

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

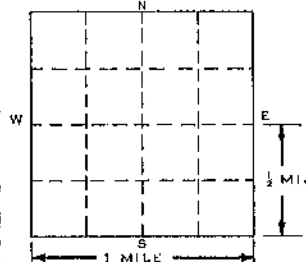
County <u>Kal.</u>	Township Name <u>Charles tone</u>	Fraction <u>1/4</u> <u>1/4</u> <u>1/4</u>	Section Number <u>6</u>	Town Number <u>2</u> N.S.	Range Number <u>9</u> E.W.
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Distance And Direction from Road Intersections
1/2 Mi. N. of H. J. Ave.
3716 N. 36th St Galesburg Mi.

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



3 OWNER OF WELL:

Sam Stone
Address 3716 N. 36th St
Galesburg Mi.

4 WELL DEPTH: (completed) Date of Completion

103 ft. 10-2-85

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 _____ ft.

Weight _____ lbs./ft.

Drive Shoe? Yes ☒ No ☐

8 SCREEN:

Type: Johnson Dia.: 1 1/4Slot/Gauze 1010 Length 3 FT.Set between 100 ft. and 103 ft.Fittings: K Rocker

9 STATIC WATER LEVEL

51 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 Grade13 Well Grouted? ☐ Yes ☐ No☐ Neat Cement ☐ Bentonite ☐

Depth: From _____ ft. to _____ ft.

14 Nearest Source of possible contamination

50+ feet N.E. Direction Septic TypeWell disinfected upon completion ☒ Yes ☐ No

15 PUMP:

☐ Not installedManufacturer's Name AerwaterModel Number DMJ HP 1 Volts _____Length of Drop Pipe 66 ft. capacity _____ G.P.M.Type: ☐ Submersible☒ Jet ☐ Reciprocating

2 FORMATION

THICKNESS
OF
STRATUMDEPTH TO
BOTTOM OF
STRATUMTOP Soil2Sand & Grav47Fine Sand & Red Clay56Fine Sand62Grav.64Red Clay & Grav65Blue Clay & Grav87Blue clay & Sand98Sand103

RECEIVED

Mich. Dept. of Public Health

DEC 9 1985

Michigan Department of Environmental and

Occupational Health - GWQS

16 Remarks, elevation, source of data, etc.

Replacement Well
using existing 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.

