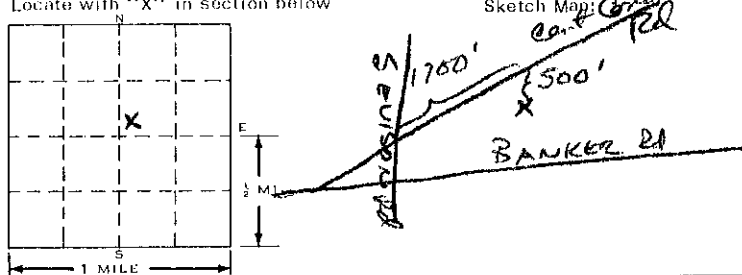


2 DEC 20 1976

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 LOCATION OF WELL			3 OWNER OF WELL:		
County ST. JOSEPH	Township Name FLORENCE	Fraction SW 1/4 NE 1/4 SW 1/4	Section Number 9	Town Number 7	Range Number 11
Distance And Direction from Road Intersections 500' S of Const - Cent Rd 1700' N.E. of SEVISON Rd			Address GUY JOHNSON CENTERVILLE / CONSTANTINE RD CENTERVILLE, MICH		
Street address & City of Well Location 1700' N.E. of SEVISON Rd			4 WELL DEPTH: (completed) Date of Completion 50 ft.		
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 checked="" 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"/> Height: Above/Below Surface 1 ft. 12 in. to 32 ft. Depth Weight 50 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Top Soil			8 SCREEN: Type: SS Dia.: 12" Nom Slot/Grauze 5-20 35-20 length 21-0 1/2" OA Set between 15-40 ft. and 50 ft. Fittings: LEAD PACKER / BAIL BOTTOM		
dirty sand / gravel			9 STATIC WATER LEVEL 11' ft. below land surface		
med sand			10 PUMPING LEVEL below land surface 38 ft. after 2 hrs. pumping 700 g.p.m.		
yellow sand some gravel			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____		
dark gravel lots of sand			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade		
lots good gravel			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/>		
med sand ≤ 25 dot			14 Nearest Source of possible contamination None in Area Type _____ Well disinfected upon completion <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
STILL IN FINE SAND			15 PUMP: <input checked="" type="checkbox"/> Not installed @ THIS TIME 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		
ADDED INFO BY DRILLER, ITEM NO. CORRECTED BY ADDITION BY ELEVATION DEPTH TO ROCK USE A 2ND SHEET IF NEEDED			16 Remarks, elevation, source of data, etc. 12" SAME HOLE AS TEST WELL FINE SANDS to MED SAND ON TEST WELL TO 70' PERMIT # BR 000587		
			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. George B. Cole & Son 0213 REGISTERED BUSINESS NAME REGISTRATION NO. Address 3946 Evergreen Lane B.H. Signed Robert J. Cole Date 12 July 76 AUTHORIZED REPRESENTATIVE		

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL											
County St. Joseph	Twp. Florence	Fraction SW 1/4 SE 1/4 NW 1/4	Section No. 9	Town 7 N/S.	Range 11 E/W.						
Distance And Direction from Road Intersections On NW side of Centreville-Constantine Road about 1/2 mile SW of Roys Street						3 OWNER OF WELL: Harold W. Huff Address 745 Wilson Lane, Hinsdale, Ill. 60521					
Street address & City of Well Location Unknown						4 WELL DEPTH: (completed) Date of Completion 49 ft. March 21, 1968					
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 type="checkbox"/> Hollow rod <input checked="" type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> _____							
Surface dirt		3	3	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		40	43	7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below surface 2 ft. Diam. 4 in. to 43 ft. Depth Weight 11 lbs./ft. _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Sand & gravel (screened)		6	49	8 SCREEN: Type: Brass strainer Dia.: 3 13/16" Slot/Gauge 12 Length 6' Set between 43 ft. and 49 ft. Fittings: Standard strainer fittings							
				9 STATIC WATER LEVEL 12 ft. below land surface							
				10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. Plunger tested _____ ft. after 1 hrs. pumping 50 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 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 unknown _____ feet _____ Direction _____ 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 Flint & Walling Model Number SMIP 3107 HP 3/4 Length of Drop Pipe 21 ft. capacity 22 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> _____ <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating							
*CORRECTED BY:											
**ADDITION BY:											
16 Remarks, elevation, source of data, etc. Source of data, well: Michael Grahl " " " Pump: Otto Bickel, Jr. Robert M. Korp						17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. B. J. Lewis & Sons 0088 REGISTERED BUSINESS NAME REGISTRATION NO. Address M-60 East, Cassopolis, Michigan Signed <i>Frank McLaughlin</i> Date 3/27/68 AUTHORIZED REPRESENTATIVE					

JAN 24 1984
GEOLOGICAL SURVEY NO.

