
						8 SCREEN: Type: Johnson Dia.: 3" Slot: xxxx 15 Length 48" Set between 47 ft. and 51 ft. Fittings: 1ft. Nipple, K-Pack		9 STATIC WATER LEVEL 18 ft. below land surface		10 PUMPING LEVEL below land surface 30 ft. after 1 hrs. pumping 55 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade		13 Well Grouted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.		14 Nearest Source of possible contamination 50 feet NW Direction Septic Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name Valley Model Number _____ HP 1/2 Volts 220V Length of Drop Pipe _____ ft. capacity 12 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating	
						USE A 2ND SHEET IF NEEDED							
16 Remarks, elevation, source of data, etc. ADDED INFO BY <i>OWEN</i> CORRECTED BY <i>[Signature]</i> ADDITION BY <i>[Signature]</i> ELEVATION DATE TO PUMP				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. Fettig's Well Drilling 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 5575 Jackson Blvd., Davisburg Signed <i>Jerry L. Fettig</i> Date 11-22-79 AUTHORIZED REPRESENTATIVE									



MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

GEOLOGICAL SURVEY NO.

PERMIT NUMBER

1 LOCATION OF WELL		County <u>Oakland</u>		Township Name <u>White Ld</u>		Fraction <u>NENEWSE 1/4</u>		Section Number <u>21</u>		Town Number <u>3 N</u>		Range Number <u>8 E</u>	
Distance And Direction From Road Intersection <u>1/8 mi S of M 59 on Elkenford.</u>						3 OWNER OF WELL: Address <u>Elkenford.</u> Address Same As Well Location? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Street Address & City of Well Location Locate with "X" in Section Below						4 WELL DEPTH: <u>86</u> FT. Date Completed: _____ <input type="checkbox"/> New Well <input type="checkbox"/> Replacement Well							
Sketch Map: <u>Highland Rd. M59</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"/> Auger <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 IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public							
2 FORMATION DESCRIPTION				THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		7 CASING: Diameter <u>4</u> in. to <u>82</u> ft. depth <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Plastic <input type="checkbox"/> Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<u>Brown Clay + gravel</u>				<u>20</u>		<u>20</u>		8 SCREEN: <input type="checkbox"/> Not installed Type <u>Stainless Steel</u> Diameter <u>3"</u> Slot/Gauge <u>10</u> Length <u>4'</u> Set between <u>82</u> ft. and <u>86</u> ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input checked="" type="checkbox"/> Blank above screen <u>1</u> ft. Other _____					
<u>Rocks + gravel</u>				<u>5</u>		<u>25</u>		9 STATIC WATER LEVEL: <u>55</u> ft. below land surface <input type="checkbox"/> Flow					
<u>Brown Clay</u>				<u>15</u>		<u>40</u>		10 PUMPING LEVEL: below land surface <u>63</u> ft. after <u>1</u> hrs. pumping at <u>15</u> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.					
<u>Brown Sand some clay balls</u>				<u>12</u>		<u>52</u>		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					
<u>Yellow Sand</u>				<u>18</u>		<u>70</u>		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 _____					
<u>med. gray Sand</u>				<u>16</u>		<u>86</u>		13 Nearest source of possible contamination Type <u>Septic</u> Distance <u>55</u> ft. Direction <u>W</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No					
RECEIVED MICH. DEPT. OF PUBLIC HEALTH OCT 2 1986								14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name <u>Red Jacket</u> Model number <u>50WI</u> HP <u>1/2</u> Volts <u>220</u> Length of Drop Pipe <u>63</u> ft. capacity <u>8</u> G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: <u>Well XPro</u> Manufacturer's name _____ Model number <u>202</u> Capacity <u>42</u> Gallons					
								15. Remarks, elevation, source of data, etc. <u>USE A 2ND SHEET IF NEEDED</u>					
17. Rig Operator's Name:								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. <u>Ernest C. Morris 63-1154</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>840 N. Stutewale</u> Signed <u>Michael J. Morris</u> Date <u>10-16-86</u> AUTHORIZED REPRESENTATIVE					

WATER WELL AND PUMP RECORD

PART 127 ACT 368, P.A. 1978

PERMIT NUMBER

1 LOCATION OF WELL																																	
County Oakland	Township Name White Lake	Fraction 1/4 1/4 1/4	Section Number 21	Town Number 3	Range Number 8																												
Distance And Direction From Road Intersection 9851 Coledale Ct. (On Cedar Island Lake)			3 OWNER OF WELL: Ms. Ellen Miller Address 9851 Coledale Ct. Union Lake, MI 48085																														
Street Address & City of Well Location			Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																														
Locate with "X" in Section Below			4 WELL DEPTH: (completed) 72 ft. Date of Completion 11/15/84																														
Sketch Map: 			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"/>																														
2 FORMATION DESCRIPTION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">FORMATION DESCRIPTION</th> <th style="width: 15%;">THICKNESS OF STRATUM</th> <th style="width: 15%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr><td>Brown sand</td><td>12'</td><td>12'</td></tr> <tr><td>Yellow sand</td><td>24'</td><td>36'</td></tr> <tr><td>Sandy clay</td><td>8'</td><td>44'</td></tr> <tr><td>Stoney sand</td><td>4'</td><td>48'</td></tr> <tr><td>Sandy clay</td><td>9'</td><td>57'</td></tr> <tr><td>Gravelly hardpan</td><td>3'</td><td>60'</td></tr> <tr><td>Fine weatsand</td><td>12'</td><td>72'</td></tr> </tbody> </table>			FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Brown sand	12'	12'	Yellow sand	24'	36'	Sandy clay	8'	44'	Stoney sand	4'	48'	Sandy clay	9'	57'	Gravelly hardpan	3'	60'	Fine weatsand	12'	72'	7 CASING: Diameter <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded 4 in. to 63.8" ft. depth Height: Above/Below Surface 2'4" ft. Weight _____ lbs./ft. Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
			FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																												
			Brown sand	12'	12'																												
			Yellow sand	24'	36'																												
			Sandy clay	8'	44'																												
			Stoney sand	4'	48'																												
			Sandy clay	9'	57'																												
			Gravelly hardpan	3'	60'																												
Fine weatsand	12'	72'																															
8 SCREEN: Johnson stainless steel <input type="checkbox"/> Not Installed Type steel Diameter 4" Top 5' #15 Length 10' Bottom 5' #12 6861' 4" 72' ft.																																	
9 STATIC WATER LEVEL: 5 ft. below land surface <input type="checkbox"/> Flow																																	
10 PUMPING LEVEL: below land surface 82 ft. after 2 hrs. pumping at 23 G.P.M. _____ ft. after _____ hrs. pumping at _____ 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 unknown 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 Red Jacket Model number 100CN1-CN8CC HP 1 Volts 230 Length of Drop Pipe 42 ft. capacity 20 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name Wel-x-trol Model number WX252 Capacity 87 Gallons																																	
RECEIVED Mich. Dept. of Public Health DEC 12 1984 Bureau of Environmental and Occupational Health - GWQS USE A 2ND SHEET IF NEEDED			15. Remarks, elevation, source of data, etc.																														
			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. O.O. Corsaut, Inc. 0025 REGISTERED BUSINESS NAME REGISTRATION NO. Address 15101 W. 11 Mile Rd. Oak Park, MI 48237 Signed <i>O.O. Corsaut</i> Date 12/6/84 AUTHORIZED REPRESENTATIVE																														



DEC 11 1979

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL
 County **OAKLAND** Township Name **WHITE Hk** Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number **21** Town Number **30** Range Number **4** (E.W.)

Distance And Direction from Road Intersections
7715 459
 Street address & City of Well Location

Locate with "X" in section below

Sketch Map:

3 OWNER OF WELL:
 Address **MRS. LEE BROOKS**
7715 1159

4 WELL DEPTH: (completed) **53** ft. Date of Completion **JUNE 79**

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** Height: Above/Below Surface _____ ft.
 _____ in. to _____ ft. Depth Weight _____ lbs./ft.
 _____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
RED SAND		4
SOFT BLUE CLAY		32
W SAND		53

8 SCREEN:
 Type: **SS** Dia.: **4**
 Slot/Gauge **12** Length **4**
 Set between _____ ft. and _____ ft.
 Fittings: **K**

9 STATIC WATER LEVEL
15 ft. below land surface

10 PUMPING LEVEL below land surface
20 ft. after _____ hrs. pumping **20** g.p.m.
 _____ ft. after _____ hrs. pumping _____ g.p.m.

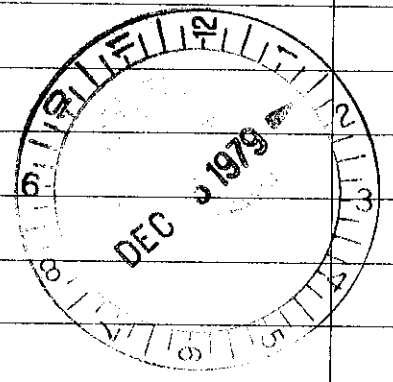
11 WATER QUALITY in Parts Per Million:
 Iron (Fe) _____ Chlorides (Cl) _____
 Hardness _____ Other _____

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

13 Well Grouted? Yes No
 Neat Cement Bentonite
 Depth: From **0** ft. to **10** ft.

14 Nearest Source of possible contamination
60 feet _____ Direction **S** Type _____
 Well disinfected upon completion Yes No

15 PUMP: Not installed
 Manufacturer's Name _____
 Model Number **557210** HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating



USE A 2ND SHEET IF NEEDED

16 Remarks, elevation, source of data, etc.
 ADDED INFO BY DRILLER. ITEM NO.
 *CORRECTED BY
 ADDITION BY **B
 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.
 REGISTERED BUSINESS NAME _____ REGISTRATION NO. **0413**
 Address **10730 CLARK**
 Signed *Glean Sommer* Date **6/79**
 AUTHORIZED REPRESENTATIVE

25 1978

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT

OF
PUBLIC HEALTH

1 LOCATION OF WELL

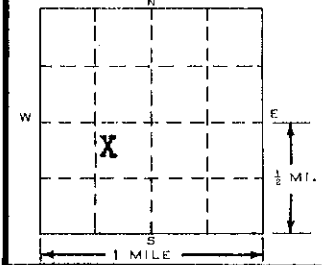
County Oakland	Township Name White Lake	Fraction ne 1/4 sw 1/4 nw 1/4	Section Number 21	Town Number 3 N.E.	Range Number 8 E.W.
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Distance And Direction from Road Intersections

Street address & City of Well Location **701 Sunset**

Locate with "X" in section below Sketch Map:

3 OWNER OF WELL:
Mr. Burmeister
Address **701 Sunset
Milford, Mi.**



4 WELL DEPTH: (completed) **55** ft. Date of Completion **9-11-77**

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. Height: Above ~~XXXX~~ Surface **1** ft.
Weight _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown sand, brown clay and rocks		11
Gray clay	36	47
Medium sand and water	8	55

8 SCREEN:
Type: **Johnson** Dia.: **3"**
Slot ~~XXXX~~ **10** Length **4'**
Set between **51** ft. and **55** ft.
Fittings: **1' nipple
K-packer**

9 STATIC WATER LEVEL
~~30~~ **16** ft. below land surface

10 PUMPING LEVEL below land surface
30 ft. after **2** hrs. pumping **50** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

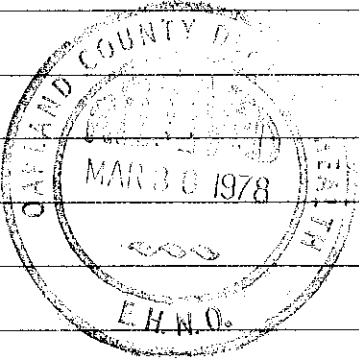
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
52 feet **S.** Direction **Septic** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **FW**
Model Number _____ HP **1/2** Volts **220**
Length of Drop Pipe **40** ft. capacity **10** G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

USE A 2ND SHEET IF NEEDED

ADDED INFO BY DRILLER ITEM NO. **B**
*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.

Fettig Well Drilling **0413**
REGISTERED BUSINESS NAME REGISTRATION NO.

Address **5575 Jackson Blvd. Davisburg**

Signed **Jerry L. Fettig** Date **9-23-77**
AUTHORIZED REPRESENTATIVE



MAY 13 1990

WATER WELL RECORD
ACT 294 PA 1985

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

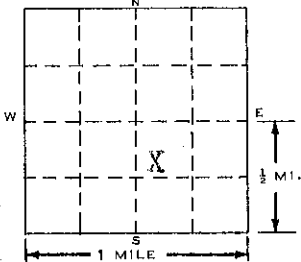
County Oakland	Township Name White Lake	Fraction NW¹/₄SE ¹/₄NW ¹/₄	Section Number 21	Town Number 3 N/S.	Range Number 8 E/W.
--------------------------	------------------------------------	--	-----------------------------	------------------------------	-------------------------------

Distance And Direction from Road Intersections

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL: **Mrs. Helen Thomas**
Address: **655 Elkinford**
Milford, MI 48042

4 WELL DEPTH: (completed) **69** ft. Date of Completion **8-4-79**

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.
Diam. _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown Clay-Gravel		55
Blue Clay	5	60
Med. Sand-Water	9	69

8 SCREEN:
Type: **Johnson** Dia.: **3"**
Slot/Screen **12** Length **48"**
Set between **65** ft. and **69** ft.
Fittings: **1 ft. Nipple, K-Pack**

9 STATIC WATER LEVEL
48 ft. below land surface

10 PUMPING LEVEL below land surface
63 ft. after **1** hrs. pumping **55** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

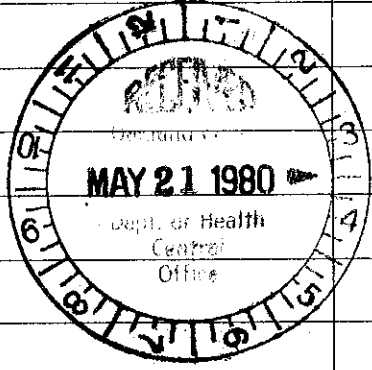
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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 **West** Direction **Septic** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP **1/2** Volts _____
Length of Drop Pipe **54** ft. capacity _____ G.P.M.
Type: Submersible Jet 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.
Fettig Well Drilling **0413**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **5575 Jackson Blvd., Davisburg**
Signed **Jerry J. Fettig** Date **8-18-79**
AUTHORIZED REPRESENTATIVE

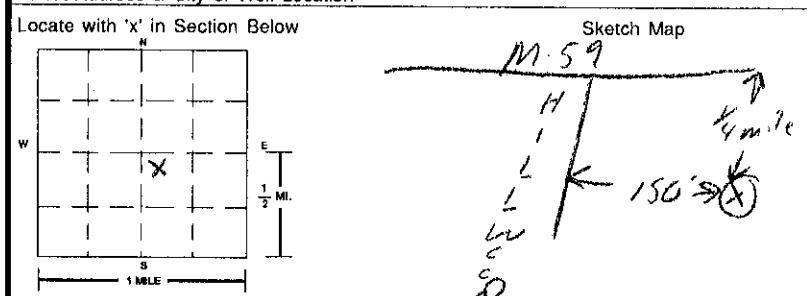
WATER WELL AND PUMP RECORD

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

TAX NO: _____ PERMIT NO: _____

1. LOCATION OF WELL
County: Oakland Township Name: White LK Fraction: NW 1/4 NW 1/4 SE 1/4 Section No.: 21 Town No.: 3 N Range No.: 8 E

Distance and Direction from Road Intersection
1/4 mile S of M-59
150' E of Hillwood
Street Address & City of Well Location



2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
clay	8	8'
sand-clay	8	16'
sand-gravel	19	64'
blue clay	15	83'
water sand	15	98'

RECEIVED
MICH DEPT OF ENVIRONMENTAL QUALITY
MAR 26 1999
Drinking Water & Radiological Protection Division
Ground Water Supply Section
WELL CONSTRUCTION UNIT

Note: This well was properly granted from 80'-0" M'Pherson Well Drilling Inc is not responsible for any great shrinkage settling, saturation, adverse soil conditions or improper great probing.

*9/15
2/15/99*

3. OWNER OF WELL: Diane Hoke
Address: 552 Hillwood
Address Same as Well Location Yes No

4. WELL DEPTH: 98 ft. Date Completed: 2/16/99
 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 Surface: _____ ft.
Diameter: 5 in. to 90 ft. depth Weight: SDR 21 lbs./ft.
_____ in. to _____ ft. depth

BORE HOLE: Diameter: 8 1/2 in. to 98 ft. depth Drive Shoe
_____ in. to _____ ft. depth Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type: steel Diameter: 3"
Slot/Gauze: 12 Length: 8"
Set Between: 90 ft. and 98 ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen _____ ft. Other _____

9. STATIC WATER LEVEL: 35 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface 80 ft. After 1 hrs. Pumping at 60 G.P.M.
 Plunger Bailer Air Test Pump

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

12. WELL GROUTED? No Yes From 80 to 0 ft.
 Neat Cement Bentonite Other _____
No. of Bags: 8 Additives: E-2-Mud

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type: Stank Distance: 60 ft. Direction: NW
Type: _____ Distance: _____ ft. Direction: _____

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter: 2 in. Depth: 52 ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags: 1 Casing Removed? Yes No

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

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name: Ralph Richman

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name: Red Jacket
Model Number: R-10 HP: 1/2 Volts: 115
Length of Drop Pipe: 60 ft. Capacity: 10 G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name: AO Smith
Model Number: U-60 Capacity: 20 Gallons 6

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.
M'Pherson Well Drilling Inc 1701
REGISTERED BUSINESS NAME _____ REGISTRATION NO. _____
Address: 10000 M'Pherson Dr
Signed: [Signature] Date: 3/5/99
AUTHORIZED REPRESENTATIVE

TAX NO:

1. LOCATION OF WELL

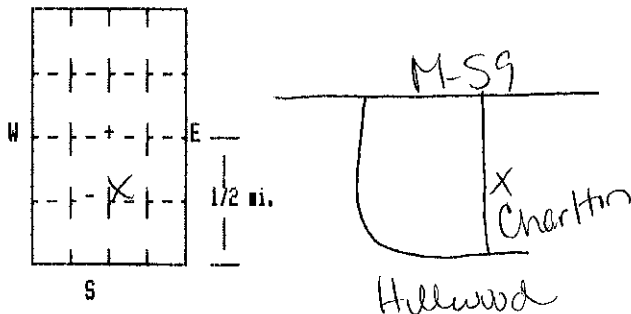
County OAKLAND	Township Name WHITE LAKE	Fraction SW 1/4 NW 1/4 SE 1/4	Section No 21	Town No 3 N	Range Number 8 E
-------------------	-----------------------------	----------------------------------	------------------	----------------	---------------------

Distance And Direction From Road Intersection
SOUTH OF M-59 ON THE EAST SIDE OF CHARLTON ROAD

Well Addr: 736 CHARLTON ROAD

Locate with 'X' in Sec. Below

Sketch Map



3. Owner of Well MICHAEL MOSHER
Address 736 CHARLTON
WHITE LAKE MI 48383
Address Same as Well Location? YES

4. WELL DEPTH 105 ft. Date Compl 08/31/99 This is a REPLACEMENT

5. EQUIPMENT USED: ROTARY
6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
Diam. 5 in. to 95 ft. Height ABOVE Surface 1 ft.
Weight 1b./ft.
BORE HOLE: Drive Shoe NO
8 3/4 in. to 105 ft. Shale Packer NO
in. to ft.

Formation Description	Thickness	Depth
SAND	3	3
CLAY	12	15
SAND	45	60
STONEY CLAY	5	65
GRAY CLAY & LAYER SAND	10	75
GRAY CLAY	20	95
GRAY GRAVEL	20	105
CLAY	1	106

8. Screen Type: SLOTTED Diam: 5 Not Inst.
SLOT 15 Length: 10
Set Between 95 ft. and 105 ft.
Fittings: Blank above scrn: ft

9. Static Level: 35 ft. Flow: (N)

10. Pumping Level below land surface:
105 ft. after 1/2 hrs. @ 50 GPM
 Plunger Bailer Air Test Pump

11. Well Head Completion: PITLESS ADAPTER

12. Grouted from 115 to 0 ft Material: BENSEAL
No. of Bags 10 bags Additives: EZ MUD

13. Nearest source of possible contamination:
Type: SEPTIC TANK Distance: 55 ft. Dir: WEST
Type: Distance: ft. Dir:

14. Pump: Not Installed Installation Only
Manufacturer's Name: AERMOTOR
Model: A12B50 HP: 0.5 Voltage: 230
Drop pipe: 40 ft. Capacity: 10 GPM
Pump type: SUBMERSIBLE
Pressure Tank Manufacturer's Name: WELL X-TROL
Model: 203 Capacity: 10 Gal.

15. Abandoned Well Plugged? YES
Casing Diameter 2 in. Depth ? ft.
Plugging Material: BENTONITE CHIPS
No. of Bags 2 1/2 Casing Removed? N

16. Remarks, elevation, source of data, etc.
PUMP - JEFF BABINGER

17. Drilling Machine Operator: Employee Subcontractor
Name MATT TRANKA

RECEIVED
MICH DEPT OF ENVIRONMENTAL QUALITY
SEP 30 1999
Drinking Water & Radiological Protection Division
Ground Water Supply Section
WELL CONSTRUCTION UNIT

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.
Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
Business Address 10655 Easton Road New Lothrop MI 48460

Signed _____ Date 09/03/99
Authorized Representative

GW-2-228 9/93
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

TAX NO:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NO. APPLIED FOR 4/1/98
NOT YET RECEIVED

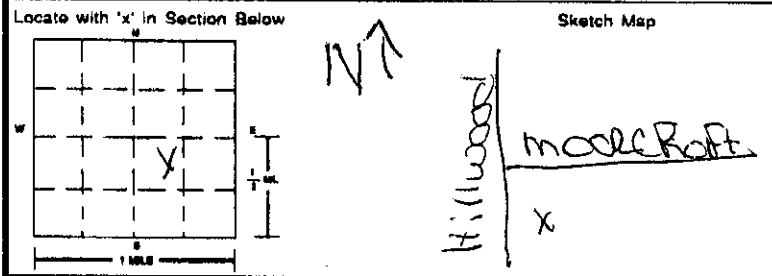
1. LOCATION OF WELL
County
OAKLAND

Township Name
WHITE LAKE Fraction
SW 1/4 NW 1/4 SE 1/4 Section No.
21 Town No.
3N Range No.
8E

Distance and Direction from Road Intersection
20' W. OF HILLWOOD **690 HILLWOOD**
60' S. OF MOORCROFT **WHITE LAKE, MI**

Street Address & City of Well Location

3. OWNER OF WELL
Address
RICHARD GALLETT
690 HILLWOOD, WHITE LAKE, MI
Address Same as Well Location Yes No



4. WELL DEPTH:
34 ft. Date Completed
4 / 2 / 98 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

2. FORMATION DESCRIPTION

FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
STOOD PIPE & DROVE		
TOP SOIL & SOME ROCKS	6	6
HARD BROWN CLAY	20	26
SOFT BROWN CLAY	4	30
WATER BARING SAND	4	34

7. CASING: Steel Threaded Plastic Welded Other
Height: Above Below Surface: **1** ft.
Diameter: **4** in. to **30** ft. depth Weight: _____ lbs./ft.
BORE HOLE:
Diameter: _____ in. to _____ ft. depth Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type **STAINLESS** Diameter **3"**
Slot Size **10** Length: **4'**
Set Between **30** ft. and **34** ft.
FITTINGS: Packer Bremer Check
 Blank Above Screen **1** ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
20 ft. After **1/4** hrs. Pumping at **25** G.P.M.
 Plunger Bailor Air Test Pump

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

12. WELL GROUTED? No Yes From **0** to **30** ft.
 Near Cement Bentonite Other _____
No. of Bags **1 1/2** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type **SEPTIC** Distance **60** ft. Direction **N**
Type _____ Distance _____ ft. Direction _____

RECEIVED
MICH. DEPT. OF ENVIRONMENTAL QUALITY
APR 17 1998
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 **2** in. Depth **36** ft.
PLUGGING MATERIAL: Near Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags **1** Casing Removed? Yes No

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name **RED JACKET**
Model Number **RJ50** HP **1/2** Volts **115**
Length of Drop Pipe **15** ft. Capacity **20** G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name **WELLWTROLL**
Model Number **202** Capacity **20** Gallons **5**

16. REMARKS: (Elevation, Source of Data, etc.)
DROP PIPE & JET REMOVED BEFORE SEALING

15. 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.
JOE CURRY WELL DRILLING 2147
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **130 ELM HIGHLAND MI 48357**
Signed _____ Date **4-7-98**
AUTHORIZED REPRESENTATIVE

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name **OWNER**

LOCAL HEALTH DEPT. COPY

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

**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

TAX NO:
12 21 405 034

PERMIT NO:

1. LOCATION OF WELL
County **Oakland**

Township Name **White Lake**

Fraction **NW 1/4 SE 1/4 SE 1/4**

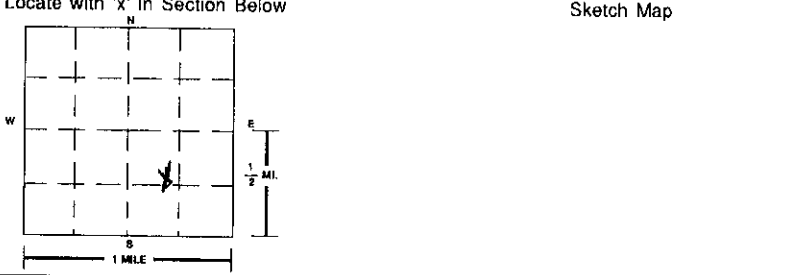
Section No. **21**

Town No. **3N**

Range No. **8E**

Distance and Direction from Road Intersection

Street Address & City of Well Location



3. OWNER OF WELL **Jason Janeczek**
Address **625 Elkinford**

Address Same as Well Location Yes No

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown sand-gravel	0	65
Blue clay-gravel	51	116
Med. sand gravel-water	5	121

4. WELL DEPTH: **121** ft. Date Completed **11 16 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: _____ ft

Diameter: **4** in. to **117** ft. depth
_____ in. to _____ ft. depth

BORE HOLE: Diameter: _____ in. to _____ ft. depth
_____ in. to _____ ft. depth

Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type **Johnson** Diameter **3"**
Slot/Gauze **12** Length: **48"**
Set Between **117** ft. and **121** ft.

FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other

9. STATIC WATER LEVEL: **49** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
105 ft. After **2** hrs. Pumping at **20** G.P.M.

Plunger Bailer 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 **6** Additives

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type **Septic** Distance **55** ft. Direction **West**
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name **Redjacket**
Model Number _____ HP **1/2** Volts **115**
Length of Drop Pipe **105** ft. Capacity **12** G.P.M.
TYPE: Submersible Jet Other

PRESSURE TANK: **Well X-trol**
Manufacturer's Name _____
Model Number **WX203** Capacity **42** Gallons

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter **2** in. Depth **115**
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags **3 3/4** Casing Removed? Yes No

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

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name **Charles Farren**

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.

Fettig Well Drilling **63-1976**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **5150 N. Milford Rd., Highland 48356**
Signed **Randy Kozlowski** Date **11-18-99**
AUTHORIZED REPRESENTATIVE

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

TAX NO:

PERMIT NO:

1. LOCATION OF WELL

County Oakland Township Name White LK Fraction SE 1/4 NW 1/4 SW 1/4 Section No. 21 Town No. 3 Range No. 8

Distance and Direction from Road Intersection

1/2 mile W of Sunset
1 mile S of M-59

Street Address & City of Well Location

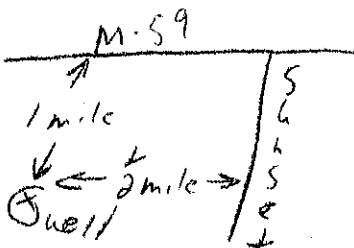
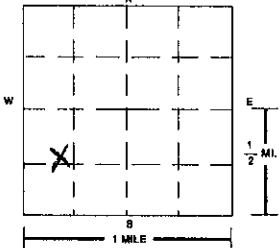
3. OWNER OF WELL

Matt Shelley
 Address 589 Sunset

Address Same as Well Location Yes No

Locate with 'x' in Section Below

Sketch Map



4. WELL DEPTH:

80 ft. Date Completed 4/16/99

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: _____ ft.

Diameter: 5 in. to 26 ft. depth _____ in. to _____ ft. depth Weight: SPR 2 lbs./ft.

BORE HOLE: Diameter: 8 1/2 in. to 80 ft. depth _____ in. to _____ ft. depth
 Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
 Type 5 Steel Diameter 3"
 Slot/Gauze 12 Length: 4'
 Set Between 76 ft. and 80 ft.
 FITTINGS: Packer Bremer Check
 Blank Above Screen _____ ft. Other _____

9. STATIC WATER LEVEL: 42 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface 70 ft. After 1 hrs. Pumping at 25 G.P.M.
 Plunger Bailor Air Test Pump

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

12. WELL GROUTED? No Yes From 70 to 80 ft.
 Neat Cement Bentonite Other _____
 No. of Bags 7 Additives E-2-mud

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type 5 tank Distance 65 ft. Direction W
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name Red Jacket Baron
 Model Number B-50 HP 1/2 Volts 115
 Length of Drop Pipe 60 ft. Capacity 10 G.P.M.
 TYPE: Submersible Jet Other _____
 PRESSURE TANK:
 Manufacturer's Name AU Smith
 Model Number V-100 Capacity 32 Gallons 8

2. FORMATION DESCRIPTION

THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM

<u>sand</u>	<u>RECEIVED</u>	<u>20</u>	<u>20</u>
<u>clay</u>	<u>MICH DEPT OF ENVIRONMENTAL QUALITY</u>	<u>13</u>	<u>33'</u>
<u>gravel</u>	<u>MAY 20 1999</u>	<u>22</u>	<u>55'</u>
<u>sand</u>	<u>Drinking Water & Radiological Protection Division</u>	<u>25</u>	<u>80'</u>
	<u>Ground Water Supply Section</u>		
	<u>WELL CONSTRUCTION UNIT</u>		

Note: This well was properly grouted
from 70'-0" M'Pherson Well Drilling Inc
is not responsible for any great
shrinkage, settling, saturation, adverse
soil conditions or improper great
pricing.