Newman Pump 0208Address 454 N. 33rd GalesburgSigned R. J. Zouren Date 10-10-85

AUTHORIZED REPRESENTATIVE

WATER WELL AND PUMP RECORD

PERMIT NUMBER

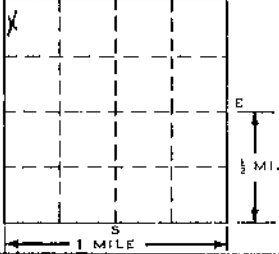
10695

1 LOCATION OF WELL		County		Township Name		Fraction		Section Number		Town Number		Range Number																									
Kalamazoo		Charles TON		10W 1/4 NW 1/4 SW 1/4		6		2 N 1/2		9 E		E																									
Distance And Direction From Road Intersection																																					
Street Address & City of Well Location																																					
Locate with "X" in Section Below																																					
Sketch Map																																					
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FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																																			
Black dirt	2	2																																			
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water sand + gravel	45	130																																			
3 OWNER OF WELL																																					
Address																																					
Randy Zandt																																					
4040 N. 36th St																																					
Galesburg																																					
Address Same As Well Location? ☒ Yes ☐ No																																					
4 WELL DEPTH: Date Completed																																					
130 FT. 4 8 93																																					
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																																					
Height: Above/Below																																					
Surface 7 ft.																																					
Weight lbs./ft.																																					
Drive Shoe ☐ Yes ☒ No																																					
8 SCREEN: ☐ Not Installed																																					
Type PVC Diameter 3"																																					
Slot 15 Length 6'																																					
Set between 124 ft. and 130 ft.																																					
FITTINGS: ☐ K Packer ☐ Lead Packer ☐ Bremer Check																																					
☐ Blank above screen ft. Other																																					
9 STATIC WATER LEVEL																																					
60 ft. below land surface ☐ Flow																																					
10 PUMPING LEVEL: below land surface																																					
AIR ft. after 1 hrs. pumping at 30 G.P.M.																																					
ft. after hrs. pumping at G.P.M.																																					
11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12" above grade																																					
☐ Basement offset ☐ Approved pit																																					
12 WELL GROUTED? ☐ No ☒ Yes From 0 to 124 ft.																																					
☐ Neat cement ☒ Bentonite ☒ Other Hole Plug																																					
No. of bags of cement 7 Additives																																					
13 Nearest source of possible contamination																																					
Type SEWAGE Distance 50+ ft. Direction N																																					
Well disinfected upon completion? ☒ Yes ☐ No																																					
Was old well plugged? ☒ Yes ☐ No																																					
14 PUMP: ☐ Not Installed ☐ Pump Installation Only																																					
Manufacturer's name Myers																																					
Model number HP 1/2 Volts 220																																					
Length of Drop Pipe 100 ft. capacity G.P.M.																																					
TYPE: ☒ Submersible ☐ Jet																																					
PRESSURE TANK																																					
Manufacturer's name Clayton Mark																																					
Model number 203 Capacity 10.1 Gallons																																					
15. Remarks, elevation, source of data, etc.																																					
Filled old 2" well 60ft deep with 1 1/2 Bags Hole Plug																																					
16. WATER WELL CONTRACTOR'S CERTIFICATION:																																					
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.																																					
Smith Well & Pump 08-1793																																					
REGISTERED BUSINESS NAME REGISTRATION NO.																																					
Address 2300 Hwy Rd 100 N 49017																																					
Signed M.J. Smith Date 4-12-93																																					
AUTHORIZED REPRESENTATIVE																																					

USE A 2ND SHEET IF NEEDED

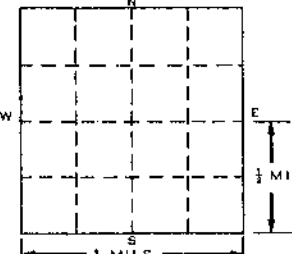
SEP 12 1979

WATER WELL RECORD
ACT 294 PA 1965MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL					
County KALAMAZOO	Township Name CHARLESTON	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 6	Town Number 2 N/S.	Range Number 9 S/W.
Distance And Direction from Road Intersections 0.1 SOUTH OF G. AVE ON 36th St.			3 OWNER OF WELL: BILL DEARY Address 4650 N. 36th ST GALESBURG		
Street address & City of Well Location 4650 N. 36th ST			4 WELL DEPTH: (completed) Date of Completion 131 ft. 7-31-79		
Locate with "X" in section below 			5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐		
Sketch Map: 			6 USE: ☐ Domestic ☐ Public Supply ☐ Industry ☒ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☐		
2 FORMATION			7 CASING: Threaded ☒ Welded ☐ Height: Above/Below Diam. _____ ft. Surface _____ ft. Weight _____ lbs./ft. Drive Shoe? Yes ☒ No ☐		
			8 SCREEN: Type: JOHNSON Dia.: 3" Slot/Gauze 10 Length 5' Set between 126 ft. and 131 ft. Fittings: K PAC 4 3x12 NIPPLE		
Black Dirt			9 STATIC WATER LEVEL 80 ft. below land surface		
Sand & Gravel mix			10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m.		
Sand & Gravel			_____ ft. after _____ hrs. pumping _____ g.p.m.		
Sand			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____		
Sand, Gravel, clay mix			12 WELL HEAD COMPLETION: ☐ In Approved Pit ☒ Pitless Adapter ☒ 12" Above Grade		
Sand & clay mix			13 Well Grouted? ☐ Yes ☒ No ☐ Neat Cement ☐ Bentonite ☐ _____ Depth: From _____ ft. to _____ ft.		
Clay			14 Nearest Source of possible contamination 75 feet E Direction SEWAGE Type Well disinfected upon completion ☒ Yes ☐ No		
Water bearing sand (no gravel)			15 PUMP: ☐ Not installed Manufacturer's Name MYERS Model Number _____ HP 1 Volts 220 Length of Drop Pipe 105 ft. capacity 14 G.P.M. Type: ☒ Submersible ☐ Jet ☐ Reciprocating		
Water bearing sand & gravel			16 Remarks, elevation, source of data, etc. *CORRECTED BY **ADDITION BY ELEVATION DEPTH TO ROCK		
USE A 2ND SHEET IF NEEDED			17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. B & H WELL DRILLING 08 0267 REGISTERED BUSINESS NAME REGISTRATION NO. 11196 S. WALL LK. RD Address DEPTON MI 49046 Signed Robert Hayward Date Aug 19 AUTHORIZED REPRESENTATIVE		