MICHIGAN DEPARTMENT OF PUBLIC HEALTH
WATER WELL AND PUMP RECORD

PERMIT NUMBER

PART 127 ACT 368, P.A. 1978

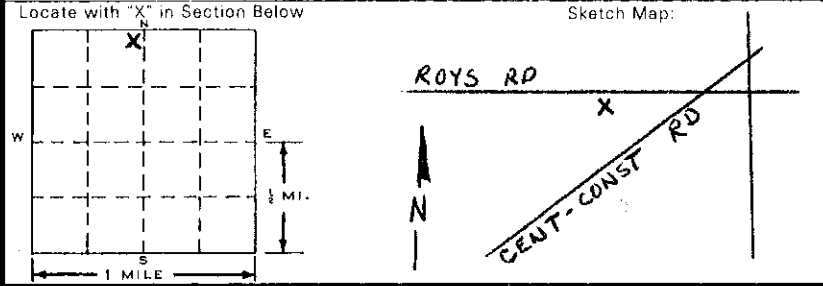
1 LOCATION OF WELL				
County	Township Name	Fraction	Section Number	Range Number
St. Joseph	Florence	NE 1/4 NE 1/4 NW 1/4	9	T7 N/S R11 E/W

Distance And Direction From Road Intersection
1/4 mile W. of Centreville-Constantine Road
50' S. of Roys Road

Street Address & City of Well Location

3 OWNER OF WELL: **Jack Hensel**
18876 Centreville-Constantine Road
Constantine, MI

Address Same As Well Location? Yes No



4 WELL DEPTH: (completed) **63** ft. Date of Completion **11-2-83**

2 83A FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Top soil	1	1
Brown sand and gravel	22	23
Brown coarse gravel	10	33
Brown gravelly clay	2	35
Grey medium sand to fine gravel	18	53
Grey fine to coarse sand	10	63
Grey very fine to medium sand (stop)		63

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 _____ lbs./ft.

Grouted Drill Hole Diameter **6** in. to **33** ft. depth
 _____ in. to _____ ft. depth

Drive Shoe Yes No

8 SCREEN: **Jet Stream** Not Installed
 Type **PVC** Diameter **4"**
 Slot/Gauze **.035** Length **20'**
 Set between **33** ft. and **53** ft.
 FITTINGS: Packer Lead Packer Bremer Check
 Blank above screen _____ ft. Other _____

9 STATIC WATER LEVEL: **11** 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 2" above grade
 Basement offset Approved pit

12 WELL GROUTED? No Yes From **0** to **33** ft.
 Neat cement Bentonite Other _____
 No. of bags of cement _____ Additives _____

13 Nearest source of possible contamination
 Type **Res. septic** distance **400** ft. Direction **NW**
 Well disinfected upon completion? 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

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

RECEIVED
 Mich. Dept. of Public Health
NOV 29 1983
 Environmental and
 Occupational Health
 Services Administration
 USE A 2ND SHEET IF NEEDED

15. Remarks, elevation, source of data, etc.
Temporary test well, casing and screen to be removed and hole properly sealed after permanent well is installed

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.
Layne-Northern Co. **0550**
 REGISTERED BUSINESS NAME REGISTRATION NO.
 Address **P.O. Box 468, Mishawaka, IN 46544**
 Signed **Layne-Northern Co.** Date **11-16-83**
 AUTHORIZED REPRESENTATIVE