Pres
4/16/99

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
 Casing Diameter 2 in. Depth 54 ft.
 PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
 No. of Bags 2 Casing Removed? Yes No

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

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name Ralph Richman

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.
M'Pherson Well Drilling Inc 1701
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 10000 M'Pherson Dr
 Signed [Signature] Pres Date 4/16/99
 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

TAX NO: 12 21 377 003

PERMIT NO: 113106

1. LOCATION OF WELL
 County: **Oakland** Township Name: **White Lake** Fraction: **SE 1/4 SW 1/4** Section No.: **21** Town No.: **3N** Range No.: **8E**

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: **David Mazurkiewicz**
424 Sunset

Address Same as Well Location Yes No

4. WELL DEPTH: **68** ft. Date Completed: **7 12 '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 Welded
 Plastic Other

Height: Above/Below Surface: _____ ft.

Diameter: 4 in. to 64 ft. depth Weight: 10/40 lbs./ft.

BORE HOLE: Drive Shoe Shale Packer

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown sand-brown clay-gravel	0	8
Blue clay-gravel-rocks	53	61
Med. sand-gravel-water	7	68

8. SCREEN: Not Installed Gravel-Packed

Type: **Johnson** Diameter: **3"**

Slot/Gauze: **12** Length: **48"**

Set Between: **64** ft. and **68** ft.

FITTINGS: K-Packer Bremer Check
 Blank Above Screen 1 ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
42 ft. After 1 hrs. Pumping at 65 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 58 ft.

Neat Cement Bentonite Other _____

No. of Bags 4 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type: **Septic** Distance: **60** ft. Direction: **West**

Type: _____ Distance: _____ ft. Direction: _____

15. ABANDONED WELL PLUGGED? Yes No

Casing Diameter 4 in. Depth 48 ft.

PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips

No. of Bags 4 1/2 Casing Removed? Yes No

14. PUMP: Not Installed Pump Installation Only

Manufacturer's Name: **Redjacket**

Model Number: _____ HP 1 Volts 230

Length of Drop Pipe: 42 ft. Capacity: 20 G.P.M.

TYPE: Submersible Jet Other _____

PRESSURE TANK:
 Manufacturer's Name: **Well X-trol**
 Model Number: **WX250** Capacity: **84** Gallons

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.

Fettig Well Drilling **63-1976**
REGISTERED BUSINESS NAME REGISTRATION NO.

Address: **5150 N. Milford Rd., Highland 48356**

Signed: *Charles Farren* Date: **8-1-99**
AUTHORIZED REPRESENTATIVE

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name: **Charles Farren**

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:
APPLIED 1-01

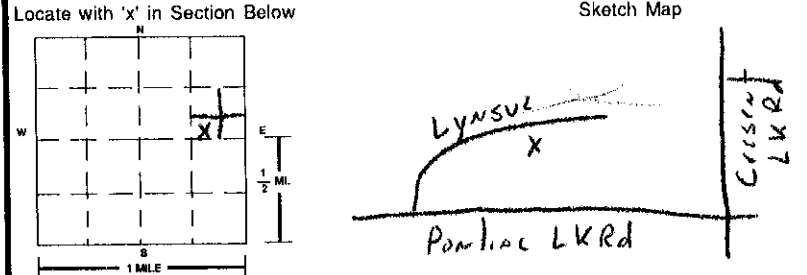
TAX NO:

1. LOCATION OF WELL

County Oakland	Township Name Waterford	Fraction SW 1/4 SE 1/4 NE 1/4	Section No. 21	Town No. 3N	Range No. 9E
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Distance and Direction from Road Intersection
**Pontiac LK Rd west of Crescent LK Rd to
 Lynsue Right, job on Right.**

Street Address & City of Well Location



3. OWNER OF WELL **CHARLES MASSE**
 Address **5207 Lynn Ave
 Waterford, MI**

Address Same as Well Location Yes No

4. WELL DEPTH: **61** ft. Date Completed **5/19/99**

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 **5 1/2** ft. depth
 _____ in. to _____ ft. depth

BORE HOLE:
 Diameter: **9** in. to **61** ft. depth
 _____ in. to _____ ft. depth

Drive Shoe
 Shale Packer

8. SCREEN: Not Installed Gravel-Packed
 Type **Plastic** Diameter **3"**
 Slot/Gauge **12** Length: **5'**
 Set Between **56** ft. and **61** ft.

FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
35 ft. After **1** hrs. Pumping at **75** G.P.M.

Plunger Bailer Air Test Pump

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

12. WELL GROUTED? No Yes From **Top** to **55** ft.
 Neat Cement Bentonite Other _____
 No. of Bags **4** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
 Type **SEWER** Distance **50** ft. Direction **North**
 Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
 Manufacturer's Name **FAIR BANAS**
 Model Number _____ HP **1** Volts **220**
 Length of Drop Pipe **45** ft. Capacity **20** G.P.M.
 TYPE: Submersible Jet Other _____

PRESSURE TANK:
 Manufacturer's Name **NONE**
 Model Number _____ Capacity _____ Gallons

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
SAND	28	28
Blue clay	16	44
SAND & CLAY	9	53
SAND	8	61

RECEIVED
 MICH DEPT OF ENVIRONMENTAL QUALITY
 JUL 08 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 _____ 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.)

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
 Name **Gary Lalanc**

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.

Ray Lalanc Well Drilling **63-0140**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **8155 Oak Hill Clarkston, MI 48348**
 Signed **[Signature]** Date **5/19/99**
 AUTHORIZED REPRESENTATIVE



NORTHERN COMPANY

INCORPORATED

INDIANAPOLIS • MISHAWAKA • LANSING

TEST

PERMANENT

Job No. 3019

WELL LOG No. # 1 CITY PONTIAC

County OAKLAND

Owner K-MART CORP.

Township WHITE LAKE

SE 1/4, NE 1/4, SE 1/4 Section 21, T.3N, R.8E

Location

State MICHIGAN

From Land Description 9.5' SW OF T.W. 88-A

From Street or Road 270' S. OF M-59, & 306' E. OF ELIZABETH LAKE RD.

FORMATION FOUND - DESCRIBE FULLY	FROM NATURAL GROUND LEVEL			
	Depth to Top of Stratum	Depth to Bottom of Stratum	Thickness of Stratum	Static Water Level
RED CLAY	0'	6'	6'	
MEDIUM SAND	6'	36'	30'	25.66'
BLUE CLAY	36'	47'	11'	
CLAY GRAVEL MIX	47'	65'	18'	
SAND FINE	65'	67'	2'	
COARSE	67'	77'	10'	
CLAY	77'	80'	3'	
ELEVATION: 962				
<p>RECEIVED Mich. Dept. of Public Health MAR 29 1989 Bureau of Environmental and Occupational Health - GY02</p>				

Hole 1 1/2 "Dia Drilled by: { Cable Tool _____ Rotary X Jetting _____ N/A _____
Reverse Circ. _____ Bucket _____ Auger _____

Rotary Hole Grouted: Neat Cement _____ Drilling Mud _____ Other _____

Casing 8 "OD From 3' *above ground to 64.5 feet below ground. Weight _____ Pounds per foot

Screen 6 " Set from 65 to 75 feet Make JOHNSON Type W.W.SS. Slot 0.040

Pumping test 300 GPM drawdown to 19.59 feet after 8 hours pumping

Date Completed 2-26-88 Driller RAMSBY DRILLING

[Handwritten signature] PE
33-0550



NORTHERN COMPANY

INCORPORATED

INDIANAPOLIS • MISHAWAKA • LANSING

TEST

PERMANENT

Job No. 3019

WELL LOG No. # 1 CITY PONTIAC

County OAKLAND

Owner K-MART CORP.

Township WHITE LAKE

SE 1/4, NE 1/4, SE 1/4 Section 21, T.3N, R.8E

Location

State MICHIGAN

From Land Description 9.5' SW OF T.W. 88-A

From Street or Road 270' S. OF M-59, E 306' E. OF ELIZABETH LAKE RD.

FORMATION FOUND - DESCRIBE FULLY	FROM NATURAL GROUND LEVEL			
	Depth to Top of Stratum	Depth to Bottom of Stratum	Thickness of Stratum	Static Water Level
RED CLAY	0'	6'	6'	
MEDIUM SAND	6'	36'	30'	25.66'
BLUE CLAY	36'	47'	11'	
CLAY GRAVEL MIX	47'	65'	18'	
SAND FINE	65'	67'	2'	
COARSE	67'	77'	10'	
CLAY	77'	80'	3'	
ELEVATION: 962				
RECEIVED Mich. Dept. of Public Health MAR 29 1989 Bureau of Environmental and Occupational Health - CWOSS				

John, PE
33-0552

Hole 15 1/2 " Dia Drilled by: { Cable Tool _____ Rotary X Jetting _____ N/A
Reverse Circ. _____ Bucket _____ Auger _____

Rotary Hole Grouted: Neat Cement _____ Drilling Mud _____ Other _____

Casing 8 " OD From 3 ' above ground to 64.5 feet below ground. Weight _____ Pounds per foot

Screen 6 " Set from 65 to 75 feet Make JOHNSON Type W.W.SS. Slot 0.040

Pumping test 300 GPM drawdown to 19.59 feet after 8 hours pumping

Date Completed 2-26-88 Driller RAMSBY DRILLING

FEB 20 1979

WATER WELL RECORD
ACT 294 PA 1965

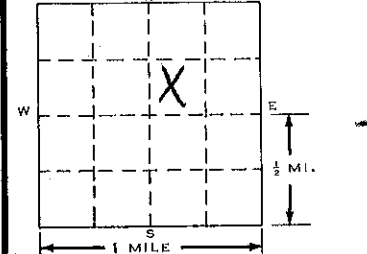
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Cah. Township Name White Lk. Fraction SW 1/4 SW 1/4 NW 21 Section Number 21 Town Number 36 N/S Range Number 4 E/W.

Distance And Direction from Road Intersections:
2 Blocks South of M 59 on
Edenwood

Street Address, City or Town, Location



Sketch Map:
M 59
Edenwood

3 OWNER OF WELL:
Dea Bond Co.
Address 2340 Modley Ln
Keego Harbor Mich

4 WELL DEPTH: (completed) 88 ft. Date of Completion 7-30-78

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.
Diam. _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes No

4 in. to _____ ft. Depth
_____ in. to _____ ft. Depth

2 FORMATION

THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM

Clay
Sand & Clay
Sand & Gravel

45'
170'
84'

8 SCREEN:
Type Johnson Dia: 4
Slot/Gauze 16 Length 4
Set between _____ ft. and _____ ft.
Fittings:

9 STATIC WATER LEVEL
35 ft. below land surface

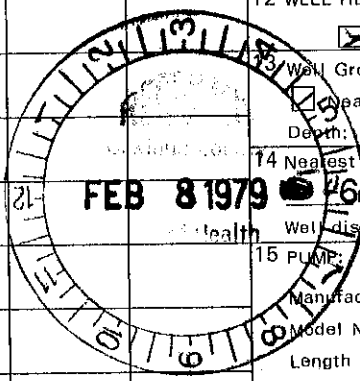
10 PUMPING LEVEL below land surface
63' ft. after 1 hrs. pumping 25 g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

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

14 Nearest Source of possible contamination
46 feet W Direction Legion Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name Dr. Jockey
Model Number 9Bc 2 HP 1/2 Volts 220
Length of Drop Pipe 63' ft. capacity 10 G.P.M.
Type: Submersible Jet Reciprocating

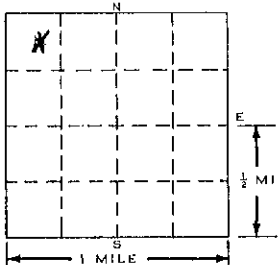
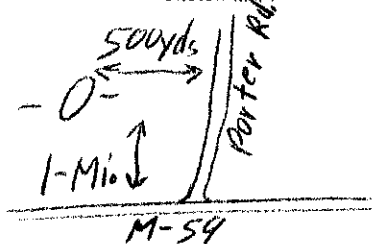


16 Remarks, elevation, source of data, etc.
ADDED INFO BY DRILLER, ITEM NO. B.
*CORRECTED BY
**ADDITION BY
ELEVATION
DEPTH TO ROCK

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.
Edward M. ... 1154
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 240 N. ...
Signed Edward M. ... Date 8-6-78
AUTHORIZED REPRESENTATIVE

AUG 02 1984 WATER WELL RECORD
ACT 294 PA 1965

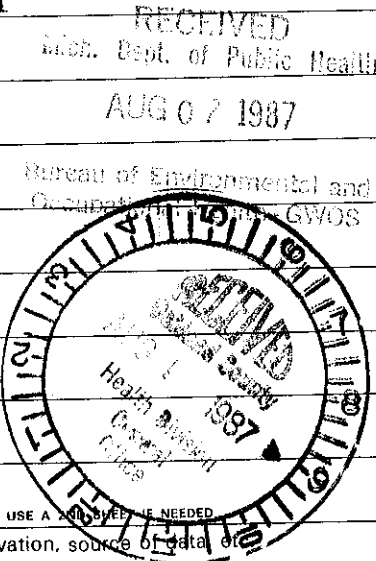
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County <i>Dakland</i>	Township Name <i>White Lk.</i>	Fraction <i>N.W. 1/4 N.E. 1/4 N.W. 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N.O.</i>	Range Number <i>8 E.W.</i>						
Distance And Direction from Road Intersections <i>About 1-Mile N. of M-59 & 500yds. W. of Porter Rd.</i>						3 OWNER OF WELL: <i>Chuck Burgin</i> Address <i>1385 Porter Rd. Milford, Mi.</i>					
Street address & City of Well Location <i>1385 Porter Rd. Milford, Mi.</i>						4 WELL DEPTH: (completed) <i>52'</i> ft. Date of Completion <i>Apr. 23, '83</i>					
Locate with "X" in section below 						Sketch Map: 					
2 FORMATION		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	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"/>							
<i>Red clay.</i>		<i>20'</i>	<i>20'</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"/>							
<i>Red & Blue Clay</i>		<i>15'</i>	<i>35'</i>	7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface <i>+</i> ft. Weight _____ lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
<i>Blue clay</i>		<i>7'</i>	<i>42'</i>	8 SCREEN: Type: <i>Johnson S.S.</i> Dia.: <i>1 1/4"</i> Slot/Screen <i>12</i> Length <i>4'</i> Set between <i>48</i> ft. and <i>52</i> ft. Fittings: <i>2" x 1 1/4" K-Packer & 1/2" 1 1/4" Blanks</i>							
<i>Gray Sand & Fine Gravel, "water"</i>		<i>10'</i>	<i>52'</i>	9 STATIC WATER LEVEL <i>14</i> ft. below land surface							
				10 PUMPING LEVEL below land surface <i>25</i> ft. after <i>2</i> hrs. pumping <i>15</i> 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: <input type="checkbox"/> In Approved Pit <input type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade							
				13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.							
				14 Nearest Source of possible contamination <i>55</i> feet <i>W</i> Direction <i>Septic & F.</i> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
				15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating							
16 Remarks, elevation, source of data, etc.		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>WOODCUM - Well & Pump, 63-1135</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>1680 W. Davison Lk. Rd., Oxford, Mi.</i> Signed <i>Robert T. Woodcum</i> Date <i>6-7-83</i> AUTHORIZED REPRESENTATIVE									
RECEIVED Mich. Dept. of Public Health JUN 19 1984 Bureau of Environmental and Occupational Health - CWOS USE A 2ND SHEET IF NEEDED											

MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		Fraction		Section Number		Town Number		Range Number	
County Oakland		Township Name White Lake		1/4 1/4 1/4 21		3 N/8x		8 E/W	
Distance And Direction From Road Intersection 1805 Porter Rd.					3 OWNER OF WELL: H.W. Nichols Builder				
Street Address & City of Well Location 1/2 Mile North of M59 on the West Side.					Address 7515 Grange Hall Rd. Holly, Mi. 48442				
Locate with "X" in Section Below					Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Sketch Map:					4 WELL DEPTH: Date Completed				
					MO. DAY YEAR <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> 64 FT. <input 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 <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				
					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 _____ ft. Weight 11 lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
					8 SCREEN: <input type="checkbox"/> Not Installed				
					Type Johnson Diameter 4" Slot/Screen 10 Length 4' Set between 60 ft. and 64 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bromer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____				
					9 STATIC WATER LEVEL: _____ ft. below land surface <input type="checkbox"/> Flow				
					10 PUMPING LEVEL: below land surface				
					_____ ft. after 2 hrs. pumping at 15 G.P.M.				
					_____ ft. after _____ hrs. pumping at _____ 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes From 5 to 15 ft.				
					<input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____				
					13 Nearest source of possible contamination				
					Type Septic Distance 100 ft. Direction _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No				
					14 PUMP: <input type="checkbox"/> Not installed <input type="checkbox"/> Pump Installation Only				
					Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons				
15. Remarks. elevation, source of data, etc.					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.				
					Brown Drilling Co., Inc. 0026 REGISTERED BUSINESS NAME REGISTRATION NO. Address Howell Signed Harry R. Brown Date _____ AUTHORIZED REPRESENTATIVE				



MAR 13 1972

WATER WELL RECORD

ACT 294 PA 1965

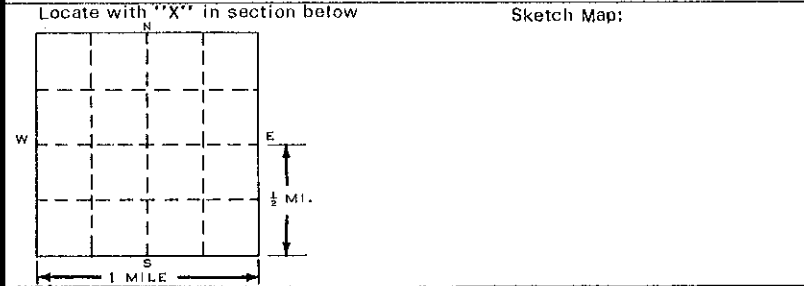
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County - Oakland	Township Name White Lake	Fraction 1/4 Sec 1/4 NE 1/4	Section Number 21	Town Number 3 N N/S.	Range Number 8 E E/W.
-------------------------	---------------------------------	------------------------------------	--------------------------	-----------------------------	------------------------------

Distance And Direction from Road Intersections
Dolane Subdivision
Lot 22
1010 Dolane Blvd
Milford, Mich. 48042

Street address & City of Well Location



3 OWNER OF WELL:
James J. Carter
 Address **990 Dolane Blvd.**
Milford, Mich. 48042

4 WELL DEPTH: (completed) Date of Completion
39 ft. **Aug. 24, 1971**

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. _____ Height: Above/Below Surface _____ ft.
2 in. to **36** ft. Depth Weight _____ lbs./ft.
 _____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM

Brown sand	10	10
Blue clay	24	34
Water sand	5	39

8 SCREEN: **Johnson S. Steel** Dia.: **1 1/2 in.**
 Type: **15 Slot** Length **3 ft.**
 Slot/Gauze **36** ft. and **39** ft.
 Set between **36** ft. and **39** ft.
 Fittings: _____

9 STATIC WATER LEVEL
22 ft. below land surface

10 PUMPING LEVEL below land surface
26 ft. after **1** hrs. pumping **18** 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
 _____ feet _____ Direction _____ Type
 Well disinfected upon completion Yes No

15 PUMP: Not installed
 Manufacturer's Name **Myers**
 Model Number **HD** HP **1/2** Volts **115**
 Length of Drop Pipe **21** ft. capacity **10** G.P.M.
 Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
 BY DRILLER, ITEM NO.
 BY: *CME*
 BY:

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.
Lloyd L. Wyckoff-Well Drlg. 0705
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **160 Polvadera-Union Lake, Mich. 48085**
 Signed *Lloyd L. Wyckoff* Date **Feb. 25, 1972**
 AUTHORIZED REPRESENTATIVE

WATER WELL RECORD

ACT/294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL
 County: Oakland Twp.: White Lake Fraction: SE 1/4 SE 1/4 NE 1/4 Section No.: 21 Town: 3 N/E Range: 8 E/W
 Distance And Direction from Road Intersections: 40' N of M. 59
300' W of ELIZ. LK. Rd.
 Street address & City of Well Location: _____
 OWNER No. _____
3 OWNER OF WELL: George Bowers
 Address: 5465 Tobbs
PONTIAC, Mich

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	4 WELL DEPTH: (completed) Date of Completion
<u>CLAY & ROCK'S</u>	<u>90</u>	<u>90</u>	<u>96</u> ft. <u>June 17/67</u>
<u>Water Bearing "sand"</u>	<u>6</u>	<u>96</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"/> _____
			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>92</u> ft. Depth <u>92.3</u> in. to <u>96</u> ft. Depth Height: Above/Below surface <u>1</u> ft. Weight <u>11</u> lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
			8 SCREEN: Type: <u>SLOTTED</u> Dia.: <u>3"</u> Slot/Gauze <u>10 SLOT</u> Length <u>4'</u> Set between <u>96</u> ft. and <u>92</u> ft. Fittings: <u>2'x3" NIPPLE RUBBER</u> <u>BUCKER</u>
			9 STATIC WATER LEVEL <u>50</u> ft. below land surface
			10 PUMPING LEVEL below land surface <u>90</u> ft. after <u>3</u> hrs. pumping <u>35</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>Reda</u> Model Number <u>7D18P079</u> HP <u>3</u> Length of Drop Pipe <u>73</u> ft. capacity <u>20</u> 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.
 ADDED INFO. BY DRILLER, ITEM NO. _____
 CORRECTED BY: _____
 ADDITION BY: RD

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 Fleming
 REGISTERED BUSINESS NAME
 Address 3556 Hatfield
 Signed Robert M Fleming Date June 17/67
 AUTHORIZED REPRESENTATIVE
 REGISTRATION NO. 357

SEP 18 1971

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

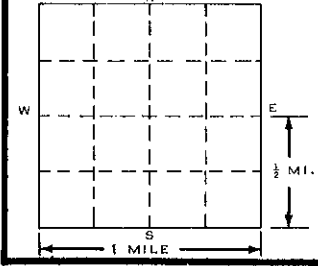
County OATLAND Township Name WHITE LA Fraction SWSW 1/4 NE 1/4 Section Number 21 Town Number 3 N 1/2 Range Number 8 E 1/2

Distance And Direction from Road Intersections
ON POTTER RD - 500' N
OF MI-59

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:
Address BISCAYNE BUILDERS
2803 SASHABOW
OTTAWILLE

4 WELL DEPTH: (completed) Date of Completion
95 ft. 8/24/71

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. Height: Above/Below Surface 1 ft.
2 in. to 92 ft. Depth Weight ___ lbs./ft.
___ in. to ___ ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>GRAVEL VSAND</u>		<u>45</u>
<u>CLAY</u>	<u>30</u>	<u>75</u>
<u>SAND WITH SAND PAN</u>	<u>90</u>	<u>95</u>

8 SCREEN:
Type: SLOT Dia.: 1 1/4
Slot/Gauze 12 Length 3'
Set between 92 ft. and 95 ft.
Fittings: STAINLESS VALVE

9 STATIC WATER LEVEL
15 ft. below land surface

10 PUMPING LEVEL below land surface
15 ft. after 1 hrs. pumping 12 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
50 feet E Direction SEPTIC Type
Well disinfected upon completion Yes No

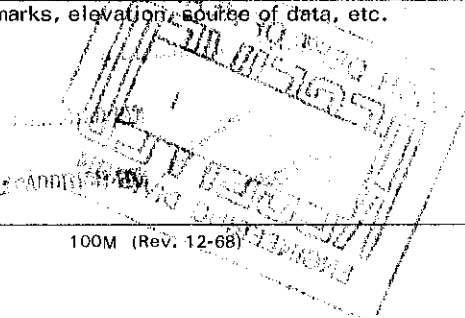
15 PUMP:
 Not installed
Manufacturer's Name RAPIDAYTON
Model Number 351 HP 1/2 Volts 110
Length of Drop Pipe 21 ft. capacity 12 G.P.M.
Type: Submersible
 Jet Reciprocating

16 Remarks, elevation, source of data, etc.

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.
Ray LaLone Well Drilling 0140
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 1055 Wyman
Signed Ray LaLone Date 8/24/71
AUTHORIZED REPRESENTATIVE

USE A 2ND SHEET IF NEEDED



WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		County Oakland		Twp. White Lake		Fraction SE 1/4 SW 1/4 NW 1/4		Section No. 21		Town 3 N 1/2		Range 8 E 1/2	
Distance And Direction from Road Intersections 100 yrs. N. of M-59 E. side of Dolane Blvd.						OWNER No. _____		3 OWNER OF WELL: John Myles, Builder Address 1160 Dolane Blvd Rt-2 Milford, Mich					
2 FORMATION						THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		4 WELL DEPTH: (completed) 70 ft. Date of Completion 4-10-67			
Drove pipe to 42 ft exact formation unknown, Red sand mixed with gravel, Dirty, poor water bearing.										5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> _____			
Sand-White-Fine						8'		50'		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"/> _____			
Clay-Fine Sand, Small stratum of gravel and stone						10'		60'		7 CASING: Diam. Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> 2 in. to 67 ft. Depth Height: Above/Below surface 1 ft. _____ in. to _____ ft. Depth Weight: 3.75 lbs/ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Sand-White-Coarse, Water bearing						10'		70'		8 SCREEN: Type Clayton Mark Dia. 1 1/2" _____ Gauze 60 Length 3' Set between 67 ft. and 70 ft. Fittings: 24" 1 1/2 tail pipe & coup.			
70 FT was completed depth of well, water bearing formation continued.										9 STATIC WATER LEVEL 10 ft. below land surface			
										10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. Pumped tubular _____ 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"/> Approved Pit # 110 <input type="checkbox"/> Pitless Adapter <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 50 feet E Direction Septic Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
ADDED INFO. BY DRILLER, ITEM NO.										15 PUMP: Manufacturer's Name Rapidayton Model Number 5SA-TP25 HP 1/2 Length of Drop Pipe 0 ft. capacity 10 G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> _____ <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating			
CORRECTED BY: 2													
ADDITION INFO													
16 Remarks, elevation, source of data, etc. Item 12 it was my understanding that until June 1, was given to use up inventory on hand. Well was completed with standard type casing adapter 48" below grade.										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 LaLone 0633 <small>REGISTERED BUSINESS NAME REGISTRATION NO.</small> Address 6495 Rowley, Drayton Plains Signed Bob LaLone Date 5-2-67 <small>AUTHORIZED REPRESENTATIVE</small>			

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

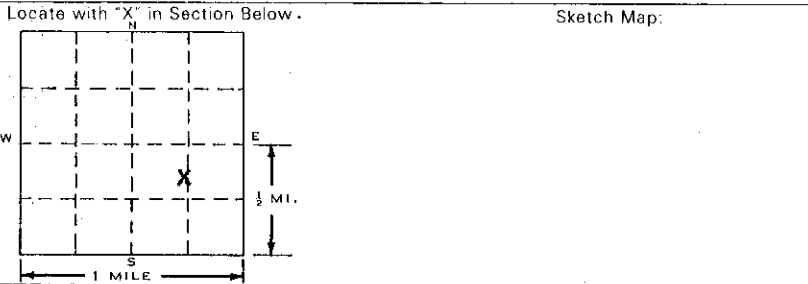
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PERMIT NUMBER

1 LOCATION OF WELL			
County Oakland	Township Name White Lake	Fraction nw 1/4 se 1/4 se 1/4	Section Number 21
		Town Number 3 N/S	Range Number 8 E/X

Distance And Direction From Road Intersection

Street Address & City of Well Location **685 Elkinford**



3 OWNER OF WELL:

Rosenburg

Address **685 Elkinford**
White Lake 48383

Address Same As Well Location? Yes No

4 WELL DEPTH: Date Completed MO. DAY YEAR New Well Replacement Well

197 FT. **4** **25** **95**

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 Threaded Plastic Welded

4 in. to **193** ft. depth

Height: Above/Below Surface **1** ft. XXX

Weight **10.79** lbs./ft.

Grouted Drill Hole Diameter _____ ft. depth

Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
brown sand-brown clay	0	9
brown sand	71	80
gravel-fine sand-blue, clay	10	90
blue clay-gravel	102	192
med. sand-gravel-water	5	297

8 SCREEN: Not Installed

Type **S.S. telescope** Diameter **4 in.**

Slot/Gauge **xxx 12** Length **48 in.**

Set between **193** ft. and **197** ft.

FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **1** ft. Other _____

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

10 PUMPING LEVEL: below land surface

84 ft. after **2** hrs. pumping at **65** G.P.M.

_____ ft. after _____ hrs. pumping at _____ G.P.M.

Old well 2 in. est. depth 63 ft. filled from bottom to top with 1 1/2 bag hole plug.

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

12 WELL GROUTED? No Yes From **0** to **?** ft.

funnell method
 Neat cement Bentonite Other _____

No. of bags of cement **2** Additives _____

13 Nearest source of possible contamination

Type **septic** Distance **53 ft.** Direction **west**

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 **115**

Length of Drop Pipe **84** ft. capacity **12** G.P.M.

TYPE: Submersible Jet

PRESSURE TANK: **Well-Rite**

Manufacturer's name _____

Model number **WR120-04** Capacity **32** Gallons

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

nit.-0-

17. Rig Operator's Name: **Chuck Farren**

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.