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL:																
County <i>Kalamazoo</i>	Township Name <i>Charleston</i>	Fraction <i>1/4 1/4 1/4</i>	Section Number <i>6</i>															
Distance And Direction From Road Intersection <i>4797 36th St.</i>		Town Number <i>2</i> Range Number <i>9</i>																
Street Address & City of Well Location <i>Ealesburgh</i>		Address <i>P.O. Box #1 Schoolcraft</i>																
Locate with "X" in Section Below 		Address Same As Well Location? ☐ Yes ☒ No																
2 FORMATION DESCRIPTION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>THICKNESS OF STRATUM</th> <th>DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><i>sand & gravel</i></td> <td><i>40</i></td> <td><i>40</i></td> </tr> <tr> <td><i>brown clay & gravel</i></td> <td><i>20</i></td> <td><i>60</i></td> </tr> <tr> <td><i>gray clay & gravel</i></td> <td><i>20</i></td> <td><i>80</i></td> </tr> <tr> <td><i>coarse sand</i></td> <td><i>6</i></td> <td><i>86</i></td> </tr> </tbody> </table>			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<i>sand & gravel</i>	<i>40</i>	<i>40</i>	<i>brown clay & gravel</i>	<i>20</i>	<i>60</i>	<i>gray clay & gravel</i>	<i>20</i>	<i>80</i>	<i>coarse sand</i>	<i>6</i>	<i>86</i>	4 WELL DEPTH: (completed) <i>86</i> ft.	
			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM														
		<i>sand & gravel</i>	<i>40</i>	<i>40</i>														
		<i>brown clay & gravel</i>	<i>20</i>	<i>60</i>														
		<i>gray clay & gravel</i>	<i>20</i>	<i>80</i>														
<i>coarse sand</i>	<i>6</i>	<i>86</i>																
5 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐		6 CASING: Diameter ☒ Steel ☐ Plastic ☐ Threaded ☐ Welded <i>4</i> in. to <i>82</i> ft. depth Height: Above/Below Surface <i>1</i> ft. Weight <i>1</i> lbs./ft. Drive Shoe ☐ Yes ☒ No																
7 SCREEN: Type <i>5 steel</i> Diameter <i>4"</i> Slot/Gauge <i>12</i> Length <i>4'</i> Set between <i>82</i> ft. and <i>86</i> ft. FITTINGS: ☐ K-Packer ☒ Lead Packer ☐ Bromer Check ☐ Blank above screen <i>1</i> ft. Other _____		8 STATIC WATER LEVEL: <i>40</i> ft. below land surface ☐ Flow																
9 PUMPING LEVEL: below land surface <i>40</i> ft. after <i>1</i> hrs. pumping at <i>50</i> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.		10 WELL HEAD COMPLETION ☒ Pitless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit																
11 WELL GROUTED? ☐ No ☒ Yes From <i>0</i> to <i>40</i> ft. ☐ Neat cement ☒ Bentonite ☐ Other _____ No. of bags of cement _____ Additives _____		12 NEAREST SOURCE OF POSSIBLE CONTAMINATION Type <i>SS</i> Distance <i>90</i> ft. Direction <i>W</i> Well disinfected upon completion? ☒ Yes ☐ No																
13 PUMP: ☐ Not Installed ☒ Pump Installation Only Manufacturer's name <i>Sta. Kate</i> Model number <i>14-B</i> HP <i>1/2</i> Volts <i>230</i> Length of Drop Pipe <i>63</i> ft. capacity <i>14</i> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK Manufacturer's name <i>Con. Clin</i> Model number _____ Capacity <i>10.7</i> Gallons		14 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>Earl Sanders & Son</i> <i>ONZ</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>72819 17140 Lawton</i> Signed <i>R. Shultz</i> Date <i>10/3/84</i> AUTHORIZED REPRESENTATIVE																