JAN 24 1984

WATER WELL AND PUMP RECORD

PART 127 ACT 368, P.A. 1978

PERMIT NUMBER

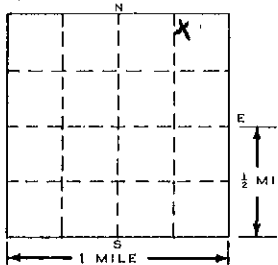
1 LOCATION OF WELL			3 OWNER OF WELL:		
County St. Joseph	Township Name Florence	Fraction NE 1/4 NE 1/4 NW 1/4	Section Number 9	Town Number T7 MS	Range Number R11 W
Distance And Direction From Road Intersection 1/4 mile W. of Centreville-Constantine Road 50' S. of Roys Road			Address Jack Hensell 18876 Centreville-Constantine Road Constantine, MI		
Street Address & City of Well Location Locate with "X" in Section Below			Address Same As Well Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;"> <p style="text-align: center;">Sketch Map:</p> </div> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">ROYS RD</p> <p style="text-align: center;">CENT - CONST RD</p> </div> </div>			4 WELL DEPTH: (completed) _____ ft. Date of Completion 11-23-83 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 <input type="checkbox"/> _____ 6 USE: <input type="checkbox"/> Domestic <input type="checkbox"/> Type I Public <input type="checkbox"/> Type III Public <input checked="" 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 type="checkbox"/> Welded Height: Above/Below Surface <u>1</u> ft. Weight 49.6 lbs./ft. Grouted Drill Hole Diameter <u>12</u> in. to <u>38</u> ft. depth <u>18</u> in. to <u>53</u> ft. depth Drive Shoe <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
2 No. 2 FORMATION DESCRIPTION			8 SCREEN: Layne Western <input type="checkbox"/> Not Installed		
Top soil	THICKNESS OF STRATUM 2	DEPTH TO BOTTOM OF STRATUM 2	Type Stainless Diameter 12-3/4 O.D.		
Brown muddy sand	6	8	Slot/Gauze .060" Length 15'		
Coarse sand and gravel	5	13	Set between 38 ft. and 53 ft.		
Brown clay	2	15	FITTINGS: <input type="checkbox"/> K-Packer <input type="checkbox"/> Lead Packer <input type="checkbox"/> Bremer Check <input type="checkbox"/> Blank above screen _____ ft. Other Weld Ring		
Brown fine sand	7	22	9 STATIC WATER LEVEL: 11 1/2 ft. below land surface <input type="checkbox"/> Flow		
Brown coarse gravel	12	34	10 PUMPING LEVEL: below land surface 27 ft. after 2 hrs. pumping at 710 G.P.M. 35 ft. after 1 hrs. pumping at 1041 G.P.M.		
Brown gravelly clay	1	35	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		
Grey medium sand to fine gravel	18	53	12 WELL GROUTED? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes From 5 to 20 ft. <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ No. of bags of cement _____ Additives _____		
ADDITIONAL INFO BY DRILLER, FROM BCL CORRECTED BY ADDITION BY TO ROCK			13 NEAREST SOURCE OF POSSIBLE CONTAMINATION: Type Res. Septic Distance 400 Direction NW 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 Western Land Roller Model number 10CHC-4 HP 40 Volts 460 Length of Drop Pipe 45 ft. capacity 700 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. 18" x 12" Gravel Wall Well 3 Cubic Yards #612 Silica Gravel			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. Layne-Northern Company 0550 REGISTERED BUSINESS NAME REGISTRATION NO. Address P.O. Box 468, Mishawaka, IN 46544 Signed <i>Ernest A. Stahl</i> Date 12-5-83 AUTHORIZED REPRESENTATIVE		

RECEIVED
MICH. DEPT. OF PUBLIC HEALTH
JAN 6 1984
Environmental and
Occupational Health
Services Administration

DEC 24 1975

WATER WELL RECORD
ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL										
County St Joseph	Township Name Florence	Fraction NW 1/4 NE 1/4 NE 1/4								
Distance And Direction from Road Intersections on Center Vill-Constantine Rd 20 Rods SW of Roys Rd.		Section Number 9								
Street address & City of Well Location Constantine, Mich		Town Number 7 N/S.								
Locate with "X" in section below 		Range Number 11 E/W.								
3 OWNER OF WELL: James Reed Constantine, Mich										
4 WELL DEPTH: (completed) 75 ft. Date of Completion 7-9-74										
<table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> Cable tool</td> <td><input type="checkbox"/> Rotary</td> <td><input type="checkbox"/> Driven</td> <td><input type="checkbox"/> Dug</td> </tr> <tr> <td><input type="checkbox"/> Hollow rod</td> <td><input type="checkbox"/> Jetted</td> <td><input type="checkbox"/> Bored</td> <td><input type="checkbox"/></td> </tr> </table>			<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"/>
<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 type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input checked="" 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"/> Height: Above/Below Surface 1 ft. Diam. 12 in. to 75 ft. Depth Weight 53 lbs./ft. Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM								
Surface	5	5								
Sand	5	10								
8 SCREEN: Type: Brass w/w Dia: 12" Slot/Gauze 3-30, 10'60 Length 20' Set between 55 ft. and 75 ft. Fittings: std.										
9 STATIC WATER LEVEL 6 ft. below land surface										
10 PUMPING LEVEL below land surface 26 ft. after 2 hrs. pumping 1500 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 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 type="checkbox"/> Not installed Manufacturer's Name Red Jacket Model Number 510P-548 HP 50 Volts 440 Length of Drop Pipe 27 ft. capacity 330 G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating										
16 Remarks, elevation, source of data, etc. ADDITIONAL INFO BY DRILLER, ITEM NO. CORRECTED BY gp 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. W.E. Downerson 0641 REGISTERED BUSINESS NAME REGISTRATION NO. Address Quincy, Mich. 49082 Signed W.E. Downerson Date 4-25-75 AUTHORIZED REPRESENTATIVE										