Fettig Well Drilling 0413

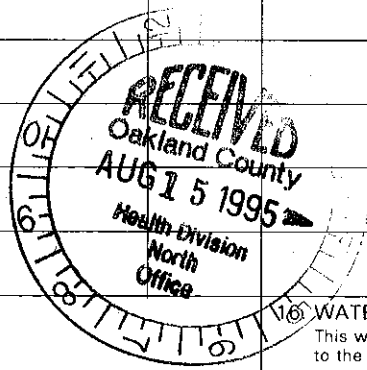
REGISTERED BUSINESS NAME REGISTRATION NO.

Address **5575 Jackson Blvd. White Lake 48383**

Signed *Jerry L. Fettig* Date **4-30-95**

AUTHORIZED REPRESENTATIVE

RECEIVED
MICH. DEPT. OF PUBLIC HEALTH
AUG 25 95
BUREAU OF ENVIRONMENTAL
AND OCCUPATIONAL HEALTH



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 Oakland	Township Name White Lake	Fraction SW 1/4 NE 1/4	Section Number 21	Town Number 3 N/S	Range Number 8 E/W																
Distance And Direction From Road Intersection 515 Hillwood, White Lake						3 OWNER OF WELL: Harvey Elam Address 7641 Pontiac Lk Rd. Waterford, MI 48327 Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No															
Street Address & City of Well Location Locate with "X" in Section Below						4 WELL DEPTH: 118 FT. Date Completed 10 12 94 <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Replacement Well															
Sketch Map: 						5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 40%;">2. FORMATION DESCRIPTION</th> <th style="width: 10%;">THICKNESS OF STRATUM</th> <th style="width: 10%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> <tr> <td>Brown Sand</td> <td style="text-align: center;">15</td> <td style="text-align: center;">15</td> </tr> <tr> <td>Gray Clay</td> <td style="text-align: center;">95</td> <td style="text-align: center;">110</td> </tr> <tr> <td>Gray Sand</td> <td></td> <td style="text-align: center;">118</td> </tr> </table>						2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Brown Sand	15	15	Gray Clay	95	110	Gray Sand		118	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			
						2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM													
						Brown Sand	15	15													
Gray Clay	95	110																			
Gray Sand		118																			
7 CASING: <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded Diameter 5 in. to 114 ft. depth Grouted Drill Hole Diameter 8 1/2 in. to 118 ft. depth Height: Above/Below Surface 1 ft. Weight SDR21 lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																					
<div style="text-align: center;"> </div>						8 SCREEN: <input type="checkbox"/> Not Installed Type Stainless Steel Diameter 3 5/8 Slot/Groove 10 Length 4' Set between 118 ft. and 114 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input checked="" type="checkbox"/> Blank above screen 1 ft. Other															
						9 STATIC WATER LEVEL: 15 ft. below land surface <input type="checkbox"/> Flow															
						10 PUMPING LEVEL: below land surface 60 ft. after 1 hrs. pumping at 20 G.P.M. ft. after hrs. pumping at G.P.M.															
USE A 2ND SHEET IF NEEDED						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 top bottom ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other No. of bags of cement 3 Additives															
						13 Nearest source of possible contamination Type Septic Distance 60 ft. Direction W 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 Unknown															
15. Remarks, elevation, source of data, etc.						14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name Sta-Rite Model number TOP4C01S HP 1/2 Volts 115 Length of Drop Pipe 48 ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name Gould Model number V100 Capacity 34 Gallons															
						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. James Layman 0645 REGISTERED BUSINESS NAME REGISTRATION NO. Address 10275 Eagle Rd., Davisburg, MI 48350 Signed <i>James Layman</i> Date 11-4-94 AUTHORIZED REPRESENTATIVE															
						17. Rig Operator's Name:															

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL		County Oakland		Twp. WhiteLake		Fraction 1/4 SW 1/4 NE 1/4		Section No. 21		Town 3-N		Range 8-E/W.	
Distance and Direction from Road Intersections 3/10 of mile north of M-59		Parcel # 12		Street address & City of Well Location Milford Route # 2		OWNER No. _____		3 OWNER OF WELL: Carl Ogans Address 180 Hilleliff Pentiac Mich. 48054					
2 FORMATION		THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		4 WELL DEPTH: (completed) 106' ft. Date of Completion Sept. 30/70							
Sand		8'		8'		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"/> _____							
Sandy soft B. clay		43'		51'		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"/> _____							
Sand & gravel		2'		53'		7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below surface _____ ft. _____ in. to 102' ft. Depth Weight 11 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
B. Clay- gravelly		48'		101'		8 SCREEN: Type: Wire wound Dia.: 4" Slot: xxx. #025 Length: 4' Set between 102' ft. and 106' ft. 3"x14" neck Fittings: Burlap wrapped							
Sand & gravel		5'		106'		9 STATIC WATER LEVEL Zero' ft. xxx land surface							
						10 PUMPING LEVEL below land surface 22' ft. after 1 hrs. pumping 14 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.							
PUMP INSTALLED		BY				11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____							
KREZEL PUMP SERVICE						12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade							
22000 Meadowbrook Rd. Northville, Mich.						13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input checked="" type="checkbox"/> Aquagelled Depth: From _____ ft. to _____ ft.							
REG. NO. 0699 <i>John Krezel</i>						14 SANITARY: Nearest Source of possible contamination 60' feet South section Open ditch Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
ADDED INFO. BY DRILLER, ITEM AND						15 PUMP: Manufacturer's Name Red Jacket Model Number 509B HP 1/2 Length of Drop Pipe 42 ft. capacity 12 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating							
CORRECTED BY:						16 Remarks, elevation, source of data, etc. Rumped 50 gpm. Cleaned at 35 gpm. with 4" plunger.							
						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. Bernard W. Potts 0097 REGISTERED BUSINESS NAME REGISTRATION NO. Address 26105 Lannys Rd. Novi, Mi. 48050 Signed <i>Bernard W. Potts</i> Date 12/10/70 AUTHORIZED REPRESENTATIVE							

WATER WELL RECORD
ACT 294 PA 1965

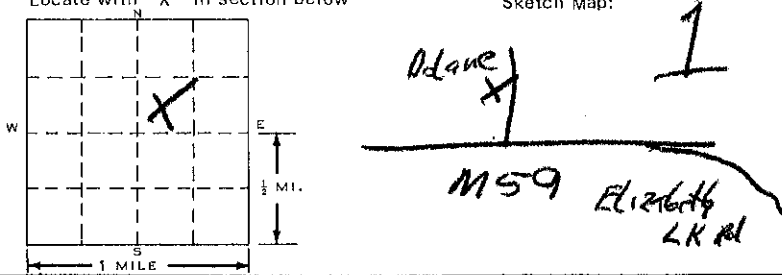
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL					
County <u>Oakland</u>	Twp. <u>White Lake</u>	Fraction <u>SE 1/4 SE 1/4 NE 1/4</u>	Section No. <u>21</u>	Town <u>3 N/A.</u>	Range <u>8 E/A.</u>
Distance And Direction from Road Intersections <u>225' W. OF 59 + Elizabeth</u>			OWNER No. _____		
Street address & City of Well Location			3 OWNER OF WELL: <u>Howard McGee</u> Address <u>M. 59 Highland</u>		
2	FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	4 WELL DEPTH: (completed) <u>74'</u> ft. Date of Completion <u>3-1-68</u>	
	<u>SAND AND GRAVEL</u>	<u>30'</u>	<u>30'</u>	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"/> _____	
	<u>BLUE CLAY</u>	<u>36'</u>	<u>68'</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"/> _____	
	<u>WATER BEARING SAND</u>	<u>6'</u>	<u>74'</u>	7 CASING: Diam. <u>2</u> in. to <u>20</u> ft. Depth <u>70</u> ft. Depth _____ ft. Depth _____ ft. Depth _____ ft. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below surface _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes <input type="checkbox"/> No <input type="checkbox"/>	
				8 SCREEN: Type: <u>Regular</u> Dia.: <u>1 1/4"</u> Slot/Gauze <u>60</u> Length <u>42</u> Set between <u>70</u> ft. and <u>74</u> ft. Fittings: <u>check valve</u>	
				9 STATIC WATER LEVEL <u>41</u> ft. below land surface	
				10 PUMPING LEVEL below land surface <u>41</u> ft. after <u>1</u> hrs. pumping <u>16</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 type="checkbox"/> Pitless Adapter <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 _____ Model Number _____ HP _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating	
16 Remarks, elevation, source of data, etc. ADDED INFO. BY DRILLER, ITEM NO. _____ CONNECTED BY: _____ ADDITION BY: _____			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>Ronald E. Weatherly</u> <u>0994</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>3945 Van Stone Milford</u> Signed <u>Ronald E. Weatherly</u> Date <u>April 1, 1968</u> AUTHORIZED REPRESENTATIVE		

JUL 07 1972

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County Oakland	Township Name White Lake	Fraction NE 1/4 SW 1/4 NE 1/4	Section Number 21	Town Number 3 NYS.	Range Number 9 (E)W.						
Distance And Direction from Road Intersection 700' N of Highland Rd						3 OWNER OF WELL: Kampsen Buildings Co					
Street address & City of Well Location Lot #6 Dolane white Lake Mich.						Address 1971 W Huron Pontiac, Mich					
Locate with "X" in section below 						4 WELL DEPTH: (completed) 53 ft. Date of Completion June 27-72					
2 FORMATION						5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input checked="" 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. 2 in. to 53 ft. Depth Weight _____ lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input type="checkbox"/>					
						8 SCREEN: Type: Johnson Dia.: 1 1/4" Slot/Screen 10 length 3' Set between 50 ft. and 53 ft. Fittings: Bremner					
9 STATIC WATER LEVEL 20 ft. below land surface						10 PUMPING LEVEL below land surface 20 ft. after 1 hrs. pumping 12 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade					
13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.						14 Nearest Source of possible contamination 50 feet W Direction Scott Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name Flint + Walling Model Number _____ HP 1/2 volts 115 Length of Drop Pipe 21 ft. capacity 7 1/2 G.P.M. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating						16 Remarks, elevation, source of data, etc. CORRECTED BY [Signature] ADDITION [Signature]					
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 Tabor Well Dig 1173 REGISTERED BUSINESS NAME REGISTRATION NO. Address 9319 Lagoon Union CR Signed [Signature] Date 27 June 72 AUTHORIZED REPRESENTATIVE											

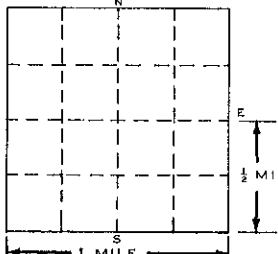
APR 26 1973

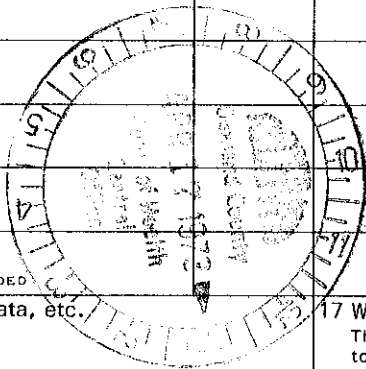
WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT

OF
PUBLIC HEALTH

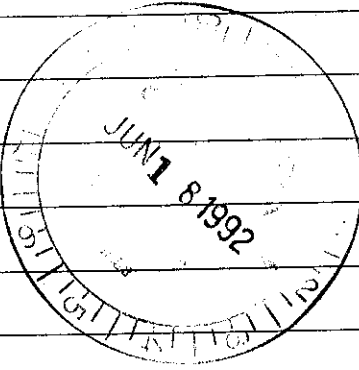
1 LOCATION OF WELL		2 FORMATION		3 OWNER OF WELL:	
County Oakland	Township Name White Lake	Fraction <i>W 1/4 Sec 21 T3N N/S. R8E E/W.</i>	Section Number 21	Town Number T3N	Range Number R8E E/W.
Distance And Direction from Road Intersections 650' Southeast Of Highland Road & 45' Southwest Of Hillwood		Street address & City of Well Location 659 Hillwood, Milford		3 OWNER OF WELL: Address Mike Fernandez 659 Hillwood Milford, Michigan	
Locate with "X" in section below 		Sketch Map:		4 WELL DEPTH: (completed) Date of Completion 12-22-72 ft. 54 12-22-72	
				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/ 3000 Surface 1 ft. 2 in. to 51 ft. Depth Weight 3.68 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
				8 SCREEN: Type: Slot Galv. Dia.: 1 1/4" XXXX Slot Gauge 10 Length 36" Set between 51 ft. and 54 ft. Fittings: Bremer check valve	
				9 STATIC WATER LEVEL 10 ft. below land surface	
				10 PUMPING LEVEL below land surface 10 ft. after 2 hrs. pumping 15 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: <input type="checkbox"/> In Approved Pit <input type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade	
				13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.	
				14 Nearest Source of possible contamination 50 feet SW Direction Septic Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating	
16 Remarks, elevation, source of data, etc. <i>ADDED INFO. BY DRILLER, ITEM NO. cm2</i> <i>*CORRECTED BY</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. S.H. Niedjelski 0756 REGISTERED BUSINESS NAME REGISTRATION NO. Address 2372 Dexter Road, Pontiac, Michigan Signed <i>S.H. Niedjelski</i> Date 12-22-72 AUTHORIZED REPRESENTATIVE			



MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		Fraction		Section Number		Town Number		Range Number																									
County Oakland		Township Name White Lake		SE 1/4 NE 1/4 SE 1/4		21		3 N 8 E																									
Distance And Direction From Road Intersection M-59 at Elizabeth Lake Road White Lake Township					3 OWNER OF WELL: Knart Corporation Address 3001 W. Big Beaver, Troy, MI 48034 Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																												
Street Address & City of Well Location Locate with "X" in Section Below					4 WELL DEPTH: 65-75 FT. Date Completed 2 27 88 <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement Well																												
Sketch Map:					<input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted																												
					6 USE: <input checked="" type="checkbox"/> Domestic <input checked="" 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																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 35%;">2 FORMATION DESCRIPTION</th> <th style="width: 15%;">THICKNESS OF STRATUM</th> <th style="width: 15%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> <tr> <td>Red Clay</td> <td style="text-align: center;">6</td> <td style="text-align: center;">6</td> </tr> <tr> <td>Medium Sand</td> <td style="text-align: center;">30</td> <td style="text-align: center;">36</td> </tr> <tr> <td>Blue Clay</td> <td style="text-align: center;">11</td> <td style="text-align: center;">47</td> </tr> <tr> <td>Clay Gravel Mix</td> <td style="text-align: center;">18</td> <td style="text-align: center;">65</td> </tr> <tr> <td>Sand Fine</td> <td style="text-align: center;">2</td> <td style="text-align: center;">67</td> </tr> <tr> <td>Coarse Gravel Sand</td> <td style="text-align: center;">10</td> <td style="text-align: center;">77</td> </tr> <tr> <td>Clay</td> <td style="text-align: center;">3</td> <td style="text-align: center;">80</td> </tr> </table>					2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Red Clay	6	6	Medium Sand	30	36	Blue Clay	11	47	Clay Gravel Mix	18	65	Sand Fine	2	67	Coarse Gravel Sand	10	77	Clay	3	80	7 CASING: <input checked="" type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded Diameter 8 in. to 64.5 ft. depth Height: Above XXXX Surface 3 ft. Weight 28.55 lbs./ft. Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
					2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																										
Red Clay	6	6																															
Medium Sand	30	36																															
Blue Clay	11	47																															
Clay Gravel Mix	18	65																															
Sand Fine	2	67																															
Coarse Gravel Sand	10	77																															
Clay	3	80																															
Elev. 962					8 SCREEN: <input type="checkbox"/> Not Installed Type SS7WW Diameter 6" Slot/Gauze .040 Length 10' Set between 65 ft. and 75 ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen ft. Other _____																												
					9 STATIC WATER LEVEL: 27.35 ft. below land surface <input type="checkbox"/> Flow																												
10 PUMPING LEVEL: below land surface 45 ft. after 8 hrs. pumping at 300 G.P.M. 60 ft. after 8 hrs. pumping at 350 G.P.M.																																	
11 WELL HEAD COMPLETION: <input 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 48 to 0 ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement 14 Additives _____																																	
13 Nearest source of possible contamination Type Future Septic Distance 175 ft. Direction East Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No																																	
14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name See Attached Supplement Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons																																	



RECEIVED

Mich. Dept. of Public Health

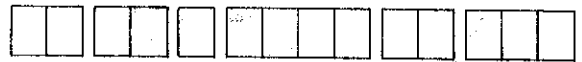
See Attached Well Log JUN 23 1992

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.
 See Attached Well Log 0550
 REGISTERED BUSINESS NAME: **Logan Northern** REGISTRATION NO. _____
 Address: **Logan Northern, Logan St, Lansing, MI**

17. Rig Operator's Name:
 See Attached Well Log **BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS**

Signed _____ Date _____ AUTHORIZED REPRESENTATIVE

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



FEB 22 1973

WATER WELL RECORD

ACT 294 PA 1965

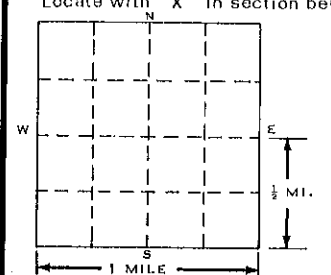
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County: **Oakland** Township Name: **White Lake** Fraction: **S 20 1/2 W 3 1/4 N 1/2** Section Number: **20 21** Town Number: **3 1/4** Range Number: **8 E 4 W**

Distance And Direction from Road Intersections
N. side of M-59 about 1/2 mile W. of Porter Rd.

Street address & City of Well Location
Locate with "X" in section below Sketch Map:



3 OWNER OF WELL:
Super Const. Co.
Address: **17515 W. 9 Mile**
170 Honeywell Center
Southfield, Michigan 48075

4 WELL DEPTH: (completed) Date of Completion
70 ft. **4/24/72**

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. Height: Above/Below Surface **1'3"** ft.
6 in. to **60'3"** ft. Depth Weight **1945** lbs./ft.
Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Sand	33'	33'
Blue clay	15'	48'
Gravel	3'	51'
Coarse sand	19'	70'

8 SCREEN: **Johnson stainless**
Type: **Top 5' steel** Dia.: **6"**
Slot/Gauze **#60** Length **12'7"**
Bottom 5' #60
Set between **59** ft. and **70** ft.
Fittings: **5"x18" nipple**

9 STATIC WATER LEVEL
29 ft. below land surface

10 PUMPING LEVEL below land surface
44 1/2 ft. after **8** hrs. pumping **302** g.p.m.
ft. after ___ hrs. pumping ___ g.p.m.

11 WATER QUALITY in Parts Per Million: **None**
Iron (Fe) ___ Chlorides (Cl) ___
Hardness ___ Other ___

12 WELL HEAD COMPLETION: In Approved Pit
 Pitless Adapter **2"** Above Grade

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

14 Nearest Source of possible contamination **unknown**
___ feet Direction ___ Type ___
Well disinfected upon completion Yes No

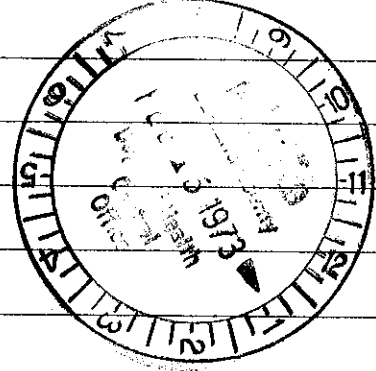
15 PUMP: Not installed
Manufacturer's Name **Deming**
Model Number **Turbine** HP **15** Volts **230**
Length of Drop Pipe **40** ft. capacity **230** G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

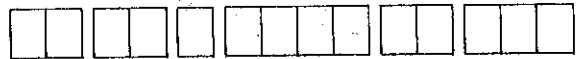
#2-6" Well (East Well)
[Handwritten signature]

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.
O.O. Corsaut Inc. **0025**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **15101 W. Eleven Mile Oak Park, Mich. 48237**
Signed *[Signature]* Date **2/8/73**
AUTHORIZED REPRESENTATIVE

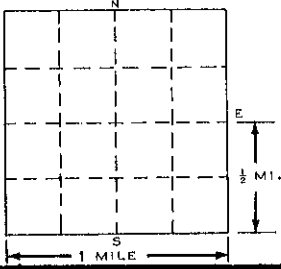


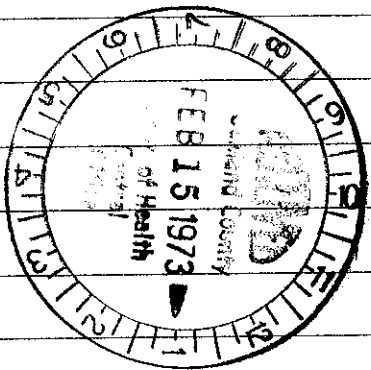
FEB 22 1973



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL			3 OWNER OF WELL:		
County Oakland	Township Name White Lake	Fraction <i>Sec 21 1/2 NW 1/4</i>	Section Number 21	Town Number 23	Range Number 8 E/W
Distance And Direction from Road Intersections N. side of M-59 about 1/2 mile W. of Porter Rd.			Address Super Const. Co. 17515 W. 9 Mile 170 Honeywell Center Southfield, Michigan 48075		
Street address & City of Well Location			4 WELL DEPTH: (completed) Date of Completion 69 1/2 ft. 4/17/72		
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"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/>		
2 FORMATION			6 USE: <input 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"/> Apt.		
THICKNESS OF STRATUM			7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface 2 ft.		
Sand	33'	33'	8 in. to 60 1/2 ft. Depth Weight 1945 lbs./ft. in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Sandy clay	15'	48'	8 SCREEN: Johnson stainless steel Dia.: 6" Type: _____ Slot/Cut Top 5' #80 Length 5' Setback bottom 5' #80 and 69 1/2 ft. Fittings: 5"x18" nipple		
Gravel	2'	50'	9 STATIC WATER LEVEL 29 ft. below land surface		
Coarse gravel & sand	19 1/2'	69 1/2'	10 PUMPING LEVEL below land surface 58 ft. after 8 hrs. pumping 302 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.		
			11 WATER QUALITY in Parts Per Million: Iron (Fe) 0.3 Chlorides (Cl) 51 Hardness 289 Other _____		
			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade		
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.		
			14 Nearest Source of possible contamination unknown _____ feet _____ Direction _____ Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name Deming Model Number turbine HP 15 Volts 230 Length of Drop Pipe 40 ft. capacity 230 G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc. Highland Complex #1-6" well			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. O.O. Corsaut Inc. 0025 REGISTERED BUSINESS NAME REGISTRATION NO. Address 15101 W. Eleven Mile Oak Park, Michigan 48237 Signed <i>[Signature]</i> 2/8/73 AUTHORIZED REPRESENTATIVE		



USE A 2ND SHEET IF NEEDED

3

NOV 03 1977

WATER WELL RECORD
ACT 294 PA 1965

21

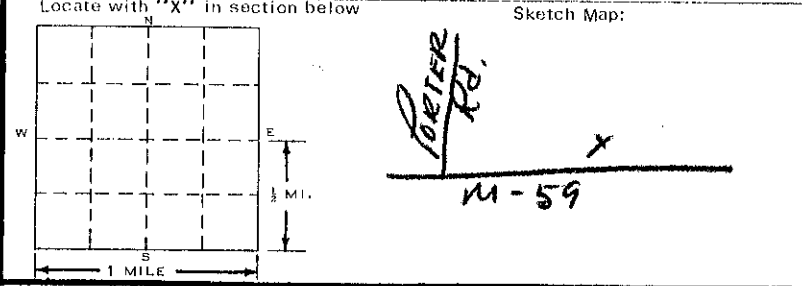
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County CLARKLAND	Township Name WHITE LAKE	Fraction SE 1/4 NW 1/4	Section Number 22	Town Number 3 N 1/2	Range Number 8 E 1/2
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Distance And Direction from Road Intersections
1/4 MI. EAST of M-59
PORTER RD. LAKE SHORE APARTMENTS

Street address & City of Well Location
LAKE SHORE APARTMENTS, FRANKLIN, MICH



3 OWNER OF WELL:
Address **Dutch Wischman Inc. 25830 FRANKLIN PARK DR FRANKLIN, MICH**

4 WELL DEPTH: (completed) Date of Completion
156 ft. 6/77

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored

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

7 CASING: Threaded Welded Diam. **4"** Height: Above/Below Surface **156** ft. Weight **156** lbs./ft. Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
BROWN CLAY & ROCKS.		30'
BLUE CLAY, SAND & GRAVEL	50'	80'
10 SLOT WATER SAND.	15'	95'
BLUE CLAY & RUNNING SANDS.	40'	135'
BLUE CLAY	15'	145'
WATER GRAVEL		156

8 SCREEN: Type **STAINLESS STEEL** Dia. **4"**
Slot/Gauze **18** Length **8'**
Set between **145** ft. and **156** ft.
Fittings: **1/4" BLANK, K PALMER**

9 STATIC WATER LEVEL
33 ft. below land surface

10 PUMPING LEVEL below land surface
58 ft. after **1/2** hrs. pumping **60** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

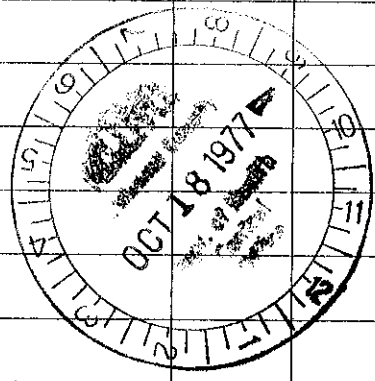
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
110 feet **W** Direction **SEPTIC** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **FLINT & WALLING**
Model Number **30 FE7** HP **3** Volts **230**
Length of Drop Pipe **105** ft. capacity **55** G.P.M.
Type: Submersible Jet Reciprocating



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

16 Remarks, elevation, source of data, etc.
VERY STONEY DRILLING.

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.
S. WARD'S SONS. 0058
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **6253 CRANLANE CHARLSTON**
Signed **P Ward** Date **6/77**
AUTHORIZED REPRESENTATIVE

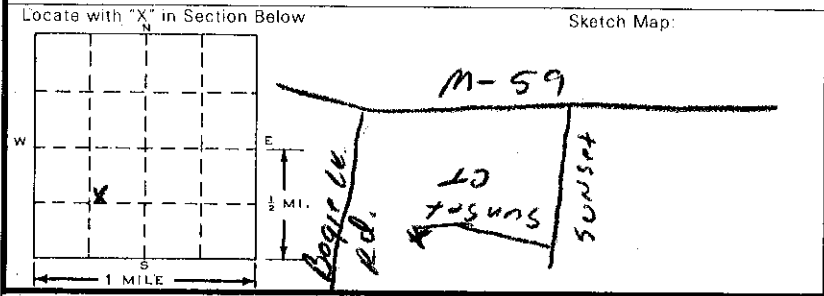
MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL					
County Oakland	Township Name White Lk.	Fraction SW 1/4 SW 1/4	Section Number 21	Town Number 3 N	Range Number 8 E

Distance And Direction From Road Intersection
**3/4 mile E. of Bogie Lk. rd.
S. side of M-59**



3 OWNER OF WELL: **Worthington**
Address **7150 Sunset Ct.
White Lk.**
Address Same As Well Location? Yes No

4 WELL DEPTH: **101 FT.** Date Completed **6 25 94**
 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: Steel Threaded Welded
 Plastic Diameter **4** in. to **101** ft. depth
Height Above/Below Surface **1** ft.
Weight **11** lbs./ft.
Grouted Drill Hole Diameter _____ in. to _____ ft. depth
Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
sand / gravel	15	15
wet sand / gravel	10	25
water sand	20	45
blue clay	15	60
dirty gravel little		
blue clay wet	30	90
water sand	11	101

8 SCREEN: Not installed
Type **STAINLESS** Diameter **3"**
Slot/Gauze **15** Length **4'**
Set between **97** ft. and **101** ft.
FITTINGS: K-Packer Lead Packer Bremor Check
 Blank above screen **1** ft. Other _____

9 STATIC WATER LEVEL: **15** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
97 ft. after **1/2** hrs. pumping at **40** 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 _____ to _____ ft.
 Neat cement Bentonite Other **BENSICAL**
No. of bags of cement **3** Additives **DAY**

13 Nearest source of possible contamination
Type **Septic** Distance **1/2** mi. Direction **50+**
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 **5J** HP **1/2** Volts **115**
Length of Drop Pipe **63** ft. capacity **12** G.P.M.
TYPE: Submersible Jet
PRESSURE TANK: **Used Existing**
Manufacturer's name _____
Model number **02** Capacity **40** Gallons

RECEIVED
MICH. DEPT. OF PUBLIC HEALTH
AUG 17 94
BUREAU OF ENVIRONMENTAL
AND OCCUPATIONAL HEALTH

USE A 2ND SHEET IF NEEDED

15. Remarks, elevation, source of data, etc.
**old well 20' 1 1/4
sealed with A Bensical**

17. Rig Operator's Name:
[Signature]

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.
Joe Maher W.P. INC 1928
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **4225 S. Commerce, Comm.**
Signed **[Signature]** Date **6-30-94**
AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

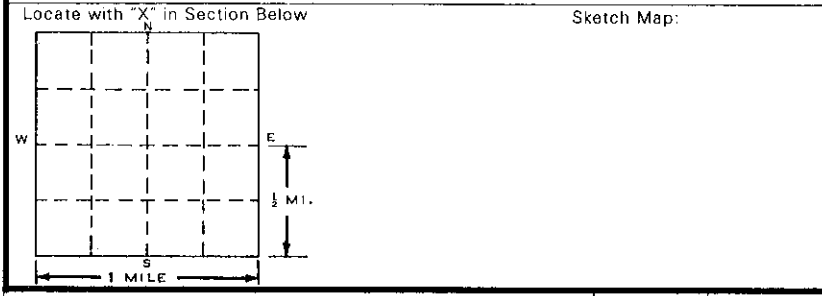
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PERMIT NUMBER

1 LOCATION OF WELL						
County Oakland	Township Name White Lake	Fraction 1/4	Section Number 21	Town Number 3N N/S	Range Number 8E E/W	

Distance And Direction From Road Intersection
same

Street Address & City of Well Location



3 OWNER OF WELL: **Alpine Valley Ski Resort**
6775 E. Highland Rd.
Milford, MI 48042

Address Same As Well Location? Yes No

4 WELL DEPTH: **93** FT. Date Completed **9** / **14** / **89** New Well Replacement Well

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 Threaded Plastic Welded
 Height: Above/Below Surface **1.85** ft.
 Weight **32** lbs./ft.
 Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Fill	8	8
Yellow Sand	6	14
Gray Clay	4	18
Clay, Gravel	17	35
Large Gravel	5	40
Clay, Gravel	5	45
Medium Size Gravel & Sand	15	60
Large Size Gravel	7	67
Medium Size Gravel & Sand	25	92

8 SCREEN: Not Installed
 Type **s/s wirewound** Diameter **7**
 Slot/Gauze **60/45** Length **20**
 Set between **75** ft. and **93** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **3** ft. **blk.** Other **7" pipe**

9 STATIC WATER LEVEL: **4** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
20 ft. after **5** hrs. pumping at **500+** G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

11 WELL HEAD COMPLETION: Pitless adapter **1 1/2"** above grade **1.85**
 Basement offset Approved pit

12 WELL GROUTED? No Yes From **0** to **20** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives _____

Well Drilled for snow supply water
 Liquid end Red Jacket 7C620
 Motor Hitachi 15HP 460V 3Ø
 wire #10-3 Casing terminated 2' above grade
 with a sanitary well seal.