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

permit # 5000

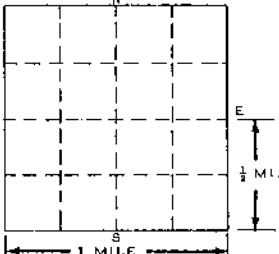


JUL 16 1979

WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL					
County <u>Washtenaw</u>	Township Name <u>Charleston</u>	Fraction <u>1/4</u> <u>1/4</u> <u>1/4</u>	Section Number <u>6</u>	Town Number <u>N/S.</u>	Range Number <u>E/W.</u>
Distance And Direction from Road Intersections <u>Approx 1/2 Mi. S. of G. Ave.</u> <u>on N. 36th St.</u>			3 OWNER OF WELL: <u>Wm. Costello</u> Address <u>#2909 Duke St.</u> <u>Washtenaw</u>		
Street address & City of Well Location <u>4210 N. 36th St</u>			4 WELL DEPTH: (completed) <u>126</u> ft. Date of Completion <u>6-26-79</u>		
Locate with "X" in section below 			5 ☒ Cable tool ☐ Rotary ☒ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐		
2 FORMATION			6 USE: ☒ Domestic ☐ Public Supply ☐ Industry ☐ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☐		
			7 CASING: Threaded ☐ Welded ☐ Height: Above/Below Diam. <u>4</u> in. to <u>128</u> ft. Depth <u>126</u> ft. Depth Weight <u> </u> lbs./ft. Drive Shoe? Yes ☒ No ☐		
Clay Grav. Sand Grav. Fine Sand Clay Silt Blue clay Sand			8 SCREEN: Type: <u>1 1/2 in. SS</u> Dia.: <u>4</u> ft. Slot/Gauze <u>1012</u> Length <u> </u> Set between <u>122</u> ft. and <u>126</u> ft. Fittings: <u>K Becker</u>		
			9 STATIC WATER LEVEL <u>56</u> 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 <u>65</u> feet <u>S</u> Direction <u>Septic</u> Type _____ Well disinfected upon completion ☒ Yes ☐ No		
			15 PUMP: ☐ Not installed Manufacturer's Name <u>Goulds</u> Model Number <u>13EM10 HP 1</u> Volts <u>230</u> Length of Drop Pipe <u>85</u> 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. <u>Newman Pump</u> 0208 REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>454 N. 33rd Galesburg</u> Signed <u>R. Newman</u> Date <u>6-28-79</u> AUTHORIZED REPRESENTATIVE		