13 Nearest source of possible contamination
 Type _____ 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 **Red Jacket**
 Model number **7C620** HP **15** Volts **460 3Ø**
 Length of Drop Pipe **63** ft. capacity **500** G.P.M.
 TYPE: Submersible Jet _____
 PRESSURE TANK: _____
 Manufacturer's name **None**
 Model number _____ Capacity _____ Gallons

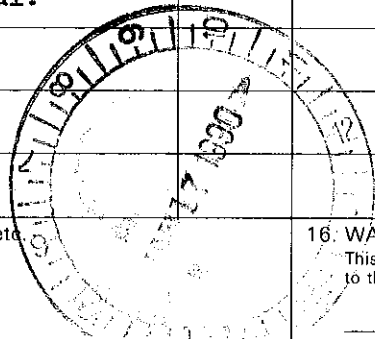
15. Remarks, elevation, source of data, etc.

17. Rig Operator's Name:

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.

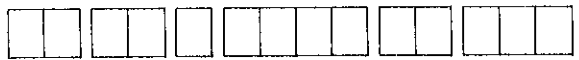
BROWN DRILLING CO., INC. **26**
REGISTERED BUSINESS NAME REGISTRATION NO.

Address **HOWELL**
 Signed *Harry R. Brown* Date **1-9-89**
AUTHORIZED REPRESENTATIVE



USE A 2ND SHEET IF NEEDED

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



JAN 14 1976

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>SE 1/4 NE 1/4 SW 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N.P.</i>	Range Number <i>8 E/W.</i>
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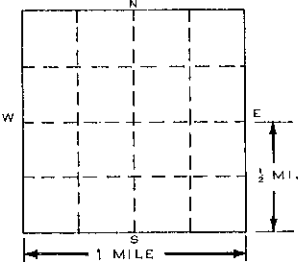
Distance And Direction from Road Intersections

*300 yds. S. of M-59
75 ft. E. of Elkinford*

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:

*Mr. Allen
710 Elkinford*

4 WELL DEPTH: (completed) Date of Completion

75 ft. *4-18-75*

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. _____ Height: Above/~~XXX~~ Surface *1* ft.
4 in. to *71* ft. Depth Weight *10.40* lbs./ft.
 Drive Shoe? Yes No

2 FORMATION

THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM

<i>Set pipe in sand - drove</i>	<i>30</i>	<i>30</i>
<i>Hand Pan</i>	<i>15</i>	<i>45</i>
<i>Clay</i>	<i>20</i>	<i>65</i>
<i>Water gravel</i>	<i>10</i>	<i>75</i>

8 SCREEN:

Type: *Slotted* Dia.: *3 1/2"*
 Slot/Gauze *10* Length *4 ft.*
 Set between *71* ft. and *75* ft.
 Fittings: _____

9 STATIC WATER LEVEL

40 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 Adapter 12" Above Grade

13 Well Grouted? Yes No

Neat Cement Bentonite
 Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination

50 feet *E* Direction *Septic tank* Type _____
 Well disinfected upon completion Yes No

15 PUMP: Not installed

Manufacturer's Name _____
 Model Number _____ HP _____ Volts _____
 Length of Drop Pipe _____ ft. capacity _____ G.P.M.
 Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

DB

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

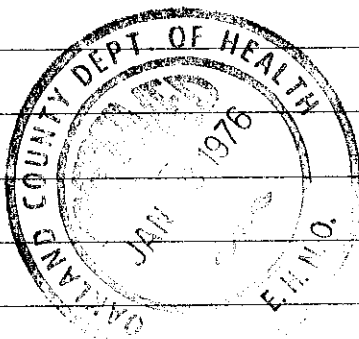
17 WATER WELL CONTRACTOR'S CERTIFICATION:

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

Fettig Well Drilling *0413*
 REGISTERED BUSINESS NAME REGISTRATION NO.

Address *1051 Round Lake Road*

Signed *Jerry Fettig* Date *1-6-76*
 AUTHORIZED REPRESENTATIVE

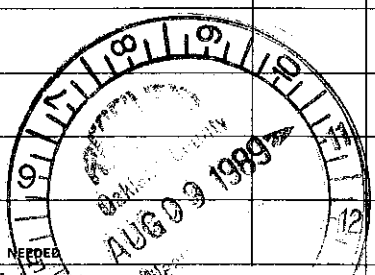


USE A 2ND SHEET IF NEEDED.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL					
County Oakland	Township Name White Lake	Fraction SW 1/4 NW 1/4 SE 1/4	Section Number 21	Town Number 3 NXK	Range Number 8 EXK
Distance And Direction From Road Intersection Approximately 1000 south of intersection of Moorcroft and Hillwood, off M-59.			3 OWNER OF WELL: Mr. & Mrs. David LaRouche		
Street Address & City of Well Location 493 Hillwood, Milford, Michigan 48042			Address 493 Hillwood Milford, Michigan 48042		
Locate with "X" in Section Below			Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Sketch Map: 			4 WELL DEPTH: 40 FT. Date Completed: 07 MO. 31 DAY 89 YEAR <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement Well		
2 FORMATION DESCRIPTION			5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Dug		
			<input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <input type="checkbox"/> Jetted <input type="checkbox"/>		
Yellow and Clay Water-bearing sand			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		
THICKNESS OF STRATUM 5 30 5			7 CASING: Diameter <input checked="" type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded		
			Height: Above 0675X Surface 1 ft. Weight 11 lbs./ft. Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
DEPTH TO BOTTOM OF STRATUM 5 35 40			8 SCREEN: <input type="checkbox"/> Not installed		
			Type stainless steel Diameter 4" Slot/Grit xxx .010 Length 4 ft. Set between 36 ft. and 40 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input checked="" type="checkbox"/> Blank above screen 1 ft. Other 3" plug		
			9 STATIC WATER LEVEL: 0 ft. below land surface <input checked="" type="checkbox"/> Flow		
			10 PUMPING LEVEL: below land surface 20 ft. after 2 hrs. pumping at 20 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 0 to 35 ft.		
			<input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____		
			13 Nearest source of possible contamination		
			Type septic Distance 52 ft. Direction west Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			14 PUMP: <input checked="" type="checkbox"/> Not installed <input type="checkbox"/> Pump installation Only		
			Manufacturer's name Webtrol Model number 102S58B-SP HP 1/2 Volts 230. Length of Drop Pipe 30 ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name Amtrol Well-X-Trol Model number WX-203 Capacity 82 Gallons		
15. Remarks, elevation, source of data, etc.			16. WATER WELL CONTRACTOR'S CERTIFICATION:		
Driller Daniel H. Chissus			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Daniel H. Chissus Well & Pump Service 63-0127 REGISTERED BUSINESS NAME REGISTRATION NO. 4885 Walnut Lake Road, W. Bloomfield, MI 48033 Address		
17. Rig Operator's Name:			Signed Daniel H. Chissus Date 7-31-89		
Daniel H. Chissus			AUTHORIZED REPRESENTATIVE Authority: Completion: Penalty: Act 368 PA 1978 Required Conviction of a violation of any provision is a misdemeanor.		



RECEIVED
 Michigan Department of Public Health
 AUG 14 1989
 Bureau of Environmental and
 Sanitary Health - 616/33

MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		
County OAKLAND	Township Name WHITE LAKE	Fraction SE 1/4 NW 1/4 E 1/4
Section Number 21		Town Number 3 NWS Range Number 8 EW
Distance And Direction From Road Intersection 1 mile east on M-59 from Bogie LK RD 500 ft west on M-59 from Dolans		
Street Address & City of Well Location Address FUCIARELLI 910 CHARLTON DOWNSVILLE, OH		
Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		3 OWNER OF WELL: Address FUCIARELLI 910 CHARLTON DOWNSVILLE, OH
Locate with "X" in Section Below 		Date Completed MO. 11 DAY 19 YEAR 1989 4 WELL DEPTH: 49 FT. <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement Well
2 FORMATION DESCRIPTION		5 CASING: Diameter <input checked="" type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above/Below Surface 10 ft Weight _____ lbs./ft. Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	6 <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"/> 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"/> _____
BROWN CLAY HARD	18	7 CASING: 2 in. to 46 ft. depth _____ in. to _____ ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth _____ in. to _____ ft. depth
CRASSLE GRAVEL	23	8 SCREEN: <input type="checkbox"/> Not Installed Type JOHNSON Diameter 1 1/4 Slot/Gauze 7 Length 3 1/2 Set between 47 ft. and 49 ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input checked="" type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen 5 ft. Other _____
WATER BEARING SAND	8	9 STATIC WATER LEVEL: 19 ft. below land surface <input type="checkbox"/> Flow
		10 PUMPING LEVEL: below land surface 41 ft. after 1/2 hrs. pumping at 10 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 0 to 46 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 55 ft. Direction NE Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was old well plugged? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		14 PUMP: <input checked="" type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet _____ PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons
USE A 2ND SHEET IF NEEDED 		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. Wickoff Well Drilling 63-1856 REGISTERED BUSINESS NAME REGISTRATION NO. Address 3020 GLENGARY Signed Robert Wickoff Date 3/9/89 AUTHORIZED REPRESENTATIVE
15. Remarks, elevation, source of data, etc.		
17. Rig Operator's Name:		

WATER WELL AND PUMP RECORD

PERMIT NUMBER [] [] [] [] [] [] [] [] [] []

PART 127 ACT 368, P.A. 1978

1 LOCATION OF WELL
 County: Oakland Township Name: White Lake Fraction: NE 1/4 NW 1/4 SE 1/4 Section Number: 21 Town Number: 3 N/S Range Number: 8 E/W

Distance And Direction From Road Intersection: Southwest corner of Elkington and Highland Road on
 Street Address & City of Well Location: 845 Elkington

Locate with "X" in Section Below

3 OWNER OF WELL: Karl Bergschwaninger
 Address: 845 Elkington Milford MI 48042
 Address Same As Well Location? Yes No

4 WELL DEPTH: (completed) 53 ft. Date of Completion: 5-31-89

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 Threaded Plastic Welded
5 in. to 48 ft. depth Height: Above/Below Surface 1 ft.
7 1/8 in. to 48 ft. depth Weight 11 lbs./ft.
 Grouped Drill Hole Diameter: _____ Drive Shoe Yes No

8 SCREEN: Not Installed
 Type S.S. Diameter 4"
 Slot/Gauze 2 Length 5'
 Set between 48 ft. and 53 ft.
 FITTINGS: K-Packer Lead Packer Bromer Check
 Blank above screen 1 ft. Other _____

9 STATIC WATER LEVEL: 18 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
20 ft. after 1/2 hrs. pumping at 15 G.P.M.
20 ft. after 1 hrs. pumping at 15 G.P.M.

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

12 WELL GROUTED? No Yes From Top to 25 ft.
 Neat cement Bentonite Other _____
 No. of bags of cement 1 1/2 Additives _____

13 Nearest source of possible contamination
 Type Septic Distance 50 ft Direction 60
 Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
 Manufacturer's name Few
 Model number SD115 HP 1/2 Volts 115
 Length of Drop Pipe 30 ft. capacity 10 G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK:
 Manufacturer's name Well X-trol
 Model number 202 Capacity 42 Gallons

15. Remarks, elevation, source of data, etc.
 RECEIVED
 Mich. Dept. of Public Health
 JUN 1 1989
 Division of Environmental and Occupational Health - CWOS

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.
Zelony Well Drilling, Inc. 63-1749
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address 4794 N. Duck Lake, Highland
 Signed Bill Zelony Date 6/1/89 48031
 AUTHORIZED REPRESENTATIVE

3

JUN - 3 1976

WATER WELL RECORD
ACT 294 PA 1965

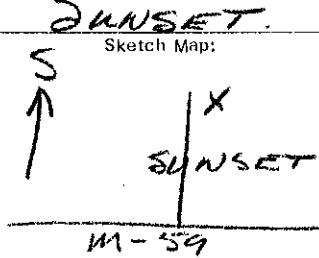
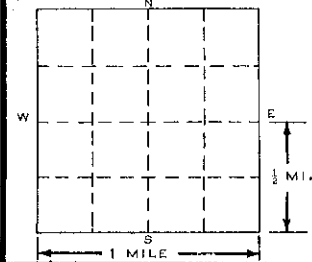
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Fraction SE SW 1/4 NE 1/4 NW 1/4	Section Number 21	Town Number 3	Range Number N/S 8 E/W
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Distance And Direction from Road Intersections
1/4 MILE SOUTH OF M-59 AND SUNSET

Street address & City of Well Location
Locate with "X" in section below



3 OWNER OF WELL:

Address **JOE LAFRAMME BUILDER**
1700 MERED LANE
PONTIAC 48095

4 WELL DEPTH: (completed) Date of Completion
76' ft. **5/74**

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
Diam. **4"** Surface _____ ft.
_____ in. to _____ ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown Clay		6'
Sand + Gravel	2'	8'
Blue Clay	40'	48'
Dark Sand (Gray)	13'	61'
Blue Clay + Sand	5'	66'
Sand (Brown)	4'	70'
Coarse Sand		76'

8 SCREEN: Type: **Spot** Dia.: **4"**
Slot/Gauze **#10** Length **4'**
Set between **72** ft. and **76** ft.
Fittings: **K. Packer**

9 STATIC WATER LEVEL
90' ft. below land surface

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

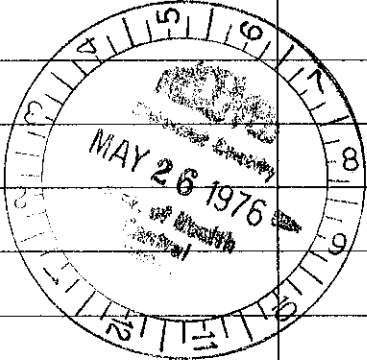
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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

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

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

15 PUMP: Not installed
Manufacturer's Name **Edw**
Model Number **SPAS** HP **1/2** Volts **230**
Length of Drop Pipe **63** ft. capacity **10** G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

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

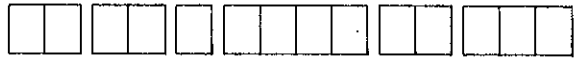
17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
J. WARD & SON **0058**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **6253 CRAWLWAY, CHARLTON**
Signed **J. Ward** Date **6/74**
AUTHORIZED REPRESENTATIVE

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County <i>Oakland</i>	Twp. <i>White Lake</i>	Fraction $\frac{1}{4}$	SE $\frac{1}{4}$	Section No. <i>21</i>	Town <i>3 N^W.</i>	Range <i>8 E^W.</i>					
Distance And Direction from Road Intersections <i>$\frac{1}{2}$ mile S of M-59 $\frac{1}{2}$ mile S.W. of Elizabeth Lake Rd.</i>			OWNER No. _____		3 OWNER OF WELL: Address <i>Glen's Heating Lodge Drive Waterford, Mich.</i>						
Street address & City of Well Location <i>M-59, Milford</i>					4 WELL DEPTH: (completed) Date of Completion <i>50</i> ft. <i>6-22-67</i>						
2 FORMATION		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	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"/>							
<i>Drift</i>		<i>21</i>	<i>21</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"/>							
<i>Gravel and Rock</i>		<i>24</i>	<i>45</i>	7 CASING: Diam. Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: XXXX Above/Below <i>2</i> in. to <i>46</i> ft. Depth surface <i>7</i> ft. Weight <i>3.75</i> lbs/ft. Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
<i>Water Gravel</i>		<i>5</i>	<i>50</i>	8 SCREEN: Type: <i>Slotted</i> Dia.: <i>1 1/2</i> Slot/Gauze <i>10</i> Length <i>4 ft.</i> Set between <i>46</i> ft. and <i>50</i> ft. Fittings: <i>2 ft. 1 1/2 gal. blank 2 in. check</i>							
				9 STATIC WATER LEVEL <i>36</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 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 <i>54</i> feet <i>N</i> Direction <i>S. Tank</i> Type _____ Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
				15 PUMP: Manufacturer's Name <i>Not Installed</i> Model Number _____ HP Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating							
16 Remarks, elevation, source of data, etc. ADDED INFO. BY DRILLER. ITEM NO. *CORRECTED BY: **ADDITION BY:				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>Fettig Well Drilling</i> _____ <i>0413</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>1567 Petrolia, Union Lake</i> Signed _____ Date _____ AUTHORIZED REPRESENTATIVE							



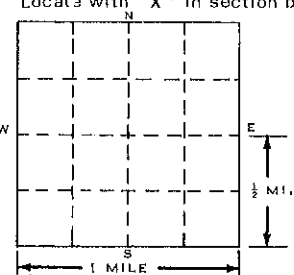
WATER WELL RECORD

ACT 294 PA 1965

SUNNISE

MICHIGAN DEPARTMENT

OF
PUBLIC HEALTH

1 LOCATION OF WELL			3 OWNER OF WELL:		
County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>SE 1/4 NW 1/4 SW 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N/S.</i>	Range Number <i>8 E/W.</i>
Distance And Direction from Road Intersections <i>120 ft. E. of Hillwood 1/4 mile S. of Highland Road</i>			Address <i>Mr. Ballew 590 Hillwood</i>		
Street address & City of Well Location <i>590 Hillwood</i>			4 WELL DEPTH: (completed) Date of Completion <i>50 ft. 5-1-70</i>		
Locate with "X" in section below 			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"/>		
Sketch Map:			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"/>		
2 FORMATION			7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Surface <i>1</i> ft.		
			Diam. <i>2</i> in. to <i>46</i> ft. Depth <i>3.75</i> lbs./ft. Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
<i>Drove pipe</i>			8 SCREEN:		
			Type: <i>Slotted</i> Dia.: <i>1 1/2"</i> Slot/Gauze <i>10</i> Length <i>42"</i> Set between <i>46</i> ft. and <i>50</i> ft. Fittings:		
<i>Water bearing gravel</i>			9 STATIC WATER LEVEL <i>28</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 _____ Other _____		
			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade		
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.		
			14 Nearest Source of possible contamination <i>50</i> feet <i>NW</i> Direction <i>Septic Tank</i> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
			16 Remarks, elevation, source of data, etc. ADDED INFO. BY DRILLER, ITEM NO. CORRECTED BY: <i>CMJ</i> REVISION BY:		
			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>Fettig Well Drilling</i> <i>0413</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>1051 Round Lake Road</i> Signed <i>Jerry R. Fettig</i> AUTHORIZED REPRESENTATIVE Date <i>6-29-70</i>		

JUL 1 1970

OCT 20 1972

WATER WELL RECORD
ACT 294 PA 1965

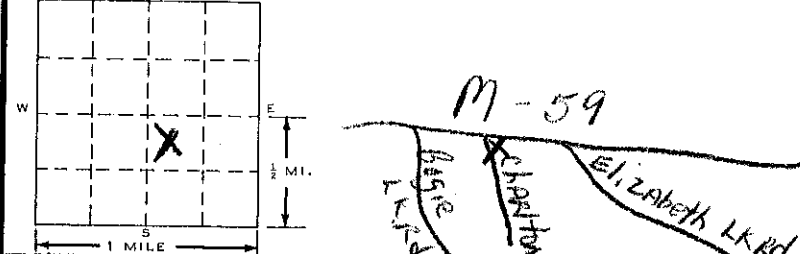
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name White LAKE	Fraction NE 1/4 NW 1/4 SE 1/4	Section Number 21	Town Number 30S.	Range Number 8E.W.
--------------------------	------------------------------------	---	-----------------------------	----------------------------	------------------------------

Distance And Direction from Road Intersections
**SE Cor ~~W. & Charlton~~ & Charlton.
M 59**

Street address & City of Well Location
SAME



3 OWNER OF WELL: **I. VANWAGNER**
Address
**910 CHARITON
White LAKE, Mich.**

4 WELL DEPTH: (completed) **48** ft. Date of Completion
10-2-72

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 **1** ft.
Diam. **2** in. to **48** ft. Depth Weight **3.75** lbs./ft.
2 in. to **48** ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
BROWN CLAY & GRAVEL	12'	12'
GRAVEL	9'	21'
FINE yellow SAND (some WATER)	16'	37'
Blue CLAY	3'	40'
GRAVEL	8'	48'

8 SCREEN: Type: **Johnson** Dia.: **1 1/4"**
Slot/Gauze: **18** Length: **3'**
Set between **45** ft. and **40** ft.
Fittings: **BREMER**

9 STATIC WATER LEVEL
23 ft. below land surface

10 PUMPING LEVEL below land surface
23 ft. after **1** hrs. pumping **18** 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

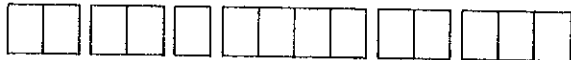
13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From _____ ft. to _____ ft.

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

15 PUMP: Not installed
Manufacturer's Name **F & W**
Model Number **C6267** HP **1/4** Volts **110**
Length of Drop Pipe **21** ft. capacity **12** G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.
ADDED INFO. BY DRILLER, ITEM NO. _____
CORRECTED BY: **JH**
ADDITION BY: _____

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.
OTB Sabourin Drilling 1113
REGISTERED BUSINESS NAME REGISTRATION NO. _____
Address **8319 Lagoon, Union Lake, Mich**
Signed **P. Sabourin** Date **10/3/72**
AUTHORIZED REPRESENTATIVE



APR 17 1973

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

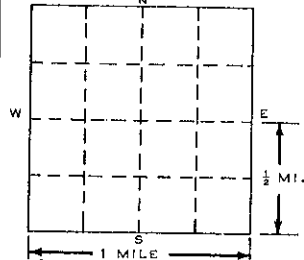
County: Oakland Township Name: White Lake Fraction: SW 1/4 NW 1/4 SE 1/4 Section Number: 21 Town Number: 3 N Range Number: 8 E

Distance and Direction from Road Intersections

1/4 mile S. of M-59
50 ft. W. of Hillwood

Street address & City of Well Location: 669 Hillwood

Locate with "X" in section below Sketch Map:



3 OWNER OF WELL: Alan Cross
Address: 669 Hillwood

4 WELL DEPTH: (completed) Date of Completion
44 ft. 11-16-71

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: 1 ft.
2 in. to 40 ft. Depth Weight: 3.75 lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Set pipe in sand - drove</u>	<u>40</u>	<u>40</u>
<u>Water bearing gravel</u>	<u>4</u>	<u>44</u>

8 SCREEN: Type: Slotted Dia.: 1 1/2"
Slot/Gauze: 10 Length: 42"
Set between 40 ft. and 44 ft.
Fittings: _____

9 STATIC WATER LEVEL: 13 ft. below land surface

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

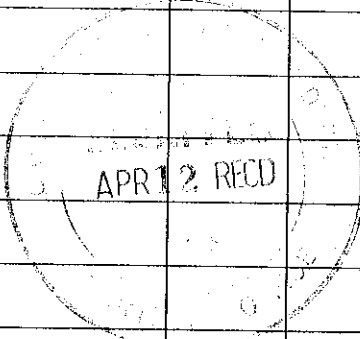
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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

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

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

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

ADDED INFO. BY DRILLER, ITEM NO.

CORRECTED BY: *[Signature]*

ADDITION BY: *[Signature]*

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.
Fettig Well Milling 0413
REGISTERED BUSINESS NAME REGISTRATION NO.
Address: 1051 Round Lake Road
Signed: Ferry J. Fettig Date: 4-11-73
AUTHORIZED REPRESENTATIVE

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL															
County Oakland		Twp. White Lake		Fraction NE 1/4		Section No. 21		Town 3		Range 8		N/S.		E/W.	
Distance And Direction from Road Intersections 150 ft. W. Elkinford 200 yd. S. M-59 Street address & City of Well Location				OWNER No. 825		3 OWNER OF WELL: Address Mr. Maynard 825 Elkinford									
2 FORMATION		THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		4 WELL DEPTH: (completed) 31 ft. Date of Completion 7-26-67									
Drift		25		25		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"/>									
Water bearing gravel		6		31		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: Threading <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Diam. 2 in. to 25 ft. Depth Height: XXXX / Below surface 4 ft. Weight 3.75 lbs./ft. Drive Shoe? Yes <input type="checkbox"/> No <input type="checkbox"/>									
						8 SCREEN: Type: Slotted Dia.: 1 1/2" Slot/Gauze 10 Length 42" Set between 28 ft. and 31 ft. Fittings:									
						9 STATIC WATER LEVEL 20 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 type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade									
						13 GROUTING: Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Material: <input type="checkbox"/> Neat Cement <input type="checkbox"/> Depth: From _____ ft. to _____ ft.									
						14 SANITARY: Nearest Source of possible contamination 50 feet S Direction S. Tank Type Well disinfected upon completion <input type="checkbox"/> Yes <input type="checkbox"/> No									
						15 PUMP: Manufacturer's Name Not Installed Model Number _____ HP Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating									
16 Remarks, elevation, source of data, etc. ADDED INFO. BY DRILLER. ITEM NO. *CORRECTED BY: <i>* John</i> **ADDITION BY:				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. Fettig Well Drilling 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 1567 Petrolia, Union Lake Signed _____ Date _____ AUTHORIZED REPRESENTATIVE											

WATER WELL RECORD

ACT 294 PA 1965

NW SE #

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL LOTS 16-17 - Beendel Heights -

County Oakland Twp. White Lake Fraction 1/4 Section No. 21 Town 3 N.W. Range 8 E.W.

Distance And Direction from Road Intersections _____ OWNER No. _____

666 Elkinford Pontiac Mich. 3 OWNER OF WELL PHIL TANNER
Address 666 Elkinford

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
clay	0	17
fine sand.	17	32
clay	32	40
red sand	40	50
gray sand.	50	59
brown sand & gravel	59	68
water bearing.		

4 WELL DEPTH: (completed) _____ Date of Completion _____ ft.

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. _____ Height: Above/Below surface _____ ft.
2 in. to 69 ft. Depth Weight _____ lbs./ft.
_____ in. to _____ ft. Depth Drive Shoe? Yes No

8 SCREEN: Type Johnson Redhead Dia.: 1 1/2
Slot/Gauze 12 slot Length 3 ft
Set between 64 ft. and 68 ft.
Fittings: 2 1/2 coupling 1 1/2" pipe

9 STATIC WATER LEVEL 39 ft. below land surface

10 PUMPING LEVEL below land surface 39 ft. after 3 hrs. pumping 15 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 12" Above Grade

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

14 SANITARY: Nearest Source of possible contamination 60 feet 5 Direction septic tank Type _____
Well disinfected upon completion Yes No

15 PUMP: Manufacturer's Name _____
Model Number _____ HP _____
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible _____
 Jet Reciprocating

16 Remarks, elevation, source of data, etc.
ADDED INFO. BY DRILLER, DEAN
CORRECTED BY _____
ADDITION BY DES

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.
Dean Compton 20307
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 2961 Chrysler Pontiac
Signed Dean Compton Date 5-3-67
AUTHORIZED REPRESENTATIVE

MAY 11

MAR 21 1975

WATER WELL RECORD
ACT 294 PA 1969

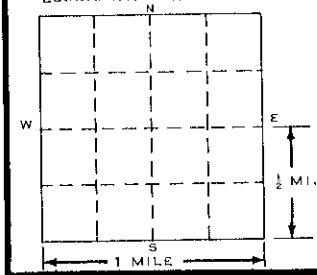
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>1/4 1/4</i>	Section Number <i>21</i>	Town Number <i>7 N/2</i>	Range Number <i>8 E/W</i>
--------------------------	------------------------------------	----------------------------	-----------------------------	-----------------------------	------------------------------

Distance And Direction from Road Intersections
700 S. of M 59

Street address & City of Well Location
589 Sunset



Sketch Map:

3 OWNER OF WELL:
Cosby House
Address
589 Sunset - Melvindale

4 WELL DEPTH: (completed) Date of Completion
75 ft. 6-13-74

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. *2 1/2*
Height: Above/Below Surface _____ ft.
Weight _____ lbs./ft.
Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Sand/Gravel</i>	<i>21</i>	<i>21</i>
<i>Sand/Gravel</i>	<i>21</i>	<i>42</i>
<i>Sand/Gravel/s B. clay</i>	<i>21</i>	<i>63</i>
<i>Sand/Gravel/water bearing</i>	<i>12</i>	<i>75</i>

8 SCREEN:
Type *Johnson Stainless* Dia.: *1 1/4*
Slot/Gauze *12* Length *3 ft*
Set between *72* ft. and *75* ft.
Fittings: *tail pipe & Greenwell head*

9 STATIC WATER LEVEL:
35 ft. below land surface

10 PUMPING LEVEL below land surface
30 ft. after *1* hrs. pumping *18* g.p.m.
30 ft. after *1* hrs. pumping *18* 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
500 feet *E* Direction *Septic* Type
Well disinfected upon completion Yes No

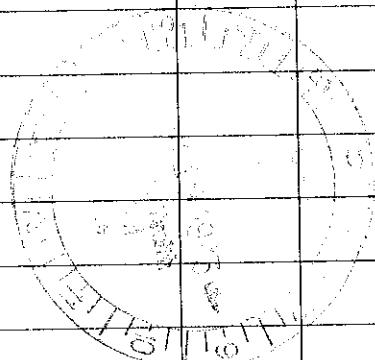
15 PUMP: Not installed
Manufacturer's Name *F.Y.W.*
Model Number *70P* HP *3/4* Volts *220*
Length of Drop Pipe *50* ft. capacity *10* G.P.M.
Type: Submersible
 Jet Reciprocating

16 Remarks, elevation, source of data, etc.

USE A 2ND SHEET IF NEEDED

ADDED INFO BY DRILLER, ITEM NO.
*CORRECTED BY
*APPROVED BY
BY _____
DATE _____

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.
Zelony Well Drilling *0311*
REGISTERED BUSINESS NAME REGISTRATION NO.
Address *4794 N. Beach St. E. - Wyandale*
Signed *Paul Zelony* Date *6-16-74*
AUTHORIZED REPRESENTATIVE

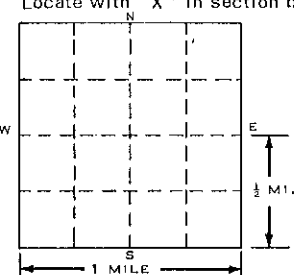




FEB 11 1972

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL County: <u>Cleveland</u> Township Name: <u>White Lake</u> Fraction: <u>N^{1/2} W^{1/2} S^{1/2} E^{1/2}</u> Section Number: <u>21</u> Town Number: <u>8</u> Range Number: <u>8</u>																			
Distance And Direction from Road Intersections: <u>400 Sunset White Lake</u>																			
Street address & City of Well Location: Locate with "X" in section below Sketch Map: 																			
2 FORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">FORMATION</th> <th style="width: 15%;">THICKNESS OF STRATUM</th> <th style="width: 15%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><u>Sand - Gravel</u></td> <td><u>37'</u></td> <td><u>37'</u></td> </tr> <tr> <td><u>Clay</u></td> <td><u>10'</u></td> <td><u>47'</u></td> </tr> <tr> <td><u>Gravel</u></td> <td><u>11'</u></td> <td><u>57'</u></td> </tr> <tr> <td><u>Coarse Sand</u></td> <td><u>29'</u></td> <td><u>86'</u></td> </tr> <tr> <td><u>Sand with</u></td> <td><u>12'</u></td> <td><u>98'</u></td> </tr> </tbody> </table>		FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<u>Sand - Gravel</u>	<u>37'</u>	<u>37'</u>	<u>Clay</u>	<u>10'</u>	<u>47'</u>	<u>Gravel</u>	<u>11'</u>	<u>57'</u>	<u>Coarse Sand</u>	<u>29'</u>	<u>86'</u>	<u>Sand with</u>	<u>12'</u>	<u>98'</u>
FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																	
<u>Sand - Gravel</u>	<u>37'</u>	<u>37'</u>																	
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<u>Gravel</u>	<u>11'</u>	<u>57'</u>																	
<u>Coarse Sand</u>	<u>29'</u>	<u>86'</u>																	
<u>Sand with</u>	<u>12'</u>	<u>98'</u>																	
3 OWNER OF WELL Address: <u>R.E. Wilber Gen. Del. Brighton</u>																			
4 WELL DEPTH: (completed) Date of Completion: <u>98</u> ft. <u>Nov 71</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"/> _____																			
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"/> Diam. <u>4</u> in. to <u>28</u> ft. Depth Height: Above/Below Surface <u>1</u> ft. Weight <u>11</u> lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																			
8 SCREEN: Type: <u>Stainless</u> Dia.: <u>4"</u> Slot/Gauge # <u>12</u> Length <u>6'</u> Set between <u>94</u> ft. and <u>98</u> ft. Fittings: <u>Anchor Plug & Coups</u>																			
9 STATIC WATER LEVEL <u>15</u> ft. below land surface																			
10 PUMPING LEVEL below land surface <u>25</u> ft. after <u>20</u> hrs. pumping <u>8</u> 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade																			
13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.																			
14 Nearest Source of possible contamination <u>35</u> feet <u>N</u> Direction <u>Septic</u> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																			
15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name: <u>Curators</u> Model Number: <u>SA750</u> HP <u>3/4</u> Volts <u>250</u> Length of Drop Pipe: <u>15</u> ft. capacity <u>15</u> G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating																			
16 Remarks, elevation, source of data, etc. <u>Drillers Log</u> <u>P.A. Prather</u>																			
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>John A. Roberts 0027</u> REGISTERED BUSINESS NAME: _____ REGISTRATION NO. _____ Address: <u>2838 Pleasant Valley Brighton</u> Signed: <u>J.A.R.</u> Date: <u>Jan 10-72</u> AUTHORIZED REPRESENTATIVE																			



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

JUN 18 1971

1 LOCATION OF WELL		
County OAKLAND	Township Name White Lake	Fraction NW 1/4 SW 1/4
Distance And Direction from Road Intersections 6830 M-59		Section Number 21
Street address & City of Well Location Locate with "X" in section below		Town Number 3 N/S.
		Range Number 8 E/W.
2 FORMATION		
FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Sand and Clay</i>	<i>17</i>	<i>17</i>
<i>Clay</i>	<i>9</i>	<i>26</i>
<i>Thin sand and Clay</i>	<i>11</i>	<i>37</i>
<i>Sand and Gravel</i>	<i>4</i>	<i>41</i>
3 OWNER OF WELL:		
Address Comfort Homes Inc 3297 Orchard Lake Keego Harbor Mich		
4 WELL DEPTH: (completed) Date of Completion 41 ft.		
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"/> _____		
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 Diam. _____ Surface 1 ft. 4 in. to 32 ft. Depth Weight 11 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
8 SCREEN:		
Type: STAINLESS Dia.: 3 5/8"		
Slot/Gauze 018 Length 6		
Set between 37 ft. and 41 ft.		
Fittings: K-Packer		
9 STATIC WATER LEVEL 12 ft. below land surface		
10 PUMPING LEVEL below land surface 18 ft. after 4 hrs. pumping 15 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: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade		
13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
14 Nearest Source of possible contamination _____ feet _____ Direction _____ Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name TAIT Model Number 5 HP 1/2 Volts 230 Length of Drop Pipe 30 ft. capacity 15 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc.		
<p>ADDED: _____</p> <p>CORRECTED BY: _____</p> <p>ADDITION BY: _____</p>		
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.		
Signature: Thomas R Forster		REGISTRATION NO. 0781
Address: 4725 White Lake Rd		
Signed: Parshall B. Storch		Date: 4-8-71
AUTHORIZED REPRESENTATIVE		

USE A 2ND SHEET IF NEEDED

8 FEB 14 1974

WATER WELL RECORD
ACT 294 PA 1965

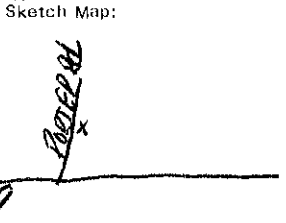
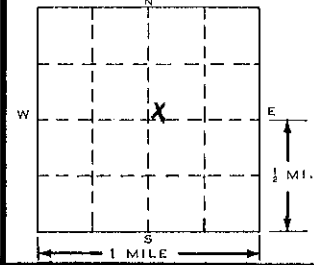
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Section Number 21	Town Number 73	Range Number N/S R/R E/W
--------------------------	------------------------------------	-----------------------------	--------------------------	------------------------------------

Distance And Direction from Road Intersections
WEST ON M-59 to PORTER Rd Right for .2 mile ON Right

Street address & City of Well Location
Locate with "X" in section below



3 OWNER OF WELL:

Address **W.J. SCHATZ
2803 S. SASLAW RD
OXFORD MICH.**

4 WELL DEPTH: (completed) Date of Completion

40 ft. 14 OCT 73

<input type="checkbox"/> Cable tool	<input type="checkbox"/> Rotary	<input type="checkbox"/> Driven	<input type="checkbox"/> Dug
<input type="checkbox"/> Hollow rod	<input checked="" type="checkbox"/> Jatted	<input type="checkbox"/> Bored	<input type="checkbox"/>

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

7 CASING: Threaded Welded
Diam. _____ Height: Above/Below Surface **1** ft.
Weight _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
CLAY	7'	7'
SAND & GRAVEL	10'	17'
GRAVEL & STONE	10'	27'
CLAY	8'	35'
CLAY & SAND	1'	36'
SAND	4'	40'

8 SCREEN:
Type: **Johnson Redhead** Dia.: **1 1/4"**
Slot/Gauze **12** Length **3'**
Set between **37** ft. and **40** ft.
Fittings: **1 FT BLANK & BREMER**

9 STATIC WATER LEVEL
19 ft. below land surface

10 PUMPING LEVEL below land surface
25 ft. after **1** hrs. pumping **14** 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
50 feet **E** Direction **SEPTIC** Type
Well disinfected upon completion Yes No

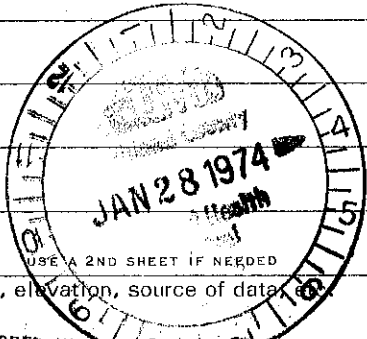
15 PUMP: Not installed
Manufacturer's Name **FRW**
Model Number **C-6445** HP **1/2** Volts **115VAC**
Length of Drop Pipe **21** ft. capacity **14** G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data

ADDED INFO BY _____ 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.

RAY LALONE Drilling REGISTRATION NO. **0140**
Address **1055 WYMAN PONTIAC MICH**
Signed **[Signature]** Date **26 Dec 73**
AUTHORIZED REPRESENTATIVE



FEB 14 1974

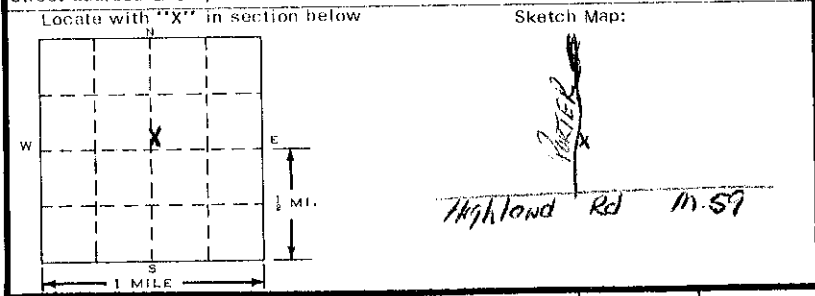
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Oakland	Township Name White Lake	Fraction SW 1/4 SW 1/4 NE 1/4	Section Number 21	Town Number T3 N/S	Range Number R8 E/W
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Distance And Direction from Road Intersections
**High Rd. W to PORTER Rd Right on PORTER .05 M
HOUSE ON Right of Rd.**



3 OWNER OF WELL:
Address
**JAY SCHATZ
1070 PORTER
PONTIAC**

4 WELL DEPTH: (completed) Date of Completion
50 ft. 1 May 73

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 **1** ft.
2 in. to **47** ft. Depth Weight **1** lbs./ft.
2 in. to **47** ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Sand & Gravel	15	15
Rock & Gravel	5	20
Gravel	10	30
Gravel Clay & Sand	10	40
Clay	6	46
Sand	4	50

8 SCREEN:
Type: **Johnson** **Roller** Dia.: **1 1/4"**
Slot/Gauge: **18** Length **3'**
Set between **47** ft. and **50** ft.
Fittings: **1 1/4" Blank & Bremer**

9 STATIC WATER LEVEL
23 ft. below land surface

10 PUMPING LEVEL below land surface
30 ft. after **1** hrs. pumping **850** 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.

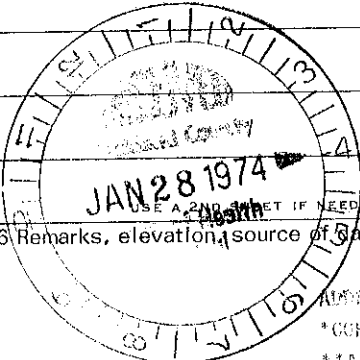
14 Nearest Source of possible contamination
50 feet **E** Direction **Septic** Type
Well disinfected upon completion Yes No

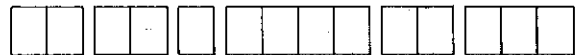
15 PUMP: Not installed
Manufacturer's Name **T&W**
Model Number **700** HP **1/2** Volts **115**
Length of Drop Pipe **21** ft. capacity **14** G.P.M.
Type: Submersible Jet Reciprocating

16 Remarks, elevation, source of data, etc.

NAME'S INFO BY DRILLER, ITEM NO.
*CORRECTED BY
ADDITION BY **Cl
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.
Ray Malone Drilling REGISTRATION NO. **0140**
Address **1055 HYMAN PONTIAC MICH**
Signed **Ray Malone** Date **1 May 73**
AUTHORIZED REPRESENTATIVE





WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

2 PL

1 LOCATION OF WELL

County Oakland	Township Name White Lake	Fraction NE 1/4 SW 1/4	Section Number 21	Town Number T3N N/8	Range Number R8E E/W
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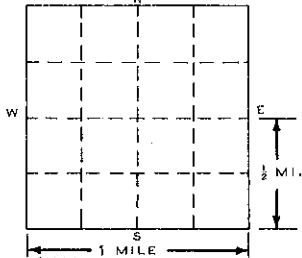
Distance And Direction from Road Intersections

**3/10 Mile South of M-59 &
1/10 Mile West of Sunset**

Street address & City of Well Location **6915 Taylor Trail, Milford**

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:

Address **Well drilled for Ed. Barnes
2200 West Draher Road
Oxford, Michigan**

4 WELL DEPTH: (completed) Date of Completion

88 ft. 10-25-74

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/Surface **3000** ft.
 Diam. **4** in. to **84** ft. Depth Weight **11.00** lbs./ft.

Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Clay and sand brown	36'	36'
Clay and sand gray	9'	45'
Sand muddy gray	15'	60'
Sand and gravel muddy gray	2'	62'
Sand muddy gray	3'	65'
Clay and sand gray	17'	82'
Sand and gravel gray	6'	88'

8 SCREEN:

Type: **Slot SS** Dia.: **3"**
 Slot/Length **18 48"**
 Set between **84** ft. and **88** ft.
 Fittings: **Neoprene packer**

9 STATIC WATER LEVEL

22 ft. below land surface

10 PUMPING LEVEL below land surface

40 ft. after **6** hrs. pumping **15** 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 **Clay slurry**

Depth: From **0** ft. to **25** ft.

14 Nearest Source of possible contamination

75 feet **NW** Direction **Septic** Type

Well disinfected upon completion Yes No

15 PUMP:

Not installed

Manufacturer's Name _____

Model Number _____ HP _____ Volts _____

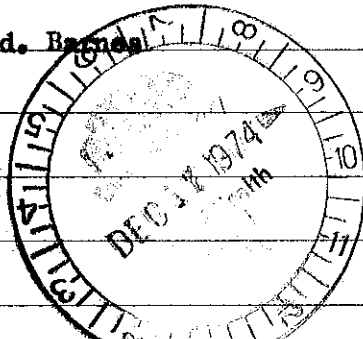
Length of Drop Pipe _____ ft. capacity _____ G.P.M.

Type: Submersible

Jet Reciprocating

Pumping Equipment to be installed by

Ed. Barnes



USE A 2ND SHEET IF NEEDED

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.

Ned's Water Well Works Inc. 0756
 REGISTERED BUSINESS NAME REGISTRATION NO.

Address **2372 Dexter Road, Pontiac, Michigan**

Signed *S. H. Niedel* Date **10-25-74**
 AUTHORIZED REPRESENTATIVE

JUL 30 1975

WATER WELL RECORD

ACT 294

PA 1968

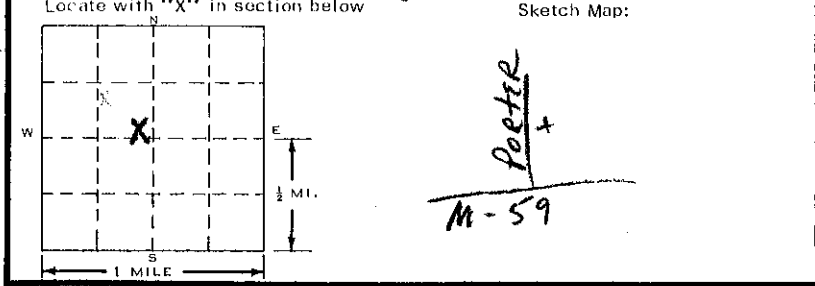
MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL

County: Oakland Township Name: White Lake Fraction: SE 1/4 NW 1/4 Section Number: 21 Town Number: 3 N.E. Range Number: 8 E.W.

Distance And Direction from Road Intersections: 800' N of M-59

Street address & City of Well Location: 1050 Porter Rd



3 OWNER OF WELL: LYNN GARIETT
Address: 620 UNION STREET
Milford

4 WELL DEPTH: (completed) Date of Completion: 56' ft. Nov 29-74

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: 1 ft.
Weight: _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>yellow clay</u>		<u>18</u>
<u>yellow clay + gravel</u>	<u>5</u>	<u>23</u>
<u>Fine Sand</u>	<u>3</u>	<u>26</u>
<u>Blue clay + sand</u>	<u>10</u>	<u>46</u>
<u>Gravel water bearing</u>	<u>10</u>	

8 SCREEN:
Type: JOHNSON Dia.: 4"
Slot/Gauge: 12 Length: 4'
Set between 52 ft. and 56 ft.
Fittings: 12" BLANK R PACKER

9 STATIC WATER LEVEL: 31 ft. below land surface

10 PUMPING LEVEL below land surface
27 ft. after 1 hrs. pumping 36 g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

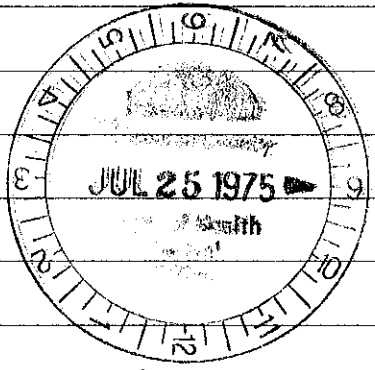
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
58 feet E Direction septic Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name: Red Jacket
Model Number: RN HP: 1/2 Volts: 220
Length of Drop Pipe: 30 ft. capacity: 18 G.P.M.
Type: Submersible Jet Reciprocating



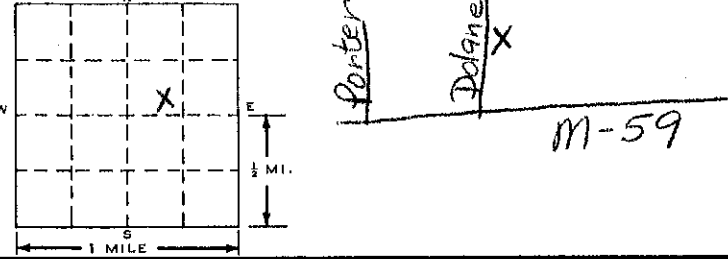
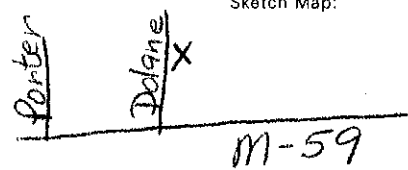
USE A 2ND SHEET IF NEEDED

16 Remarks, elevation, source of data, etc.

ADDED INFO BY DRIVER, 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.

Red Jacket Well Drilling REGISTRATION NO. 0794
Address: 3945 N VAN STONE Milford
Signed: James S. Interkool Date: 12-16-74
AUTHORIZED REPRESENTATIVE

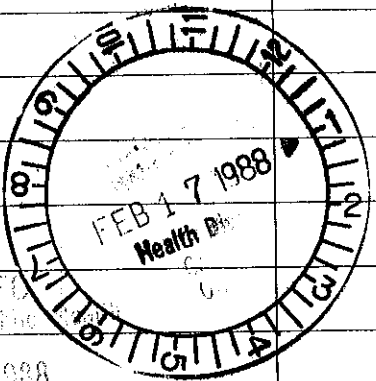
1 LOCATION OF WELL		
County Oakland	Township Name White Lake	Fraction SE 1/4 SE 1/4 NE 1/4 Section Number 21 Town Number 3 (N/S) Range Number 8 (E/W)
Distance And Direction From Road Intersection 1000 ft. north of M-59 on East side of Dolane		
Street Address & City of Well Location Address 1160 Dolane, Milford, MI 48042 Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Locate with "X" in Section Below 		Sketch Map: 
3 OWNER OF WELL: Kieb		
4 WELL DEPTH: (completed) 68 ft. Date of Completion 4-88		
5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Auger <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 IIa Public <input type="checkbox"/> Heat pump <input type="checkbox"/> Test Well <input type="checkbox"/> Type IIb Public		
7 CASING: Diameter <input type="checkbox"/> Steel <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above/Below Surface 1 ft. Weight 11 lbs./ft. 5 in. to 64 ft. depth Grouded Drill Hole Diameter 1 1/2 in. to 64 ft. depth Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8 SCREEN: Johnson <input type="checkbox"/> Not Installed Type 3.5 Diameter 4" Slot/Gauze 7 Length 4' Set between 64 ft. and 68 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen 1 ft. Other		
9 STATIC WATER LEVEL: 15 ft. below land surface <input type="checkbox"/> Flow		
10 PUMPING LEVEL: below land surface 20 ft. after 1/2 hrs. pumping at 15 G.P.M. 20 ft. after 1 hrs. pumping at 15 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 Top to 25 ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other No. of bags of cement 1 1/2 Additives		
13 Nearest source of possible contamination Type Septic Distance 60 ft. Direction W 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 TAIT Model number 5DL115 HP 1/2 Volts 115 Length of Drop Pipe 40 ft. capacity 10 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name Well X-Trol Model number 202 Capacity 42 Gallons		
15. Remarks, elevation, source of data, etc. <div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; text-align: center; margin: 0 auto; padding: 10px;"> MAY 23 1988 </div> <div style="text-align: right; margin-top: 10px;"> RECEIVED JUNO 1 1988 Bureau of Environmental and Occupational Health - GWOS </div>		
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. Zelony Well Drilling 1879 REGISTERED BUSINESS NAME Zelony Well Drilling REGISTRATION NO. 48031 Address 4794 Duck Lake, Sigel and 48031 Signed James Zelony Date 4-27-88 AUTHORIZED REPRESENTATIVE		



WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County OAKLAND		Township Name WHITE LAKE		Fraction SE ¼ NW ¼ SE ¼		Section Number 21		Town Number 3 N/S		Range Number 8 E/W	
Distance and Direction from Road Intersections OAKLAND				3 OWNER OF WELL: Mr. Kaminski Address 666 Elkinford							
Street address & City of Well Location Locate with "X" in section below				Sketch Map:				4 WELL DEPTH: (completed) Date of Completion 84 ft. 12-26-87			
				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"/> _____				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 type="checkbox"/> 4 in. to 8 ft. Depth _____ in. to _____ ft. Depth Height: Above <input checked="" type="checkbox"/> Below Surface _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes <input type="checkbox"/> No <input type="checkbox"/>							
2 FORMATION		THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		8 SCREEN: Type: Johnson Dia.: 3" Slot/Gauge: 10 Length 4 ft Set between 80 ft. and 84 ft. Fittings: K-Packer 1ft. Blank					
clay-sand-gravel		46		46		9 STATIC WATER LEVEL 55 ft. below land surface					
sand-gravel		13		59		10 PUMPING LEVEL below land surface 60 ft. after _____ hrs. pumping 60 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.					
sand-gravel-water		25		84		11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____					
						12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade					
						13 Well Grouted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat Cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 6 ft. to 66 ft.					
						14 Nearest Source of possible contamination S feet NE Direction septic Type Well disinfected upon completion <input type="checkbox"/> Yes <input type="checkbox"/> No					
						15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating					
USE A 2ND SHEET IF NEEDED 16 Remarks, elevation, source of data, etc.				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. Fettig WELL DRILLING 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 5575 Jackson Blvd. Davisburg Signed <i>Jerry Fettig</i> Date 12-31-87 AUTHORIZED REPRESENTATIVE							



RECEIVED
Mich. Dept. of Public Health

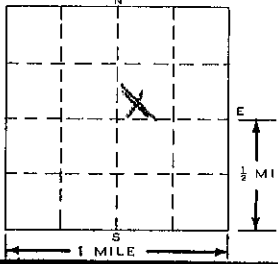
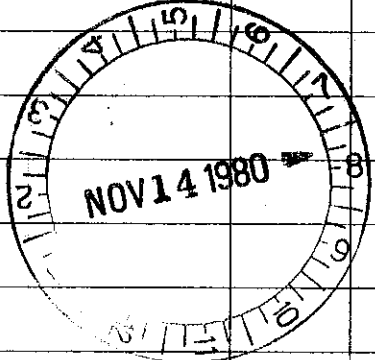
FEB 22 1988

Parent of Environmental and Occupational Health

NOV 24 1980

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL					
County <i>Cal.</i>	Township Name <i>White Th.</i>	Fraction <i>SW 1/4 SW 1/4 NE 1/4</i>	Section Number <i>21</i>	Town Number <i>T 3 N 8</i>	Range Number <i>R 8 E/W.</i>
Distance And Direction from Road Intersections <i>1/2 mile east of border on M 59</i>			3 OWNER OF WELL: <i>Cleof Hayes Inc</i>		
Street address & City of Well Location <i>5641 Soshabow, Clarksburg Mich. 48016</i>			Address		
Locate with "X" in section below 			Sketch Map: <i>1159-</i>		
2. FORMATION			4 WELL DEPTH: (completed) Date of Completion <i>92 ft.</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"/> Jetted <input type="checkbox"/> Bored		
THICKNESS OF STRATUM			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		
			7 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: Above/ Diam. Surface <i>1</i> ft. <i>4</i> in. to <i>92</i> ft. Depth Weight <i>11</i> lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Swamp mud			8 SCREEN: <i>Stainless steel 4"</i> Type: <i>4"</i> Dia.: <i>4"</i> Slot: <i>10</i> Length <i>4'</i> Set between <i>88</i> ft. and <i>92</i> ft. Fittings: <i>Apple Plug turned Cap</i>		
Blue Clay sand			9 STATIC WATER LEVEL <i>10</i> ft. below land surface		
Blue Clay			10 PUMPING LEVEL below land surface <i>42</i> ft. after <i>1</i> hrs. pumping <i>15+</i> g.p.m.		
gravel			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____		
<div style="text-align: center;">  </div>			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 42" Above Grade		
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite _____ Depth: From _____ ft. to _____ ft.		
			14 Nearest Source of possible contamination <i>75</i> feet <i>S</i> Direction <i>Septic</i> Type Well disinfected upon completion <input type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name <i>Red Jacket</i> Model Number <i>9BC2</i> HP <i>1/2</i> Volts <i>220</i> Length of Drop Pipe <i>42</i> ft. capacity <i>12</i> G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input 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>Ernest Mous</i> <i>1954</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>640 N. Lakeside</i> Signed <i>Ernest Mous</i> Date <i>10-1-80</i> AUTHORIZED REPRESENTATIVE		



APR 27 1981

WATER WELL RECORD
ACT 294 PA 1985

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

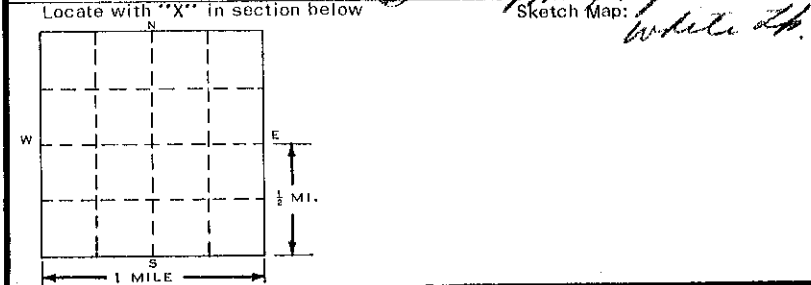
1 LOCATION OF WELL					
County <i>Oakland</i>	Township Name <i>White Lake</i>	Fraction <i>NW 1/4 SE 1/4</i>	Section Number <i>21</i>	Town Number <i>3 N/S.</i>	Range Number <i>8 E/W.</i>

Distance And Direction from Road Intersections
Corner 59 + Sunset

Street address & City of Well Location
Sunset 7110 Highland Rd - White Lake

Locate with "X" in section below
Sketch Map: *White Lake*

3 OWNER OF WELL:
Name: *Ken Billington*
Address: *7110 Highland Rd - White Lake*



4 WELL DEPTH: (completed) Date of Completion
60 ft. 1-12-80

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"* Height: Above/Below Surface *1* ft.
Weight *11* lbs./ft.
Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Sand / R Clay</i>	<i>36</i>	<i>36</i>
<i>R Clay / s sand</i>	<i>18</i>	<i>54</i>
<i>Sand / Gravel / W. Bearing</i>	<i>6</i>	<i>60</i>

8 SCREEN:
Type: *Johnson Stainless* Dia.: *4"*
Slot/Gauze *12* Length *4 ft*
Set between *56* ft. and *60* ft.
Fittings: *R-Packer Plug + Tail pipe*

9 STATIC WATER LEVEL
15 ft. below land surface

10 PUMPING LEVEL below land surface
10 ft. after *1/2* hrs. pumping *40* g.p.m.
10 ft. after *1/2* hrs. pumping *40* g.p.m.