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL			3 OWNER OF WELL:																	
County <i>Kalamazoo</i>	Township Name <i>Charleston</i>	Fraction <i>NW 1/4 NW 1/4 NW 1/4</i>	Section Number <i>6</i>	Town Number <i>1 NIS</i>	Range Number <i>9 E/W</i>															
Distance And Direction From Road Intersection <i>5165 North 36th St.</i>			Address <i>505 Eastman Kalamazoo</i>																	
Street Address & City of Well Location <i>Richland</i>			Address Same As Well Location? ☐ Yes ☒ No																	
Locate with "X" in Section Below 			Sketch Map: Date Completed MO. <i>9</i> DAY <i>19</i> YEAR <i>89</i>																	
2 FORMATION DESCRIPTION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">FORMATION DESCRIPTION</th> <th style="width: 10%;">THICKNESS OF STRATUM</th> <th style="width: 10%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><i>hard Brown clay + gravel</i></td> <td><i>12</i></td> <td><i>12</i></td> </tr> <tr> <td><i>dry sand + gravel</i></td> <td><i>48</i></td> <td><i>60</i></td> </tr> <tr> <td><i>hard Brown clay + sand</i></td> <td><i>10</i></td> <td><i>70</i></td> </tr> <tr> <td><i>coarse sand</i></td> <td><i>20</i></td> <td><i>90</i></td> </tr> </tbody> </table>			FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<i>hard Brown clay + gravel</i>	<i>12</i>	<i>12</i>	<i>dry sand + gravel</i>	<i>48</i>	<i>60</i>	<i>hard Brown clay + sand</i>	<i>10</i>	<i>70</i>	<i>coarse sand</i>	<i>20</i>	<i>90</i>	4 WELL DEPTH: <i>90</i> FT.		
			FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM															
			<i>hard Brown clay + gravel</i>	<i>12</i>	<i>12</i>															
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			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 <i>4</i> in. to <i>86</i> ft. depth Surface <i>1</i> ft. Weight <i>11</i> lbs./ft. Grouted Drill Hole Diameter in. to ft. depth Drive Shoe ☒ Yes ☐ No																	
			8 SCREEN: ☐ Not Installed Type <i>Steel</i> Diameter <i>4"</i> Slot/Gauge <i>10</i> Length <i>4'</i> Set between <i>86</i> ft. and <i>90</i> ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bremer Check ☒ Blank above screen ft. Other																	
			9 STATIC WATER LEVEL: <i>67</i> ft. below land surface ☐ Flow																	
			10 PUMPING LEVEL: below land surface <i>plunger</i> <i>67</i> ft. after <i>1</i> hrs. pumping at <i>50</i> 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 <i>0</i> to <i>25</i> ft. ☐ Neat cement ☒ Bentonite ☐ Other No. of bags of cement <i>1</i> Additives																	
			13 Nearest source of possible contamination <i>not installed</i> Type <i>septic</i> 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 <i>Sta. Hite</i> Model number <i>14-B</i> HP <i>1/2</i> Volts <i>230</i> Length of Drop Pipe <i>25</i> ft. capacity <i>14</i> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name <i>Con Air</i> Model number <i>CT42</i> Capacity Gallons																	
15. Remarks, elevation, source of data, etc. <i>Permit # 8170</i>			16. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Earl Sandhu & Son</i> <i>0112</i> REGISTERED BUSINESS NAME REGISTRATION NO. Address <i>72519 21-40 South</i> Signed <i>R. Shurtz</i> Date <i>9/21/89</i> AUTHORIZED REPRESENTATIVE																	
17. Rig Operator's Name: <i>Rick</i>																				

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

WATER WELL AND PUMP RECORD

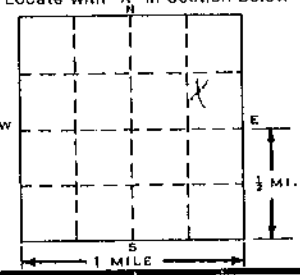
PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL:																			
County Kalamazoo	Township/Range North 36 East 9	Section Number 6	Range Number 9																		
Distance And Direction From Road Intersection		Address 4838 N 36th St																			
Street Address & City of Well Location		Address Same As Well Location? ☐ Yes ☐ No																			
Locate with "X" in Section Below		4 WELL DEPTH: 101 FT. Date Completed 9/24/87																			
		☒ New Well ☐ Replacement Well																			
		5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐																			
2 FORMATION DESCRIPTION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FORMATION DESCRIPTION</th> <th>THICKNESS OF STRATUM</th> <th>DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td>Clay-Sand-Gravel</td> <td>8</td> <td>8</td> </tr> <tr> <td>Sand-Gravel</td> <td>37</td> <td>45</td> </tr> <tr> <td>Hard Clay</td> <td>41</td> <td>86</td> </tr> <tr> <td>Fine white sand</td> <td>6</td> <td>92</td> </tr> <tr> <td>Water Sand</td> <td>9</td> <td>101</td> </tr> </tbody> </table>		FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Clay-Sand-Gravel	8	8	Sand-Gravel	37	45	Hard Clay	41	86	Fine white sand	6	92	Water Sand	9	101	6 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐	
		FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																	
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Water Sand	9	101																			
7 CASING: Diameter ☒ Steel ☐ Plastic ☐ Welded Height: Above/Below Surface 16.9 ft. Weight 10.9 lbs./ft. Drive Shoe ☒ Yes ☐ No		8 SCREEN: ☐ Not Installed Type S.S. Slotted Diameter 4 Slot/Gauge 1/8 Length 8 Set between 93 ft. and 101 ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bremer Check ☒ Blank above screen 2 ft. Other 1009																			
		9 STATIC WATER LEVEL: 60 ft. below land surface ☐ Flow																			
		10 PUMPING LEVEL: below land surface 85 ft. after 1 hrs. pumping at 50 G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.																			
		11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit																			
		12 WELL GROUTED? ☐ No ☐ Yes From _____ to _____ ft. ☐ Neat cement ☐ Bentonite ☐ Other _____ No. of bags of cement _____ Additives _____																			
		13 Nearest source of possible contamination Type ST. DW. Distance 25+ 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 Aermore Model number SD12-SC HP 1/2 Volts 220 Length of Drop Pipe 80 ft. capacity 14 G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name Well-4-Tool Model number WX200 Capacity 5.6 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. WALTERS Plumbing Co. 0210 REGISTERED BUSINESS NAME REGISTRATION NO. Address Battle Creek MI Signed Mark Walters Date 2/16/88 AUTHORIZED REPRESENTATIVE																					
17. Rig Operator's Name: _____																					