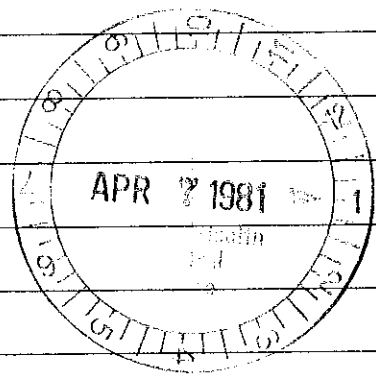
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
80 feet *S* Direction *Septic* Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name *F.W.*
Model Number *IBK-7* HP *3/4* Volts *230*
Length of Drop Pipe *21* ft. capacity *19* G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.

USE A 2ND SHEET IF NEEDED

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.
Paul Zelony Well Drilling 0311
REGISTERED BUSINESS NAME REGISTRATION NO.
Address *4794 N. Duck Rd. W. Highland*
Signed *Paul Zelony* Date *1-15-80*
AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

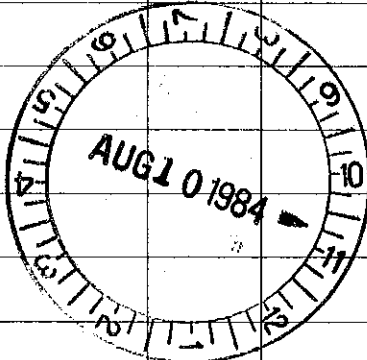
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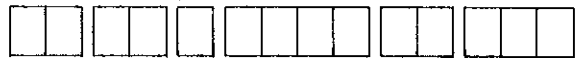
PERMIT NUMBER

PART 127 ACT 368, P.A. 1978

AUG 28 1984

1 LOCATION OF WELL		3 OWNER OF WELL:													
County Oakland	Township Name White Lake	Fraction NW 1/4 SE 1/4 SW 1/4	Section Number 21												
		Town Number 3 N/S	Range Number 8 E/W												
Distance And Direction From Road Intersection		Address 615 Elkinford													
Street Address & City of Well Location		Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No													
Locate with "X" in Section Below		4 WELL DEPTH: (completed) 61 ft. Date of Completion 11-22-83													
Sketch Map: 		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"/> 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"/> _____													
2 FORMATION DESCRIPTION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">FORMATION DESCRIPTION</th> <th style="width: 15%;">THICKNESS OF STRATUM</th> <th style="width: 15%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td>Brown Clay - Gravel</td> <td></td> <td>30</td> </tr> <tr> <td>Brown Sand</td> <td>24</td> <td>54</td> </tr> <tr> <td>Med. Sand - Water</td> <td>7</td> <td>61</td> </tr> </tbody> </table>		FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Brown Clay - Gravel		30	Brown Sand	24	54	Med. Sand - Water	7	61	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 _____ ft. Weight _____ lbs./ft. Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe <input type="checkbox"/> Yes <input type="checkbox"/> No	
		FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM											
		Brown Clay - Gravel		30											
		Brown Sand	24	54											
Med. Sand - Water	7	61													
8 SCREEN: <input type="checkbox"/> Not Installed Type Johnson Diameter 1 1/2 Slot/Screen 12 Length 42" Set between _____ ft. and _____ ft. FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input checked="" type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other 1' tail pipe															
9 STATIC WATER LEVEL: _____ 45 ft. below land surface <input type="checkbox"/> Flow															
10 PUMPING LEVEL: below land surface _____ 47 ft. after 1/2 hrs. pumping at 15 G.P.M. _____ ft. after _____ hrs. pumping at _____ 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 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 75 ft. Direction west Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No															
14 PUMP: <input type="checkbox"/> Not Installed <input type="checkbox"/> Pump Installation Only Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of Drop Pipe _____ ft. capacity _____ G.P.M. TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name _____ Model number _____ Capacity _____ Gallons															
15. Remarks, elevation, source of data, etc. RECEIVED Mich. Dept. of Public Health AUG 15 1984 Bureau of Environmental and Occupational Health - EWOS USE A 2ND SHEET IF NEEDED		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. Fettig's Well Drilling 0413 REGISTERED BUSINESS NAME REGISTRATION NO. Address 5575 Jackson Blvd. Davisburg Signed Jerry Fettig Date 12-1-83 AUTHORIZED REPRESENTATIVE													





WATER WELL RECORD
ACT 294 PA 1965

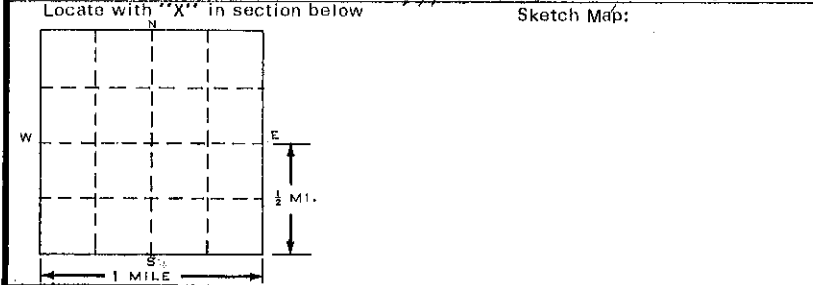
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL MAY 10 1984

County <u>Oakland</u>	Township Name <u>White Lake</u>	Fraction <u>NW 1/4 SW 1/4 SE 1/4</u>	Section Number <u>21</u>	Town Number <u>3 N/S.</u>	Range Number <u>8E E/W.</u>
--------------------------	------------------------------------	---	-----------------------------	------------------------------	--------------------------------

Distance And Direction from Road Intersections
800 ft. E of Bogie Lk Rd.

Street address & City of Well Location
911 Ardmore Milford



3 OWNER OF WELL:
Address Kerrin Realty
911 Ardmore, Milford

4 WELL DEPTH: (completed) Date of Completion
110 ft. 5/19/83

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 1 ft.
Diam. 4 in. to 110 ft. Depth Weight 11 lbs./ft.
 in. to ft. Depth Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Sand, gravel, blue clay</u>	<u>36</u>	<u>36</u>
<u>Sand, blue clay</u>	<u>36</u>	<u>72</u>
<u>Sand, gravel, some water</u>	<u>36</u>	<u>108</u>
<u>Sand, gravel, water bearing</u>	<u>2</u>	<u>110</u>

8 SCREEN:
Type: Johnson Strainers Dia.: 4"
Slot/Gauze slot Length 4 ft.
Set between 106 ft. and 110 ft.
Fittings: K. Packer, Tail Pipe Plug

9 STATIC WATER LEVEL
40 ft. below land surface

10 PUMPING LEVEL below land surface
30 ft. after 1 hrs. pumping 20 g.p.m.

30 ft. after 1 hrs. pumping 20 g.p.m.

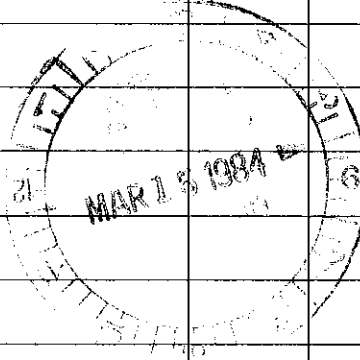
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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
65 feet S Direction Septic Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name Douglas
Model Number 5E HP 1/2 Volts 210
Length of Drop Pipe 40 ft. capacity 10 G.P.M.
Type: Submersible Jet Reciprocating



RECEIVED
Mich. Dept. of Public Health
MAR 20 1984

16 Remarks, elevation, source of data, etc.

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

Bureau of Environmental and Occupational Health - GWQS

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.
Paul Zelony, Well Drilling 0311
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 4794 N. Duck Lk. Rd, Highland
Signed Paul Zelony Date 5/20/83
AUTHORIZED REPRESENTATIVE

APR 25 1978

WATER WELL RECORD
ACT 294 PA 1965

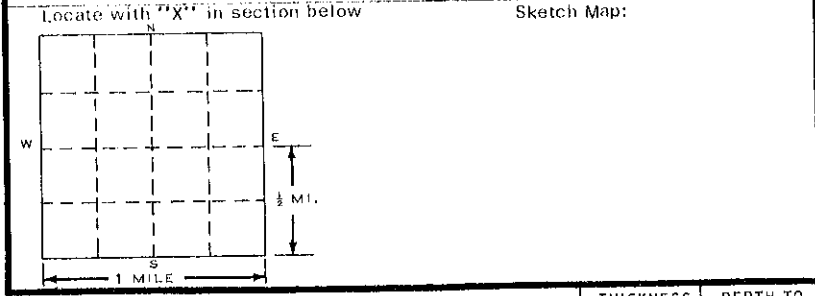
MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County: Oakland Township Name: White Lk. Twp. Fraction: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number: 21 Town Number: 3 Range Number: 8
E/W: 1

Distance And Direction from Road Intersections

Street address & City of Well Location: 688 Charlton



3 OWNER OF WELL:
Address: Buildings of Michigan
3195 Union Lk Rd.
Union Lk MI 48085

4 WELL DEPTH: (completed) 52 ft. Date of Completion: 9/77

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. 2" Height: Above/Below Surface _____ ft.
Weight _____ lbs./ft.
Drive Shoe? Yes No

2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Sd. Clay</u>		<u>18'</u>
<u>Blue Clay & Sd. Clay Mix</u>	<u>8'</u>	<u>26'</u>
<u>Blue Clay</u>	<u>3'</u>	<u>31'</u>
<u>Sand & Clay</u>	<u>4'</u>	<u>35'</u>
<u>Blue Clay Below</u>	<u>11'</u>	<u>46'</u>
<u>Water Sand</u>		<u>52'</u>

8 SCREEN:
Type: RED HEAD Dia.: 1 1/2"
Slot/Cause 10 Length 4'
Set between 46 ft. and 52 ft.
Fittings: DREAMER CHECK

9 STATIC WATER LEVEL
35' 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 Adapter 12" Above Grade

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

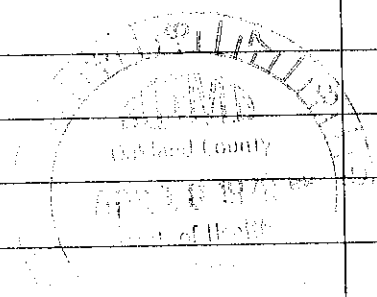
14 Nearest Source of possible contamination
50' feet S Direction Septic Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name _____
Model Number _____ HP _____ Volts _____
Length of Drop Pipe _____ 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 B
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.
J. WARD & SONS. 0058
REGISTERED BUSINESS NAME REGISTRATION NO.
Address: 6253 CRAWLAW CHARLTON
Signed: J. Ward Date: 9/77
AUTHORIZED REPRESENTATIVE



PART 127 ACT 368 P.A. 1978

1 LOCATION OF WELL

County: Oakland Township Name: White Lake Fraction: SE 1/4 NW 1/4 Section Number: 21 Town Number: 3 N Range Number: 8 E

Distance And Direction From Road Intersection: 4 mi. South of M-59 on Hillwood Dr. west side

Street Address & City of Well Location: 521 Hillwood Dr

Address Same as Well Location? Yes No

Locate with "X" in Section Below

3 OWNER OF WELL

Address: Evelyn Succi
521 Hillwood Dr
Hillwood Mich 48072

4 WELL DEPTH: (completed) 46 ft. Date of Completion: 7-27-83

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 Threaded Plastic Welded
Height: Above/Below Surface 1 ft.
Weight: _____ lbs./ft.
Drive Shoe Yes No

8 SCREEN: Not Installed
Type: Plastic Centaloc Diameter: 5" ID
Slot/Gauge: 20 Length: 6
Set between 39 ft. and 46 ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: 6 ft. below land surface Flow

10 PUMPING LEVEL: below land surface
Air 40 ft. after 1 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 1 to 46 ft.
 Neat cement Bentonite Other: Sand & Cutt
No. of bags of cement _____ Additives: EZ Mud

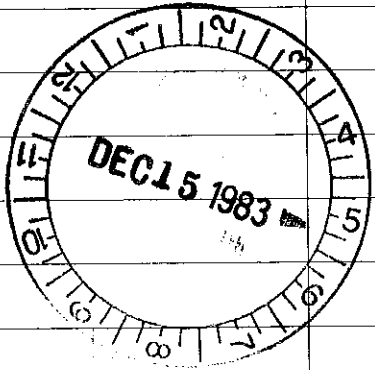
13 Nearest source of possible contamination
Type: Sewage Distance: 80 ft. Direction: W
Well disinfected upon completion? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name: Well-trul
Model number: _____ HP: 1/2 Volts: 220
Length of Drop Pipe: 30 ft. capacity: 10 G.P.M.
TYPE: Submersible Jet
PRESSURE TANK: Manufacturer's name: Amtrol
Model number: 202 Capacity: 5-7 Gallons

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

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

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.
Ed Birkmeier Well Drilling LTD
REGISTERED BUSINESS NAME: _____ REGISTRATION NO. 1607
Address: 10507 Easton Rd. New Bethrop Mich.
Signed: Edward A Birkmeier Date: 10-12-83
AUTHORIZED REPRESENTATIVE

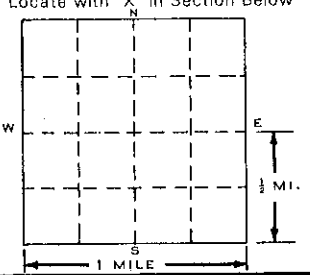
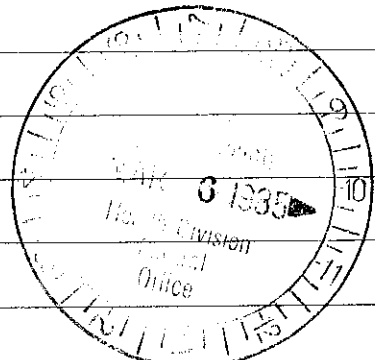


WATER WELL AND PUMP RECORD

PART 127 ACT 368, P.A. 1978



PERMIT NUMBER

1 LOCATION OF WELL			County Oakland		Township Name White Lake		Fraction SW¹/₄ SW¹/₄		Section Number 21		Town Number T. 3N N/S		Range Number 7 8 E/W	
Distance And Direction From Road Intersection White Lake Township Library 7525 Highland road White Lake Township, Mich.					3. OWNER OF WELL: White Lake Township Library Address 7525 Highland Rd. White Lake Township, Mich.									
Street Address & City of Well Location					Address Same As Well Location? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Locate with "X" in Section Below					4. WELL DEPTH (completed) 95 ft. Date of Completion 10-20-84									
Sketch Map: 					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"/>									
2. FORMATION DESCRIPTION					THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		6. USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input checked="" 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"/>					
					Brown sand and gravel		0 45		7. CASING: Diameter <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Plastic <input type="checkbox"/> Welded Height: Above/Below Surface 1 ft. Weight 11 lbs./ft. Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
					Brown sand and gravel		45 60		8. SCREEN: <input type="checkbox"/> Not Installed Type Stainless Steel Diameter 3 Slot/Gauze 10 Length 4 ft. Set between 91 ft. and 95 ft. FITTINGS: <input checked="" type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other _____					
					Mixture blue clay and sand		60 75		9. STATIC WATER LEVEL: _____ ft. below land surface <input type="checkbox"/> Flow					
Water bearing sand & gravel		75 95		10. PUMPING LEVEL: below land surface _____ ft. after 2 hrs. pumping at 25 G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.										
					11. WELL HEAD COMPLETION: <input 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 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 125 ft. Direction NW Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
					14. PUMP: <input type="checkbox"/> Not Installed <input checked="" type="checkbox"/> Pump Installation Only Manufacturer's name Flint & Walling Model number 4F27B10-305 1HP Volts 230 Length of Drop Pipe 78 ft. capacity 27 G.P.M. TYPE: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet PRESSURE TANK: Manufacturer's name Well-x-trol Model number _____ Capacity 120 Gallons									
15. Remarks, elevation, source of data, etc.					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. ZELDNY WELL DRILLING 1749 REGISTERED BUSINESS NAME REGISTRATION NO. Address 4794 Buck Lake Rd., Signed Bill Zeldny Date Nov. 6, 1984 AUTHORIZED REPRESENTATIVE									

RECEIVED
Mich. Dept. of Public Health
MAR 11 1985
Bureau of Environmental and
Occupational Health - GWQS

USE A 2ND SHEET IF NEEDED

WATER WELL AND PUMP RECORD

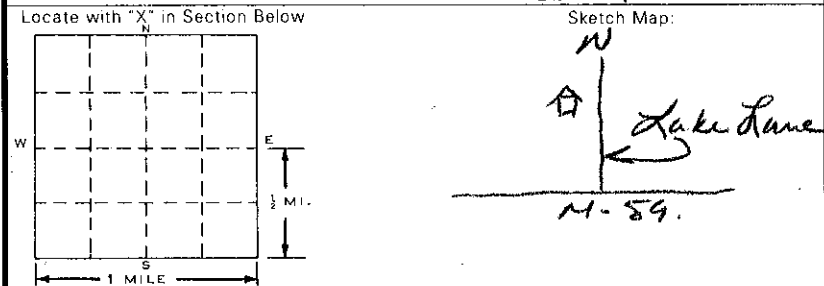
PERMIT NUMBER

1 LOCATION OF WELL

County <i>Oakland</i>	Township Name <i>White Lk.</i>	Fraction <i>NE 1/4</i>	Section Number <i>SE 1/4 21</i>	Town Number <i>3 N 1/2</i>	Range Number <i>8 E 1/2</i>
--------------------------	-----------------------------------	---------------------------	------------------------------------	-------------------------------	--------------------------------

Distance And Direction From Road Intersection
300 yds. North of M-59

Street Address & City of Well Location
1095 Lake Lane



3 OWNER OF WELL:
Mr. Ralph Asp.
Address *3622 Ramada Dr. Highland*
Address Same As Well Location? Yes No

4 WELL DEPTH: *41 FT.* Date Completed *10/14/93*
 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 Steel Threaded Plastic Welded
Height: Above/Below Surface *1* ft.
Weight *50 lbs/ft*
in. to *36* ft. depth
in. to *41* ft. depth
Drive Shoe Yes No

2 FORMATION DESCRIPTION

FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<i>Brown Clay (Stony)</i>		<i>8'</i>
<i>Brown Clay Heavy</i>		
<i>Gravel (Sandy)</i>	<i>10'</i>	<i>18'</i>
<i>Blue Clay & Gravel</i>	<i>3'</i>	<i>21'</i>
<i>Gray, Brown Sand & Medium Gravel</i>	<i>11'</i>	<i>32'</i>
<i>Gray Course (Medium)</i>		
<i>Gravel</i>		<i>41'</i>

8 SCREEN: Not Installed
Type *Wire Wrapped PVC 4"*
Slot/Gauze *#20* Length *5'*
Set between *36* ft. and *41* ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen *1* ft. Other _____

9 STATIC WATER LEVEL: *8'* ft. below land surface Flow

10 PUMPING LEVEL: below land surface
20 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 *25* to *Top* ft.
 Neat cement Bentonite Other _____
No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
Type *Septic* Distance *30* ft. Direction *E*
Well disinfected upon completion? Yes No
Was old well plugged? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name *Miyas*
Model number *2N102* HP *1* Volts *230*
Length of Drop Pipe *20* ft. capacity *2.0* G.P.M.
TYPE: Submersible Jet
PRESSURE TANK: Manufacturer's name *Wm Rite*
Model number *WR 240* Capacity *240* Gallons

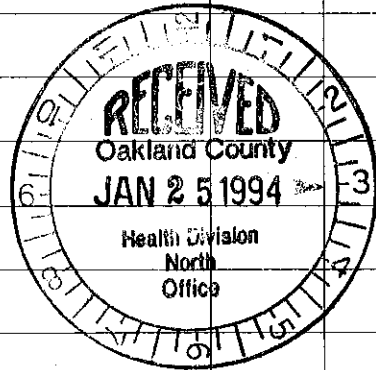
15. Remarks, elevation, source of data, etc.

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.
J Ward & Son Inc. 0058
REGISTERED BUSINESS NAME REGISTRATION NO.

17. Rig Operator's Name:

Address *6458 E Washington*
Signed *J Ward, Inc.* Date *Oct 14, 1993*
AUTHORIZED REPRESENTATIVE

RECEIVED
MICH. DEPT. OF PUBLIC HEALTH
JAN 31 94
BUREAU OF ENVIRONMENTAL
AND OCCUPATIONAL HEALTH



USE A 2ND SHEET IF NEEDED

County OAKLAND	Township Name WHITE LAKE	Fraction NE 1/4 NE 1/4 NW 1/4	Section No 21	Town No 3 N	Range Number 8 E
Distance And Direction From Road Intersection WEST OF ALPINE SHORE ON THE SOUTH SIDE OF ALPINE COURT DRIVE			Owner of Well LARRY BAKER		
Well Addr: LOT 5 ALPINE VIEW COURT <i>7250 Alpine View Court</i>			Address 130 YEGGERDINE WHITE LAKE MI 48386		
Locate with 'X' in Sec. Below			Address Same as Well Location? NO		
Sketch Map			Depth 107 ft. Date Compl 10/26/94 This is a: NEW WELL		
			Equipment Used: ROTARY Well Use: DOMESTIC		
			Casing Type: PLASTIC Connection: THREADED Diam. 5 in. to 107 ft. Height ABOVE Surface 1 ft. Weight 1b./ft. Grouted Drill Hole 8 1/2 in. to 112 ft. Drive Shoe NO		
Formation Description			Thickness		
			Depth		
CLAY	15	15	Screen Type: SAW SLOTTED Diam: 5 [] Not Inst.		
SILTY SAND	25	40	SLOT 10 Length: 12		
CLAY	10	50	Set Between 95 ft. and 107 ft.		
SILTY SAND	30	80	Fittings: [X] Blank above scrn: ft.		
CLAY	15	95	Static Level: 30 ft. Flow: NO		
SAND	12	107	Pumping Level below land surface: 107 ft. after 1/2 hrs. @ 15 GPM ft. after hrs. @ 0 GPM		
			Well Head Completion: PITLESS ADAPTER		
			Grouted from 90 to 0 ft. Material: BENSEAL Cement: 5 bags Additive:		
			Nearest source of possible contamination: Type: SEWAGE BED Distance: 100 ft. Direction: NE Well disinfected on completion? YES Old well plugged? NO		
			Pump: [] Not Installed [] Installation Only Manufacturer's Name: BURKS Model: 75NB88 HP: 0.75 Voltage: 230 Drop pipe: 90 ft. Capacity: 18 GPM Pump type: SUBMERSIBLE Pressure Tank Manufacturer's Name: WELL X-TROL Model: 251 Capacity: 19 Gal.		
			Remarks, elevation, source of data, etc. PUMP - ANDY BIRCHMEIER		
			Rig Operator's Name ED BIRKMEIER		
			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. Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607 Business Address 10655 Easton Road New Lothrop MI 48460 Signed <i>Edward Birkmeier</i> 11/11/94 Authorized Representative Date		

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

JAN 24 1984

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Fraction 1/4 1/4 1/4	Section Number 21	Town Number 3 N/W	Range Number 8 E/W
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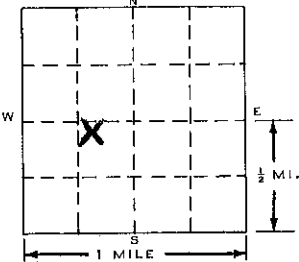
Distance And Direction from Road Intersections

7000 E. HIGHLAND RD.

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:
Address **MARIE COOLEY**

4 WELL DEPTH: (completed) **28** ft. Date of Completion **OCT. 82**

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. **2** in. to **25** ft. Depth Height: Above/Below Surface **1** ft.
Weight _____ lbs./ft. Drive Shoe? Yes No

2 FORMATION THICKNESS OF STRATUM DEPTH TO BOTTOM OF STRATUM

Red Sand		10
Red Clay		18
WATER SAND		28
BLUE CLAY		?

8 SCREEN:
Type: **STAINLESS** Dia.: **1 1/4"**
Slot/Curve **12** Length **36"**
Set between **25** ft. and **28** ft.
Fittings: **K-PACKER**

9 STATIC WATER LEVEL
5' ft. below land surface

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

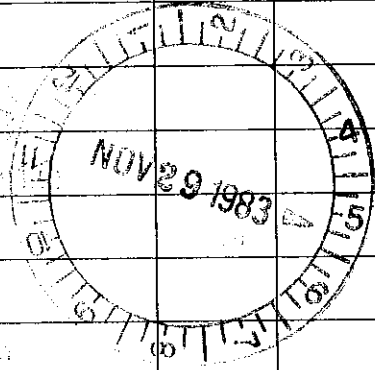
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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

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

14 Nearest Source of possible contamination
100 feet **N** Direction **SEPTIC** Type
Well disinfected upon completion Yes No

15 PUMP: Not installed
Manufacturer's Name **TAIT**
Model Number **55A** HP **1/2** Volts **115**
Length of Drop Pipe _____ ft. capacity _____ G.P.M.
Type: Submersible Jet Reciprocating



16 Remarks, elevation, source of data, etc.
CORRECTED BY
ADDITION BY
ELEVATION
OPEN 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.
REGISTERED BUSINESS NAME _____ REGISTRATION NO. **0613**
Address **10730 CLARK RD.**
Signed **Glenn Sommers** Date **OCT 82**
AUTHORIZED REPRESENTATIVE

County OAKLAND	Township Name WHITE LAKE	Fraction NE 1/4 SE 1/4 NW 1/4	Section No 21	Town No 3 N	Range Number 8 E
Distance And Direction From Road Intersection WEST OF PORTER ROAD ON THE SOUTH SIDE OF ALPINE VIEW DRIVE			Owner of Well LARRY BAKER CUSTOM BUILDERS Address 7250 ALPINE VIEW COURT WHITE LAKE MI 48386		
Well Addr: 7410 ALPINE VIEW DRIVE PARCEL D			Address Same as Well Location? NO		
Locate with 'X' in Sec. Below		Sketch Map		Depth 118 ft. Date Compl 05/02/96 This is a: NEW WELL	
		Equipment Used: ROTARY Well Use: DOMESTIC		Casing Type: PLASTIC Connection: WELDED Diam. 5 in. to 108 ft. Height ABOVE Surface 1 ft Weight 1b./ft. Grouted Drill Hole 8 1/2 in. to 108 ft. Drive Shoe NO	
		Formation Description		Thickness	Depth
YELLOW GRAVEL		6	6	Static Level: 8 ft. Flow: NO	
GRAY CLAY		96	102	Pumping Level below land surface: 80 ft. after 1 hrs. @ 50 GPM Air ft. after hrs. @ 0 GPM	
GRAY GRAVEL		16	118	Well Head Completion: PITLESS ADAPTER	
				Grouted from 100 to 0 ft. Material: BENSEAL Cement: 8 bags Additive:	
				Nearest source of possible contamination: Type: SEPTIC TANK Distance: 75 ft. Direction: NW Well disinfected on completion? YES Old well plugged? NO	
				Pump: [] Not Installed [] Installation Only Manufacturer's Name: GOULDS Model: 10EJ510 HP: 0.5 Voltage: 230 Drop pipe: 40 ft. Capacity: 10 GPM Pump type: SUBMERSIBLE Pressure Tank Manufacturer's Name: WELL X-TROL Model: 203 Capacity: 10 Gal.	
Remarks, elevation, source of data, etc. PUMP - JEFF BABINGER					
Rig Operator's Name SCOTT GRIFFIN					

OAKLAND COUNTY HEALTH DIVISION
 JUN 7 1996 P2 116

RECEIVED
 Mich. Dept. of Public Health
 JUN 13 1996
 BUREAU OF OCCUPATIONAL HEALTH AND SAFETY

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

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.
 Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
 Bus. Address 10656 Easton Road New Lothrop MI 48060
 Signed Edward Birkmeier 05/07/96
 Authorized Representative Date

TAX NO:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

PERMIT NO:

1. LOCATION OF WELL
County

Township Name

Fraction

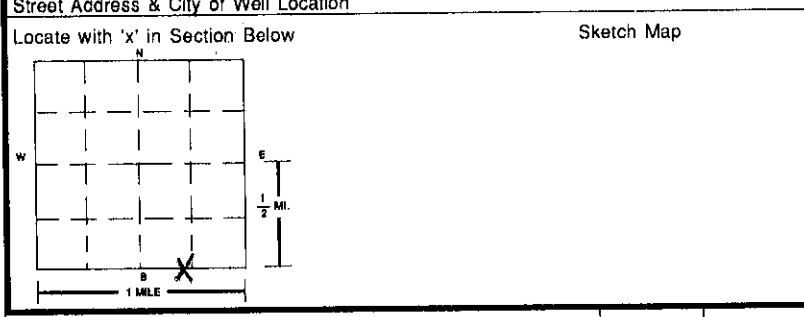
Section No.

Town No.

Range No.

Distance and Direction from Road Intersection

Street Address & City of Well Location



3. OWNER OF WELL
Address
ALAN MOYSKI
387 Hillwood

Address Same as Well Location Yes No

4. WELL DEPTH: **54** ft. Date Completed **11 / 9 / 95**

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: _____ ft

Diameter: **4** in. to **50** ft. depth Weight: **10/40** lbs./ft.
_____ in. to _____ ft. depth

BORE HOLE: Diameter: _____ in. to _____ ft. depth
_____ in. to _____ ft. depth

Drive Shoe
 Shale Packer

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Brown sand	0	35
Fine gray sand - Blue clay	13	48
fine sand - water	6	54

8. SCREEN: Not Installed Gravel-Packed
Type **Johnson** Diameter **3"**
 Gauze **10** Length: **48"**
Set Between **50** ft. and **54** ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other _____

9. STATIC WATER LEVEL: **14** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
31 ft. After **1** hrs. Pumping at **55** G.P.M.
 Plunger Bailer Air Test Pump

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

12. WELL GROUTED? No Yes From **0** to **40** ft.
 Neat Cement Bentonite Other _____
No. of Bags **1 1/2** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type **Septic** Distance **41** ft. Direction **West**
Type _____ Distance _____ ft. Direction _____

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter **1 1/4** in. Depth **28** ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags **1 1/2** Casing Removed? Yes No

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name **Redjacket**
Model Number _____ HP **1/2** Volts **115**
Length of Drop Pipe **31** ft. Capacity **12** G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name **X-Trol**
Model Number **WX205** Capacity **32** Gallons

16. REMARKS: (Elevation, Source of Data, etc.)
Nit-0

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name **Charles Farren**

15. 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.
Fettig Well Drilling **63-1976**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **2990 Towering Oaks Dr., White Lake**
Signed *[Signature]* Date **11-20-96**
AUTHORIZED REPRESENTATIVE

OAKLAND COUNTY HEALTH DIVISION
RECEIVED
MR. 11-20-96
MR. 11-20-96
MR. 11-20-96

WATER WELL AND PUMP RECORD

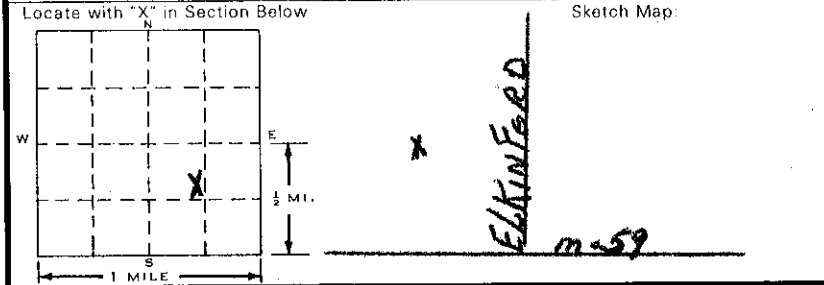
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PERMIT NUMBER

1 LOCATION OF WELL				
County Oakland	Township Name White Lake	Fraction SE 1/4 SW 1/4 SE 1/4	Section Number 21	Town Number 3 N/Sx Range Number 8 E/W

Distance And Direction From Road Intersection
1/16 mi. North of M-59, 50' West of Elkinford

Street Address & City of Well Location
lot 66:671 Elkinford, White Lake



3 OWNER OF WELL:

Matt Maguire Homes
Address **855 Hill top Union Lake, MI 48386**

Address Same As Well Location? Yes No

4 WELL DEPTH: Date Completed MO. DAY YEAR: New Well Replacement Well

92 FT. **6 24 92**

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 Threaded Welded Plastic
Height: Above/Below Surface **1** ft.
Weight **2.5** lbs./ft.
5 in. to **89** ft. depth
8 in. to **89** ft. depth
Grouded Drill Hole Diameter Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
sand		10
clay	46	56
sand	19	75
clay	10	85
sand	7	92

8 SCREEN: Not Installed
Type **Johnson** Diameter **4"**
Slot/Gauze **10** Length **3'**
Set between **89** ft. and **92** ft.
FITTINGS: K-Packer Load Packer Bremer Check
 Blank above screen **3** ft. Other _____

9 STATIC WATER LEVEL: Flow
80 50 ft. below land surface

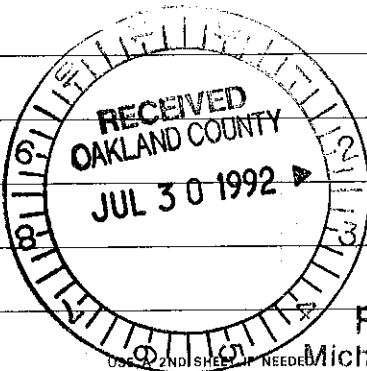
10 PUMPING LEVEL: below land surface
80 ft. after **1** hrs. pumping at **30** G.P.M.
_____ ft. after _____ hrs. pumping at _____ G.P.M.

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

12 WELL GROUTED? No Yes From **0** to **89** ft.
 Neat cement Bentonite Other _____
No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
Type **septic** Distance **60** ft. Direction **West**
Well disinfected upon completion? Yes No
Was old well plugged? Yes No

14 PUMP: Not Installed Pump Installation Only
Manufacturer's name **Red Jacket**
Model number **50CWI9BC** HP **1/2** Volts **230**
Length of Drop Pipe **60** ft. capacity **10** G.P.M.
TYPE: Submersible Jet
PRESSURE TANK: Manufacturer's name **Well X-trol**
Model number **202** Capacity _____ Gallons



RECEIVED
Mich. Dept. of Public Health

15. Remarks, elevation, source of data, etc.
AUG 7 1992

17. Rig Operator's Name:
Kevin Struck

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.

Tri-County Drillers, Inc 1634

REGISTERED BUSINESS NAME: **5154 B/M-21** REGISTRATION NO.: **48817**
Address: **Corunna, MI**

Signed: *[Signature]* Date: **6/24/92**
AUTHORIZED REPRESENTATIVE

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

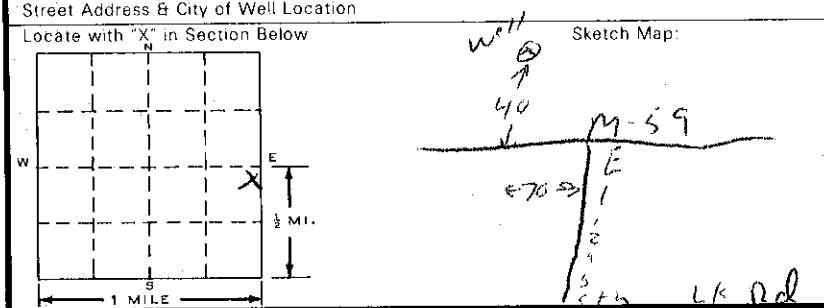
MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

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PERMIT NUMBER

1 LOCATION OF WELL				
County Oakland	Township Name White LK	Fraction NE 1/4 NE 1/4 SE 1/4	Section Number 21	Town Number 3 N 1/2 E 1/2

Distance And Direction From Road Intersection
40' N of M-59
70 W of Elizabeth LK Rd



3 OWNER OF WELL:
Ms Pippert
 Address **7901 Highland RD**
 Address Same As Well Location? Yes No

4 WELL DEPTH: **80 FT.** Date Completed **9 28 91** 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 Steel Threaded Height: **Above/Below** Surface **1** ft.
 Plastic Welded Weight **11** lbs./ft.
 Grouted Drill Hole Diameter _____ in. to _____ ft. depth
 Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
steel pipe in ground & drive	21	21'
clay & rock	10	31'
clay & gravel	11	42'
clay	20	62'
clay & sand	8	70'
water sand	10	80'

8 SCREEN: Not Installed
 Type **Johnson** Diameter **3"**
 Slot/Gauze **12** Length **4'**
 Set between **76** ft. and **80** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **1** ft. Other _____

9 STATIC WATER LEVEL: **33** ft. below land surface Flow

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

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

12 WELL GROUTED? No Yes From _____ to _____ ft.
 Neat cement Bentonite Other **Dry grout**
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
 Type **S tank** Distance **70** ft. Direction **W**
 Well disinfected upon completion? Yes No
 Was old well plugged? Yes No

14 PUMP: Not installed Pump Installation Only
 Manufacturer's name **ROD TAC FT**
 Model number **R-10** HP **1/2** Volts **115**
 Length of Drop Pipe **50** ft. capacity **10** G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK:
 Manufacturer's name **Clayton/Mark**
 Model number **702** Capacity **40** Gallons

RECEIVED
 Mich. Dept. of Public Health
JAN 10 1992

15. Remarks, elevation _____
BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH DIVISION
JAN 7 1992
 HEALTH DIVISION
 Environmental Health

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.
Mr. Pippert Well 1701
 REGISTERED BUSINESS NAME **7200 Glascoth** REGISTRATION NO. _____
 Address _____
 Signed _____ Date **9/30/91**



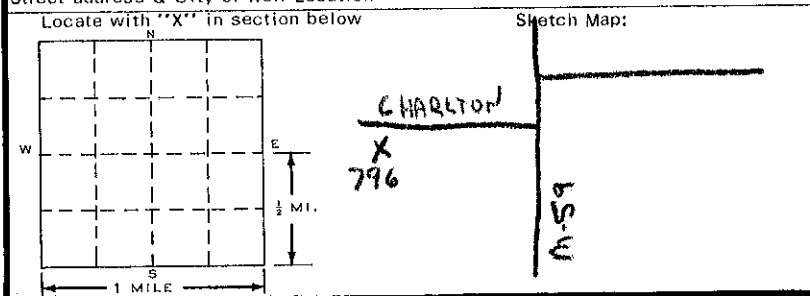
WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County OAKLAND	Township Name WHITE LAKE	Fraction 1/4 1/4 1/4	Section Number 21	Town Number 3 N/S.	Range Number 8 E/W.
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Distance And Direction from Road Intersections
796 CHARLTON WHITE LK.



3 OWNER OF WELL:
Address **JOE GRUPIDO**
796 CHARLTON

4 WELL DEPTH: (completed) **75** ft. Date of Completion **6-20-88**

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Borod

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 **71** ft. Depth Weight **10.74** lbs./ft.
in. to _____ ft. Depth Drive Shoe? Yes No

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
SAND + GRAVEL	30	30
CLAY + GRAVEL	40	70
WATER BEARING SAND	5	75

8 SCREEN:
Type: **S/S** Dia.: **3"**
Slot/Gauze **5/64** Length **4'**
Set between **71** ft. and **75** ft.
Fittings: **3" KPACKER 3" X 12" NIPR 3" PLUG**

9 STATIC WATER LEVEL
35 ft. below land surface

10 PUMPING LEVEL below land surface
60 ft. after **1** hrs. pumping **35** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.

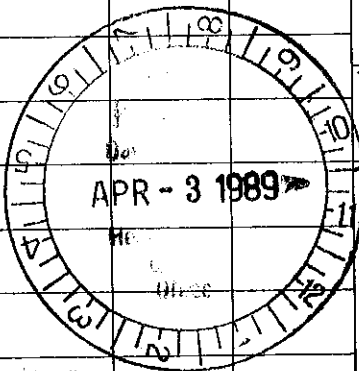
11 WATER QUALITY in Parts Per Million:
Iron (Fe) _____ Chlorides (Cl) _____
Hardness _____ Other _____

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

13 Well Grouted? Yes No
 Neat Cement Bentonite _____
Depth: From **0** ft. to **70** ft.

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

15 PUMP: Not installed
Manufacturer's Name **F+W**
Model Number **100L51** HP **1/2** Volts **115**
Length of Drop Pipe **50** ft. capacity **70** G.P.M.
Type: Submersible Jet Reciprocating



USE A 2ND SHEET IF NEEDED

16 Remarks, elevation, source of data, etc.

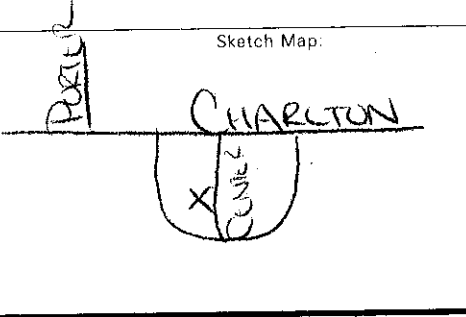
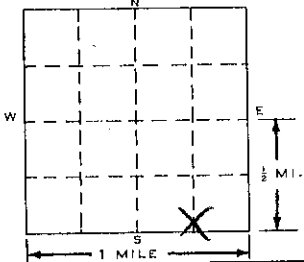
17 WATER WELL CONTRACTOR'S CERTIFICATION:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
R. L. RICH WELL DRILLING 63-0585
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **6297 BARKER DRAYTON PLAINS MICH 48080**
Signed **R. L. Rich** Date **6-21-88**
AUTHORIZED REPRESENTATIVE

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

1 LOCATION OF WELL		County Oakland		Township Name White Lake		Fraction SW 1/4 SE 1/4 SE 1/4		Section Number 21		Town Number 3 N/S		Range Number 8 E/W	
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Distance And Direction From Road Intersection
South off Charlton on the west side of Center Court

Street Address & City of Well Location
 Locate with "X" in Section Below



3 OWNER OF WELL:
 Address **Foxfield Development
P.O. Box 500
Union Lake MI**
 Address Same As Well Location? Yes No

4 WELL DEPTH: Date Completed New Well
 MO. DAY YEAR **7 29 1991** Replacement Well
69 FT.

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: Steel Threaded Welded
 Plastic Height: Above/Below
 Surface **1** ft.
5 in. to **69** ft. depth
 Weight _____ lbs./ft.
 Drive Shoe Yes No

8 SCREEN: Not Installed
 Type **Wrapped** Diameter **5"**
 Slot/Gauze **20** Length **8'**
 Set between **56** ft. and **64** ft.
 FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: _____ **35** ft. below land surface Flow

10 PUMPING LEVEL: below land surface
Air 63 ft. after **1** hrs. pumping at **30** G.P.M.
 _____ ft. after _____ hrs. pumping at _____ G.P.M.

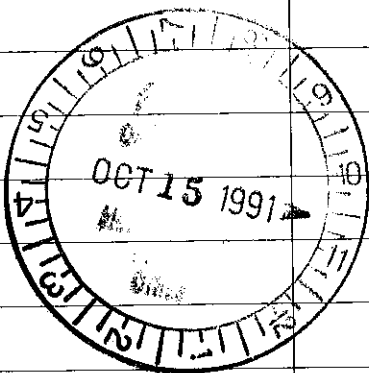
11 WELL HEAD COMPLETION: Pitless adapter 12" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From **0** to **56** ft.
 Neat cement Bentonite Other **Clay cuttings**
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination **NOT IN**
 Type **sewage** 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 **Red Jacket**
 Model number **50CNICN9BC** HP **1/2** Volts **220**
 Length of Drop Pipe **40** ft. capacity **10** G.P.M.
 TYPE: Submersible Jet
 PRESSURE TANK: **Well Xtrol**
 Manufacturer's name _____
 Model number **203** Capacity **10** Gallons

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Yellow Clay	10	10
Yellow Gravel	30	40
Gray Clay	7	47
Gray Gravel	18	65
Gray Clay	4	69



RECEIVED

USE A 2ND SHEET IF NECESSARY Mich. Dept. of Public Health

15. Remarks, elevation, source of data, etc.
OCT 21 1991

17. Rig Operator's Name: **BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS**

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.
Ed Birkmeier Well Drilling Ltd., 1607
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **6555 Easton Rd New Lothrop MI 48460**
 Signed **Ed Birkmeier** Date **7-29-91**
 AUTHORIZED REPRESENTATIVE

Authority: Act 388 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 NO: _____ Page of
1 1

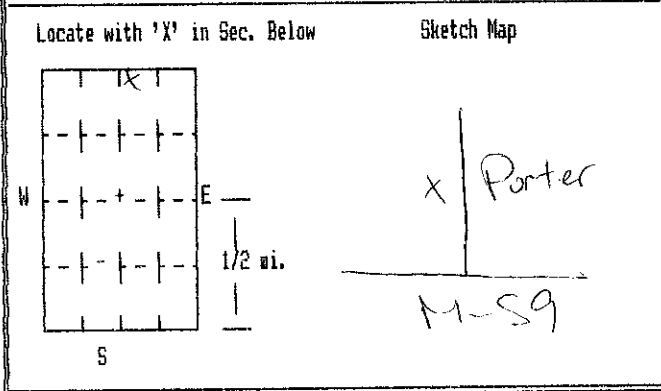
TAX NO: _____

1. LOCATION OF WELL					
County OAKLAND	Township Name WHITE LAKE	Fraction NW 1/4 NW 1/4 NE 1/4	Section No 21	Town No 3 N	Range Number 8 E

Distance And Direction From Road Intersection
1/2 MILE NORTH OF M-59 AND 200' WEST OF PORTER

Well Addr: 1700 PORTER ROAD

3. Owner of Well LARRY BAKER CUSTOM BUILDERS
Address 7250 ALPINE VIEW COURT
WHITE LAKE MI 48386
Address Same as Well Location? NO



4. WELL DEPTH 80 ft. Date Compl 02/01/93 This is a: NEW WELL

5. EQUIPMENT USED: ROTARY
6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
Diam. 5 in. to 70 ft. Height ABOVE Surface 1 ft
Weight 1b./ft.
BORE HOLE: 8 1/2 in. to 80 ft. Drive Shoe NO
Shale Packer NO

Formation Description	Thickness	Depth
SAND	15	15
CLAY	55	70
SAND	8	78
CLAY	2	80

8. Screen Type: SLOTTED Diam: 5 [] Not Inst.
SLOT 10 Length: 10
Set Between 70 ft. and 80 ft.
Fittings: [] Blank above scrn: ft

9. Static Level: 20 ft. Flow: [N]

10. Pumping Level below land surface:
70 ft. after 1 hrs. @ 20 GPM
[] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: PITLESS ADAPTER

12. Grouted from 65 to 0 ft Material: BENSEAL
No. of Bags 6 bags Additives:

13. Nearest source of possible contamination:
Type: SEPTIC TANK Distance: 60 ft. Dir: SOUTH
Type: _____ Distance: _____ ft. Dir: _____

14. Pump: [] Not Installed [X] Installation Only
Manufacturer's Name: AEROMOTOR
Model: A12B50 HP: 0.5 Voltage: 230
Drop pipe: 40 ft. Capacity: 10 GPM
Pump type: SUBMERSIBLE
Pressure Tank Manufacturer's Name : WELL X-TROL
Model: 203 Capacity: 10 Gal.

15. Abandoned Well Plugged? NO N/A
Casing Diameter in. Depth ft.
Plugging Material:
No. of Bags Casing Removed?

16. Remarks, elevation, source of data, etc.
PUMP INSTALLED 7-18-97

17. Drilling Machine Operator: [X] Employee [] Subcontractor
Name KEVIN STRUCK

GW-2-228 9/93
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

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.
Registered Bus. Name ED BIRKMEIER WELL DRILLING LTD 1607
Business Address 10655 Lakeside Road New Lothrop MI 48460
Signed Edward Birkmeier 07/21/97
Authorized Representative Date

TAX-NO:

MICHIGAN DEPARTMENT OF PUBLIC HEALTH WATER WELL AND PUMP RECORD

PERMIT NO:

1. LOCATION OF WELL

County OAKLAND Township Name Blue White LK Fraction SE 1/4 SE 1/4 NW 1/4 Section No. 21 Town No. 3N Range No. 8E

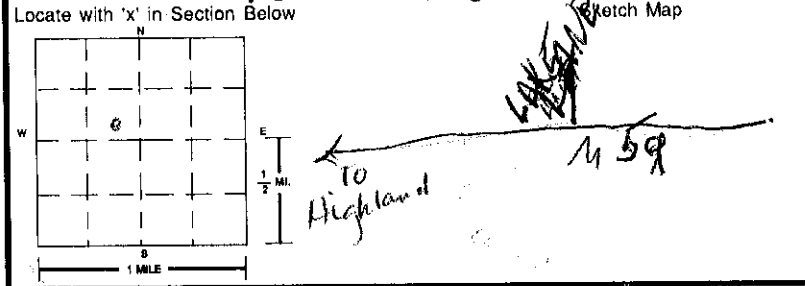
Distance and Direction from Road Intersection
M 59 East to Lake Dr. N.

Street Address & City of Well Location
48383 LAKE LAKE DR. WHITE LK

Locate with 'x' in Section Below

3. OWNER OF WELL
Address LOMBARDO Construction
6650 Highland Rd Suite 213
Waterford Mich 48327

Address Same as Well Location Yes No



4. WELL DEPTH: 75 ft. Date Completed 06/10/96

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 Welded
 Plastic Other

Height: Above/Below Surface: 1 ft

Diameter: 4 in. to 7 1/2 ft. depth
11 lbs./ft.

BORE HOLE: Drive Shoe
 Shale Packer

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
CLAY & GRAVEL	0	30
Yellow SAND	30	55
CLAY & GRAVEL	55	60
Grey SAND	60	75

8. SCREEN: Not Installed Gravel-Packed

Type 55 Diameter 1 1/2"

Slot/Gauze 18 Length: 1 1/2 ft.

Set Between 1 ft. and 1 1/2 ft.

FITTINGS: Packer Bremer Check
 Blank Above Screen 1 ft. Other

9. STATIC WATER LEVEL: 20 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface 24 ft. After _____ hrs. Pumping at _____ G.P.M.

Plunger Bailer Air Test Pump

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

12. WELL GROUTED? No Yes From 0 to 50 ft.

Neat Cement Bentonite Other

No. of Bags 2 Additives

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:

Type Septic Distance 70 ft. Direction NE

Type _____ Distance _____ ft. Direction _____

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

14. PUMP: Not Installed Pump Installation Only

Manufacturer's Name Majors

Model Number _____ HP 2 1/4 Volts 230

Length of Drop Pipe 52 ft. Capacity 20 G.P.M.

TYPE: Submersible Jet Other

PRESSURE TANK:
Manufacturer's Name Well-King
Model Number 251 Capacity 80 Gallons 10

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

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name Mike Campbell

15. 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 Layman Sons Inc 04016
REGISTERED BUSINESS NAME REGISTRATION NO.

Address 4812 Eagle Rd. White LK Mich 48383

Signed [Signature] Date 11/04/96
AUTHORIZED REPRESENTATIVE

RECEIVED OAKLAND COUNTY HEALTH DIVISION
FEB 21 AM 11:26
FEB 28 97

1 Location of Well
 County OAKLAND Township Name WHITE LAKE Fraction NE 1/4 SW 1/4 SW 1/4 Section Number 21 Town Number 3N Range Number N/S 8E E/W

Distance and Direction From Road Intersection
 EAST OF BOGIE LAKE RD
 NORTH OFF M-59
 1885 PORTER RD
 WHITE LAKE

3 Owner of Well STEIGERWALT, GREG
 Address 1885 PORTER RD
 WHITE LAKE MI 48383-
 Address Same as Well Location? Yes

Street Address and City of Well Location

4 Well Depth (Completed) 75 ft. Date of Completion 08/25/97 Replacement Well

5 Drilling Method MUD ROTARY

6 Proposed Use HOUSEHOLD

FORMATION DESCRIPTION	Thickness of	Depth to Bottom of Stratum	Cas PVC SDR21	Height Above Surface
TOP SOIL	1	1	5 in. to 71 ft. depth	1 ft.
BROWN SAND AND BOULDERS	3	4	Core Hole Diameter	Weight SDR21 lbs./ft.
BROWN CLAY	4	8	8.5 in. to 78 ft. depth	Drive Shoe No
GRAVEL	1	9	in. to ft. depth	Shale Packer No
GRAY CLAY	10	19	9 Screen	Gravel-packed? Yes
GRAY SAND AND GRAVEL	33	52	Type S/S WIRE WOUND	Diameter 3
GRAY CLAY	6	58	Slot/Gauze 15	Length 4
GRAY SAND AND GRAVEL	11	69	Set Between 71 ft. and 75 ft.	
GRAVEL	9	79	Fittings DIRECT ATTACHED	0.00 Blank ft. above screen
			9 Static Water Level 12 Ft. Below Land Surface	Flow
			10 Pumping Level Below Land Surface	
			55 ft. after 1 hrs. pumping at 50 G.P.M.	
			ft. after hrs. pumping at G.P.M.	
			Using AIR LINE	
			11 Well Head Completion 12" ABOVE GRADE	
			12 Well Grouted? Yes From 0 to 67 ft.	
			BENSEAL SLURRY	
			No. of bags 4 Additives E-Z MUD	
			13 Nearest Source of Possible Contamination	
			SEPTIC TANK Distance 75 ft. Direction W	
			Distance ft. Direction	

15 Abandoned well plugged? Yes
 Casing Diameter 4 in. Depth 50 ft.
 Plugging material: BENTONITE CHIPS
 No. of bags 2 Casing removed? Yes

14 Pump Installed Pump Installation Only? No
 Manufacturer's Name RED JACKET
 Model Number 75SEW1-12SBC HP 0.75 Volts 230
 Length of Drop Pipe 40 ft. Capacity 12 G.P.M.
 Type SUBMERSIBLE Jet
 Pressure tank:
 Manufacturer's Name AO SMITH
 Pressure Tank Model V-200 Capacity 60 gal.

17 Drilling machine operator:
 Employee
 Name BRENT HERRON
 Authority: Act 369 PA 1978
 Completion: Required.
 Penalty: Conviction of violation of any provision is a misdemeanor.
 IMPORTANT: File with deed.

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.
 Registered business name: BROWN DRILLING COMPANY
 Registration number: 47-2072
 Address: 7215 HIGHLAND ROAD, HOWELL, MI 48843-9083
 Signed: Stanley E. Brown Date 9-8-97
 (Authorized representative)

RECEIVED
 OAKLAND COUNTY DEPARTMENT OF HEALTH DIVISION OF WATER
 OCT 30 97
 OCT 14 AM 10:04
 D. W. R. P. O.
 GROUND WATER SUPPLY SEC.

Laboratory Analysis of Water
IN-HOUSE WATER LAB
210 N. Center Street, Howell MI 48843
Phone/Fax: 517-548-7363
MDPH Certified Laboratory Identification No. 9420

6862

WSSN: _____ SAMPLE # 2
Well Owner GREG STEIGERWALT Well permit # _____
Address 1885 PORTER RD.
City WHITE LAKE State MI Zip 48383
County OAK Township _____ Phone _____

Sample Collected By BROWN DRILLING CO
Address 7215 HIGHLAND
City HOWELL State MI Zip 48843
Sample Date 8-28-97 Sample Point TANK Collection Time 8:45


Chlorinated Yes No
 Raw Water Routine Monitoring Plant Tap Distribution Sale
 New Well Construction, Repair Resample, Previous Positive of Home

PLEASE HAVE RESULTS: FAXED MAILED PLEASE CALL
PLEASE HAVE RESULTS: FAXED MAILED PLEASE CALL

BROWN ASAP

DO NOT WRITE BELOW - LABORATORY RESULTS

PAID _____ CHARGE ACCT NAME Brown
DATE 8-28-97 TIME RECEIVED _____ TIME PLANTED 10.0

<input type="checkbox"/> VERIFIED MF	<input type="checkbox"/> CONDUCTIVITY micromho	<input type="checkbox"/> FLUORIDE as F- ppm	<input type="checkbox"/> SODIUM ppm
<input type="checkbox"/> CHLORIDE ppm	<input type="checkbox"/> TOTAL IRON ppm	<input type="checkbox"/> HARDNESS ppm as CaCO3	
<input checked="" type="checkbox"/> COLIFORM BACTERIA <u>Absent</u>	<input checked="" type="checkbox"/> E. COLI BACTERIA <u>Absent</u>	<input type="checkbox"/> NITRATE as N ppm	

REMARKS: **SAMPLE PASSES STATE REQUIREMENTS** EXAMINER: [Signature]

Laboratory Analysis of Water
IN-HOUSE WATER LAB
 210 N. Center Street, Howell MI 48843
 Phone/Fax: 517-548-7363
 MDPH Certified Laboratory Identification No. 9420

WSSN: _____ SAMPLE # 6742
 Well Owner GREGG STEIGERWALT Well permit # _____
 Address 1885 PORTER RD
 City WHITE LAKE, MI State MICHIGAN Zip _____
 County OAKLAND Township _____ Phone _____

Sample Collected By BROWN DRILLING CULK
 Address 7215 E HIGHLAND RD.
 City HOWELL MI State MICHIGAN Zip 48843
 Sample Date 8/20/97 Sample Point CORP TAP Collection Time 10:15 AM

Chlorinated Yes No
 Raw Water Routine Monitoring Plant Tap Distribution Sale
 New Well Construction, Repair Resample, Previous Postive of Home

PLEASE HAVE RESULTS: FAXED MAILED PLEASE CALL
 PLEASE HAVE RESULTS: FAXED MAILED PLEASE CALL
Brown

DO NOT WRITE BELOW - LABORATORY RESULTS

PAID _____ CHARGE ACCT NAME Brown
 DATE 8-20-97 TIME RECEIVED _____ TIME PLANTED 12.0

<input type="checkbox"/> VERIFIED MF	<input type="checkbox"/> CONDUCTIVITY micromho	<input type="checkbox"/> FLUORIDE as F- ppm	<input type="checkbox"/> SODIUM ppm
<input type="checkbox"/> CHLORIDE ppm	<input type="checkbox"/> TOTAL IRON ppm	<input type="checkbox"/> HARDNESS ppm as CaCO3	THANK YOU
<input checked="" type="checkbox"/> COLIFORM BACTERIA <u>Present</u>	<input checked="" type="checkbox"/> E. COLI BACTERIA <u>Absent</u>	<input checked="" type="checkbox"/> NITRATE as N <u>0.279</u> ppm	<input type="checkbox"/>

REMARKS: The bacteria **SAMPLE DOES NOT PASS STATE REQUIREMENTS**
 EXAMINER: [Signature]

WATER WELL AND PUMP RECORD

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

TAX NO:

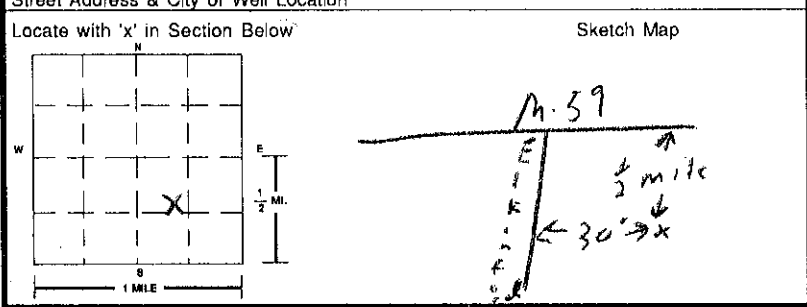
PERMIT NO:

1. LOCATION OF WELL
County Oakland

Township Name White LK Fraction SE 1/4 Section No. 21 Town No. 3 Range No. 8

Distance and Direction from Road Intersection
1/2 mile S of M-59
30' W of Elkinford

3. OWNER OF WELL
Address Thibodeau
630 Elkinford
Address Same as Well Location Yes No



4. WELL DEPTH: 80 ft. Date Completed 9/22/98
 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 Welded
 Plastic Other
Height: Above Surface: 1 ft
Diameter: 5 in. to 76 ft. depth
Weight: 50R21 lbs./ft.
BORE HOLE: Drive Shoe Shale Packer
Diameter: 8 1/2 in. to 80 ft. depth

8. SCREEN: Not Installed Gravel-Packed
Type 5 steel Diameter 3"
Slot/Gauze 10 Length: 4'
Set Between 76 ft. and 80 ft.
FITTINGS: Packer Bremer Check
 Blank Above Screen ft. Other

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

10. PUMPING LEVEL: Below Land Surface
70 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 70 to 0 ft.
 Neat Cement Bentonite Other
No. of Bags 7 Additives E-2-MUD

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type 5 tank Distance 60 ft. Direction E
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name Red Jacket
Model Number R-10 HP 1/2 Volts 230
Length of Drop Pipe 60 ft. Capacity 10 G.P.M.
TYPE: Submersible Jet Other
PRESSURE TANK:
Manufacturer's Name AO Smith
Model Number V-60 Capacity 20 Gallons 3

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Brown clay</u>	<u>18</u>	<u>18'</u>
<u>gravel</u>	<u>2</u>	<u>20"</u>
<u>clay</u>	<u>15</u>	<u>35"</u>
<u>clay + gravel</u>	<u>11</u>	<u>46"</u>
<u>clay</u>	<u>9</u>	<u>55"</u>
<u>sand</u>	<u>25</u>	<u>80"</u>

Note: This well was properly grouted from 70'-0" McPherson Well Drilling Inc. is not responsible for any grout shrinkage, settling, saturation, adverse soil conditions or improper grout probing

AK 10/12/98

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.)

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name Ralph Richman

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.
McPherson Well Drilling Inc. 1701
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 10000 McPherson
Signed [Signature] (Pric) Date 10/12/98
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

TAX NO: **12 21 251 019**

PERMIT NO: **111458**

1. LOCATION OF WELL

County **Oakland**

Township Name

White Lake

Fraction

SW 1/4 NE 1/4

Section No.

21

Town No.

3N

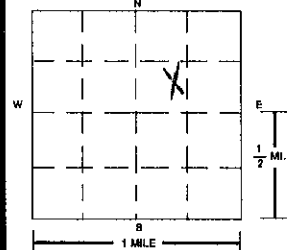
Range No.

8E

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 **Gerald Pribe
1125 Dolane**

Address Same as Well Location Yes No

4. WELL DEPTH:

88 ft.

Date Completed

12 27 98

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

Height: Above/Below

Plastic

Welded

Surface: _____ ft

Other

Diameter: **4** in. to **84** ft. depth

Weight **10/40** lbs./ft.

_____ in. to _____ ft. depth

BORE HOLE:

Diameter: _____ in. to _____ ft. depth

Drive Shoe

Shale Packer

_____ in. to _____ ft. depth

8. SCREEN: Not Installed

Gravel-Packed

Type **Johnson**

Diameter **3"**

Slot/Gauze **10**

Length: **48"**

Set Between **84** ft. and **88** ft.

FITTINGS: K-Packer

Bremer Check

Blank Above Screen **1** ft. Other _____

9. STATIC WATER LEVEL:

17 ft. Below Land Surface

Flowing

10. PUMPING LEVEL: Below Land Surface

42 ft. After **1/2** hrs. Pumping at **55** G.P.M.

Plunger

Bailer

Air

Test Pump

11. WELL HEAD COMPLETION:

Pitless Adapter

12" Above Grade

Basement Offset

Well House

12. WELL GROUTED? No Yes

From **0** to **78** ft.

Neat Cement

Bentonite

Other _____

No. of Bags **3 1/2** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:

Type **septic** Distance **53** ft. Direction **West**

Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed

Pump Installation Only

Manufacturer's Name **Redjacket**

Model Number _____ HP **1/2** Volts **115**

Length of Drop Pipe **42** ft. Capacity **12** G.P.M.

TYPE: Submersible Jet Other _____

PRESSURE TANK:

Manufacturer's Name **Well X-trol**

Model Number **WX202** Capacity **30** Gallons

2. FORMATION DESCRIPTION

THICKNESS OF STRATUM

DEPTH TO BOTTOM OF STRATUM

Brown sand-brown clay

0

14

Blue clay-gravel

67

81

Fine to med. sand-water

7

88

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No

Casing Diameter **2** in.

Depth **80** ft.

PLUGGING MATERIAL:

Neat Cement

Bentonite Slurry

Cement/Bentonite Slurry

Concrete Grout

Bentonite Chips

No. of Bags **2**

Casing Removed? Yes No

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

17. DRILLING MACHINE OPERATOR:

Employee Subcontractor

Name **Charles Farren**

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.

Fettig Well Drilling

REGISTERED BUSINESS NAME

63-1976

REGISTRATION NO.

Address **5575 Jackson Blvd., White Lake**

Signed **Randy K. [Signature]**

AUTHORIZED REPRESENTATIVE

Date **1-2-99**

WATER WELL AND PUMP RECORD

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

TAX NO:

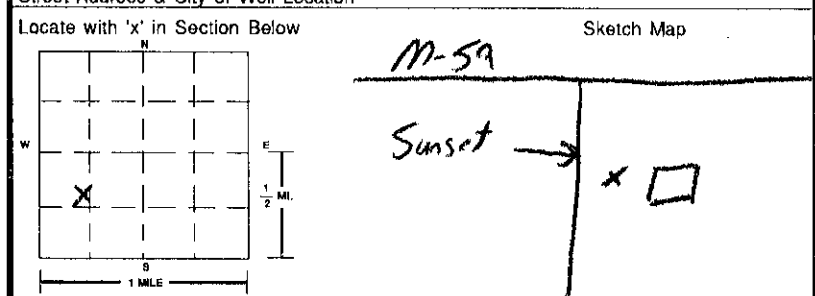
PERMIT NO:

1. LOCATION OF WELL
County Oakland

Township Name White Lake Fraction SE 1/4 NW 1/4 SW 1/4 Section No. 21 Town No. 3N Range No. 8E

Distance and Direction from Road Intersection
About 600' South of M-59 & about 150' East of Sunset

3. OWNER OF WELL
Address Ken Johnson
640 Sunset
White Lake
Address Same as Well Location Yes No



4. WELL DEPTH: 60 ft. Date Completed 10/23/97
 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 Welded
 Plastic Other
Height: Above Surface: 1 ft.
Diameter: 5 in. to 55 ft. depth Weight: 18 lbs./ft.
BORE HOLE: Drive Shoe
Diameter: _____ in. to _____ ft. depth Shale Packer

2. FORMATION DESCRIPTION

FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Brown Sand</u>	<u>17</u>	<u>17</u>
<u>Gray Sand</u>	<u>12</u>	<u>29</u>
<u>Gray Clay</u>	<u>13</u>	<u>42</u>
<u>Gray Sand</u>	<u>18</u>	<u>60</u>

8. SCREEN: Not Installed Gravel-Packed
Type Stainless Steel Diameter 4"
 Gauze 15 Length: 5'
Set Between 55 ft. and 60 ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen 1 ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
14 ft. After 1 hrs. Pumping at 70 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 55 ft.
 Neat Cement Bentonite Other _____
No. of Bags 3 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type Septic Distance 70 ft. Direction East
Type _____ Distance _____ ft. Direction _____

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

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name Gould
Model Number 105007 HP 3/4 Volts 230
Length of Drop Pipe 20 ft. Capacity 18 G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name Well X-Trol
Model Number WX-251 Capacity 62 Gallons 17

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

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name Ray Houtz

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.
Harrison Pritchard Drilling #2145
REGISTERED BUSINESS NAME REGISTRATION NO.
Address P.O. Box 9090 White Lake MI 48390
Signed U L Pugh Date 10-23-97
AUTHORIZED REPRESENTATIVE

RECEIVED
MICHIGAN DEPARTMENT OF
ENVIRONMENTAL QUALITY
FEB 11 98
OVER RD.
GROUND WATER SUPPLY SEC.

USE AND SHEET IF NEEDED

TAX NO:

1. LOCATION OF WELL

County: OAKLAND Township Name: WHITE LAKE

Fraction: NW 1/4 NW 1/4 SE 1/4

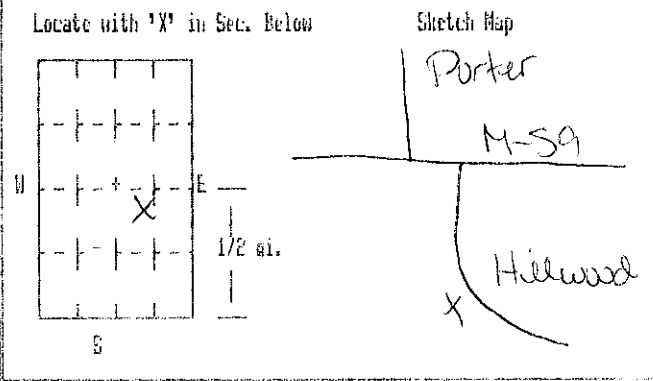
Section No: 21

Town No: 3 N

Range Number: 6 E

Distance And Direction From Road Intersection: SOUTH OF M-59 ON THE WEST SIDE OF HILLWOOD
Well Addr: 567 HILLWOOD ROAD

3. Owner of Well: ROBERT SHOONER
Address: 5201 HUBBARD ROAD WHITE LAKE MI 48386
Address Same as Well Location? NO



4. WELL DEPTH: 69 ft. Date Compl: 11/24/97 This is a: NEW WELL

5. EQUIPMENT USED: ROTARY
6. WELL USE: HOUSEHOLD

7. CASING Type: PLASTIC Connection: WELDED
Diam: 5 in. to 59 ft. Height ABOVE Surface: 1 ft.
Weight: 1b./ft.
BORE HOLE: Drive Shoe NO
8 3/4 in. to 70 ft. Shale Packer NO
in. to ft.

Formation Description	Thickness	Depth
SAND	3	3
BROWN SANDY CLAY	17	20
GRAY CLAY	3	23
BROWN SANDY CLAY	7	30
GRAY CLAY	15	45
GRAY GRAVEL	24	69
CLAY	1	70

8. Screen Type: SLOTTED Dia: 5 [] Not Inst.
SLOT: 15 Length: 10
Set between 59 ft. and 69 ft.
Fittings: [] Blank above screen: ft

9. Static Level: 15 ft. Flow: IND

10. Pumping Level below land surface:
69 ft. after 1/2 hrs. @ 30 GPM
[] Plunger [] Bailer [X] Air [] Test Pump

11. Well Head Completion: PITLESS ADAPTER

12. Grouted from 59 to 0 ft Material: BENSEAL
No. of Bags 6 bags Additives: SUPER MUD

13. Nearest source of possible contamination:
Type: NOT INSTALLED Distance: ft. Dir:
Type: Distance: ft. Dir:

14. Pump: [] Not Installed [] Installation Only
Manufacturer's Name: RED JACKET
Model: 75CN10N100 HP: 0.75 Voltage: 230
Drop pipe: 50 ft. Capacity: 18 GPM
Pump type: SUBMERSIBLE
Pressure Tank Manufacturer's Name: WELL X-TRUL
Model: 251 Capacity: 15 Gal.

15. Abandoned Well Plugged? NO N/A
Casing Diameter in. Depth ft.
Plugging Material:
No. of Bags Casing Removed?

16. Remarks, elevation, source of data, etc.
PUMP - ANDY BIRCHMEIER

17. Drilling Machine Operator: [X] Employee [] Subcontractor
Name: MATT TRANKA

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.
Registered Bus. Name: ED BIRKMEIER WELL DRILLING LTD 1607
Bus. Address: 10855 Easton Road New Lothrop MI 48068
Signed: [Signature] 11/25/97
Authorized Representative Date

GW-2-828 9/93
Authority: Act 360 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

WATER WELL AND PUMP RECORD

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

TAX NO:

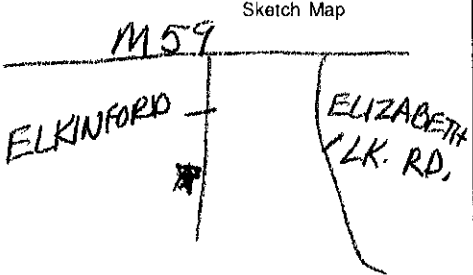
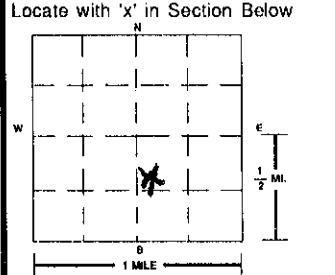
PERMIT NO:

1. LOCATION OF WELL
County **OAKLAND**

Township Name **WHITE LAKE** Fraction **1/4 1/4 1/4** Section No. **21** Town No. **3N** Range No. **8E**

Distance and Direction from Road Intersection
WEST SIDE OF ELKINFORD 700 FT. SOUTH OF M59
Street Address & City of Well Location **609 ELKINFORD WHITE LAKE**

3. OWNER OF WELL **MICHAEL CALLENDER**
Address **609 ELKINFORD WHITE LAKE, MI**
Address Same as Well Location Yes No



4. WELL DEPTH: **68** ft. Date Completed **11-22-97** 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
Height: Above/Below Surface: **1** ft
Diameter: **4** in. to **63** ft. depth Weight: **10.79** lbs./ft.
BORE HOLE: **NONE** Drive Shoe Shale Packer
Diameter: **NONE** in. to **NONE** ft. depth

8. SCREEN: Not Installed Gravel-Packed
Type **STAINLESS** Diameter **4"**
Slot **12** Length: **64'**
Set Between **64** ft. and **68'** ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen **2** ft. Other

9. STATIC WATER-LEVEL: **47** ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface **50** ft. After **1** hrs. Pumping at **70** 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 **50** ft.
 Neat Cement Bentonite Other
No. of Bags **1** Additives

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type **SEPTIC** Distance **65** ft. Direction **WEST**
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name **GOULDS**
Model Number **125B05-22** HP **1/2** Volts **230**
Length of Drop Pipe **52** ft. Capacity **10** G.P.M.
TYPE: Submersible Jet Other
PRESSURE TANK:
Manufacturer's Name **A.O. SMITH**
Model Number **V80** Capacity **8** Gallons **8**

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
RED CLAY	12	12
HARD BLUE CLAY	23	35
SOFT BLUE CLAY & GRAVEL	7	42
SAND GRAVEL	26	68
USE A 2ND SHEET IF NEEDED		

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter **2** 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.)
WELL BURIED - DON'T KNOW WHERE - AS PRESENT OWNER RECENT AND DIDN'T WANT IT DUE TO TRY & FIND

17. DRILLING MACHINE OPERATOR:
 Employee Subcontractor
Name **GLENN SOMMERS**

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.
GLENN SOMMERS **63-0613**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **10730 CLARK DAVISBURG**
Signed **Glenn Sommers** Date **11-22-97**
AUTHORIZED REPRESENTATIVE

RECEIVED
MICH DEPT OF ENVIRONMENTAL QUALITY
DEC 19 1997
Drinking Water & Radiological Protection Division
Ground Water Supply Section
WELL CONSTRUCTION UNIT

TAX NO:
12 21 377 004

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER WELL AND PUMP RECORD

PERMIT NO:

1. LOCATION OF WELL

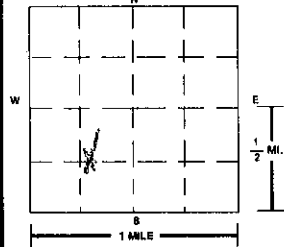
County **Oakland** Township Name **White Lake** Fraction **NE 1/4 SW 1/4 E/W 1/4** Section No. **21** Town No. **3N** Range No. **8E**

Distance and Direction from Road Intersection

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

Black dirt	0	3
Brown clay	6	9
Blue clay-gravel	88	97
Fine gray sand-gravel-water	5	102

15. ABANDONED WELL PLUGGED?

Yes No
Casing Diameter **2** in. Depth **55** ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags **2** Casing Removed? Yes No

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

17. DRILLING MACHINE OPERATOR:

Employee Subcontractor
Name **Charles Farren**

GW-2-228 9/93

3. OWNER OF WELL

Address **Billingshurst
390 Sunset**

Address Same as Well Location Yes No

4. WELL DEPTH:

102 ft. Date Completed **10/14/97** 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
Height: Above/Below Surface: _____ ft.

Diameter: **4** in. to **98** ft. depth
Weight: **10/40** lbs./ft.

BORE HOLE: Diameter: _____ in. to _____ ft. depth
 Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type **Johnson** Diameter **3"**
Slot/Gauze **10** Length: **88**
Set Between **98** ft. and **102** ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen **1** ft. Other _____

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

10. PUMPING LEVEL: Below Land Surface
63 ft. After **1/2** hrs. Pumping at **30** G.P.M.
 Plunger Bailer Air Test Pump

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

12. WELL GROUTED? No Yes From **0** to **92** ft.
 Neat Cement Bentonite Other _____
No. of Bags **3** Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type **Septic** Distance **53** ft. Direction **South**
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name **Redjacket**
Model Number _____ HP **1/2** Volts **115**
Length of Drop Pipe **63** ft. Capacity **10** G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name **Well X-trol**
Model Number **WX203** Capacity **42** Gallons

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.

Fattig Well Drilling **63-1976**
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **2990 Towering Oaks Dr., White Lake**

Signed *Randy K. Z...* Date **10-16-97**
AUTHORIZED REPRESENTATIVE

GEOLOGICAL SURVEY COPY

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

TAX NO: 12 21 226 006

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY WATER WELL AND PUMP RECORD

PERMIT NO:

1. LOCATION OF WELL
County: Oakland

Township Name: White Lake

Fraction: NE 1/4 NE 1/4 NE 1/4

Section No.: 21

Town No.: 3N

Range No.: 8E

Distance and Direction from Road Intersection
Street Address & City of Well Location: 1190 Lake Lane

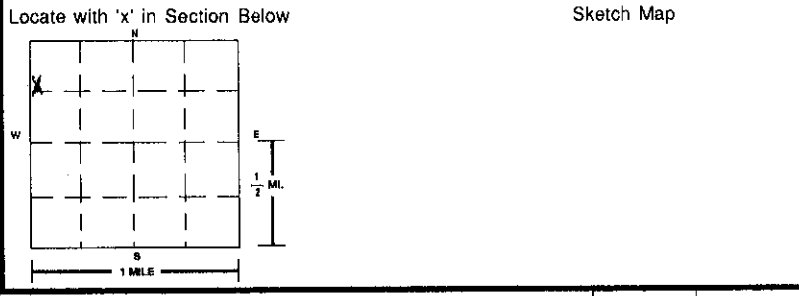


Table with 3 columns: FORMATION DESCRIPTION, THICKNESS OF STRATUM, DEPTH TO BOTTOM OF STRATUM. Rows include Brown sand-gravel-rocks and Med. sand-gravel-water.

15. ABANDONED WELL PLUGGED?
Casing Diameter, Depth, PLUGGING MATERIAL, No. of Bags, Casing Removed?

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

17. DRILLING MACHINE OPERATOR:
Employee [X] Subcontractor []
Name: Charles Farren

3. OWNER OF WELL
Address: Images Plus, 481 Shorview, Waterford
Address Same as Well Location [] Yes [X] No

4. WELL DEPTH: 53 ft. Date Completed: 10/11/97 [X] New Well [] Replacement Well

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

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

7. CASING: [X] Steel [] Threaded [] Plastic [X] Welded [] Other
Height: Above/Below Surface: ft
Diameter: 4 in. to 49 ft. depth
Weight: 10/40 lbs./ft.
BORE HOLE: [X] Drive Shoe [] Shale Packer

8. SCREEN: [] Not Installed [] Gravel-Packed
Type: Johnson Diameter: 3"
Soy/Gauze: 12 Length: 48"
Set Between: 49 ft. and 53 ft.
FITTINGS: [X] K-Packer [] Bremer Check [] Blank Above Screen 1 ft. Other:

9. STATIC WATER LEVEL: 11 ft. Below Land Surface [] Flowing

10. PUMPING LEVEL: Below Land Surface 32 ft. After 1/2 hrs. Pumping at 65 G.P.M.
[X] Plunger [] Bailer [] Air [] Test Pump

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

12. WELL GROUTED? [] No [X] Yes From 0 to 43 ft.
[] Neat Cement [X] Bentonite [] Other
No. of Bags 2 1/2 Additives:

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type: Septic Distance: 53 ft. Direction: S-E
Type: Distance: ft. Direction:

14. PUMP: [] Not Installed [] Pump Installation Only
Manufacturer's Name: Redjacket
Model Number: HP 1 Volts 230
Length of Drop Pipe: 32 ft. Capacity: 18 G.P.M.
TYPE: [X] Submersible [] Jet [] Other
PRESSURE TANK:
Manufacturer's Name: Well X-trol
Model Number: WX250 Capacity: 64 Gallons

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.
Fettig Well Drilling 63-1976
REGISTERED BUSINESS NAME REGISTRATION NO.
Address: 2990 Towering Oaks Dr., White Lake
Signed: Randy K. [Signature] Date: 10-12-97
AUTHORIZED REPRESENTATIVE

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

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PERMIT NUMBER

1 LOCATION OF WELL						
County Oakland	Township Name White Lake	Fraction ne 1/4 se 1/4 nw 1/4	Section Number 21	Town Number 3 N/S	Range Number 8 E/W	

Distance And Direction From Road Intersection

Street Address & City of Well Location **890 Charltn**

Locate with "X" in Section Below Sketch Map:

3 OWNER OF WELL:

Loyd Baker
Address **890 Charlton**
White Lake 48383

Address Same As Well Location? Yes No

4 WELL DEPTH: Date Completed **6 16 92** New Well
90 FT. 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 Steel Threaded Plastic Welded
Height: Above/Below Surface **XXXXX** **1** ft.
Weight **10.79** s./ft.
Drive Shoe Yes No

2 FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
brown clay	35	35
brown sand	30	65
blue clay-gravel	24	89
gray sand-water	9	98
old well 2in.est. depth 65ft.		
filled from bottom to top with		
holeplug.		

8 SCREEN: Not Installed
Type **telescope** Diameter **3in.**
Slot **XXXX** **10** Length **48in.**
Set between **94** ft. and **98** ft.
FITTINGS: K-Packer Lead Packer Bremer Check
 Blank above screen **1** ft. Other _____

9 STATIC WATER LEVEL: **51** ft. below land surface Flow

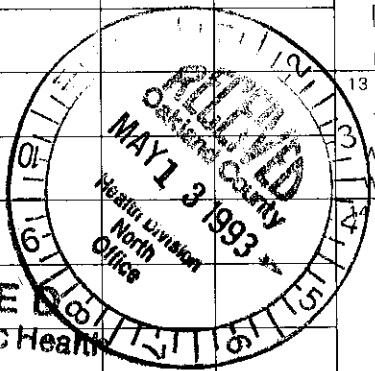
10 PUMPING LEVEL: below land surface
63 ft. after **1** hrs. pumping at **55** G.P.M.
_____ ft. after _____ hrs. pumping at _____ G.P.M.

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

12 WELL GROUTED? No Yes From **0** to **30** ft.
 Neat cement Bentonite Other _____
No. of bags of cement **1** Additives _____

13 Nearest source of possible contamination
Type **septic** Distance **50** ft. Direction **east**
Well disinfected upon completion? Yes No
Was old well plugged? Yes No

PUMP: Not Installed Pump Installation Only
Manufacturer's name **Myers**
Model number _____ HP **1/2** Volts **220**
Length of Drop Pipe **63** ft. capacity **12** G.P.M.
TYPE: Submersible Jet
PRESSURE TANK:
Manufacturer's name _____
Model number _____ Capacity _____ Gallons



RECEIVED
Mich. Dept. of Public Health
MAY 18 1993

15. Remarks, elevation, source of water

BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS

nit.-0-

17. Rig Operator's Name:
Chuck Farren

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.

Fettig Well Drilling 0413
REGISTERED BUSINESS NAME REGISTRATION NO.
Address **5575 Jackson Blvd. White Lake 48383**
Signed **George Fettig** Date **6-19-92**
AUTHORIZED REPRESENTATIVE

To. Mike Pylar.

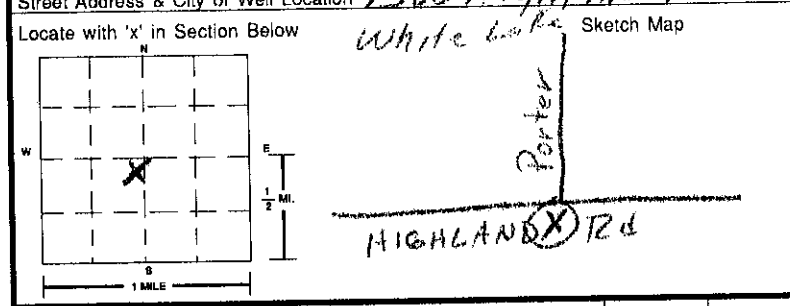
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY WATER WELL AND PUMP RECORD

PERMIT NO:

TAX NO:
13-21-401-019

1. LOCATION OF WELL
County Oakland Township Name White Lake Fraction NE 1/4 NE 1/4 SW 1/4 Section No. 21 Town No. 3N Range No. 8E

Distance and Direction from Road Intersection
Corner of Porter and Highland Rd.
White Lake Community Hall
Street Address & City of Well Location 7500 Highland Rd.



3. OWNER OF WELL
Address White Lake Township
7525 Highland Rd.
White Lake, Mi.
Address Same as Well Location Yes No 48383

4. WELL DEPTH: 78 ft. Date Completed 7/11/97
 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 Welded
 Plastic Other
Height: Above/Below Surface: 1 ft

Diameter: 5 in. to 74 ft. depth
Weight: 3 lbs./ft.
BORE HOLE: 8 1/2 in. to 74 ft. depth
 Drive Shoe Shale Packer

8. SCREEN: Not Installed Gravel-Packed
Type 5.5 Diameter 4"
Slot/Gauge 10 Length: 4'
Set Between 74 ft. and 78 ft.
FITTINGS: K-Packer Bremer Check
 Blank Above Screen _____ ft. Other _____

9. STATIC WATER LEVEL: 45 ft. Below Land Surface Flowing

10. PUMPING LEVEL: Below Land Surface
52 ft. After 1 hrs. Pumping at 15 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 64 to Top ft.
 Neat Cement Bentonite Other _____
No. of Bags 7 Additives _____

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type Storm Drain Distance 35 ft. Direction E
Type _____ Distance _____ ft. Direction _____

14. PUMP: Not Installed Pump Installation Only
Manufacturer's Name Myers
Model Number 2NF4162 HP 1/2 Volts 115
Length of Drop Pipe 61 ft. Capacity 12 G.P.M.
TYPE: Submersible Jet Other _____
PRESSURE TANK:
Manufacturer's Name Well X-tral
Model Number 202 Capacity _____ Gallons 20

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
<u>Bin. Sand + Gravel</u>	<u>18</u>	<u>18</u>
<u>Bin. Clay</u>	<u>9</u>	<u>27</u>
<u>Bin. Sand + Gravel</u>	<u>11</u>	<u>38</u>
<u>Blue Clay</u>	<u>28</u>	<u>66</u>
<u>Gray W. Sand + Gravel</u>	<u>12</u>	<u>78</u>

RECEIVED
OAKLAND COUNTY DEPARTMENT
HEALTH DIVISION
OCT 20 97
OCT 13 12:35 PM '97
GROUND WATER SUPPLY S

USE A 2ND SHEET IF NEEDED

15. ABANDONED WELL PLUGGED? Yes No
Casing Diameter 2 in. Depth 70 ft.
PLUGGING MATERIAL: Neat Cement Bentonite Slurry
 Cement/Bentonite Slurry Concrete Grout Bentonite Chips
No. of Bags 2 Casing Removed? Yes No

16. REMARKS: (Elevation, Source of Data, etc.)
Well located in well pit to be filled. Only spot top of well.

17. DRILLING MACHINE OPERATOR: OWNER
 Employee Subcontractor
Name James Zelony

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.
Zelony Well Drilling, Inc. 63-749
REGISTERED BUSINESS NAME REGISTRATION NO.
Address 4724 N. Duak Lake, Highland, Mi
Signed [Signature] Date 7/11/97 48383
AUTHORIZED REPRESENTATIVE

GW-2-228 9/93

GEOLOGICAL SURVEY COPY

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