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL:																									
County <u>Kalamazoo</u>	Township Name <u>Charleston</u>	Fraction <u>NW 1/4 SE 1/4 NE 1/4</u>	Section Number <u>6</u>																								
Distance And Direction From Road Intersection <u>4144 37th Street</u>		Town Number <u>2 MS</u>																									
Street Address & City of Well Location Locate with "X" in Section Below		Range Number <u>4 EW</u>																									
		Address <u>Jack Smith</u> <u>6722 Woodlea</u> <u>Kal. MI</u> Address Same As Well Location? ☐ Yes ☒ No																									
2 FORMATION DESCRIPTION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">THICKNESS OF STRATUM</th> <th style="text-align: center;">DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><u>Sand & gravel</u></td> <td style="text-align: center;"><u>15</u></td> <td style="text-align: center;"><u>15</u></td> </tr> <tr> <td><u>Clay (Brown)</u></td> <td style="text-align: center;"><u>3</u></td> <td style="text-align: center;"><u>18</u></td> </tr> <tr> <td><u>Sand</u></td> <td style="text-align: center;"><u>28</u></td> <td style="text-align: center;"><u>46</u></td> </tr> <tr> <td><u>Sand & gravel</u></td> <td style="text-align: center;"><u>12</u></td> <td style="text-align: center;"><u>58</u></td> </tr> <tr> <td><u>Blue clay</u></td> <td style="text-align: center;"><u>7</u></td> <td style="text-align: center;"><u>65</u></td> </tr> <tr> <td><u>Fine sand</u></td> <td style="text-align: center;"><u>8</u></td> <td style="text-align: center;"><u>73</u></td> </tr> <tr> <td><u>Coarse sand</u></td> <td style="text-align: center;"><u>7</u></td> <td style="text-align: center;"><u>80</u></td> </tr> </tbody> </table>			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<u>Sand & gravel</u>	<u>15</u>	<u>15</u>	<u>Clay (Brown)</u>	<u>3</u>	<u>18</u>	<u>Sand</u>	<u>28</u>	<u>46</u>	<u>Sand & gravel</u>	<u>12</u>	<u>58</u>	<u>Blue clay</u>	<u>7</u>	<u>65</u>	<u>Fine sand</u>	<u>8</u>	<u>73</u>	<u>Coarse sand</u>	<u>7</u>	<u>80</u>	4 WELL DEPTH: (completed) <u>80</u> ft. Date of Completion <u>9-86</u> 5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☒ Auger ☐ Jetted ☐	
			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM																							
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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 <u>4</u> in. to <u>25</u> ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe ☒ Yes ☐ No																									
15. Remarks, elevation, source of data, etc. RECEIVED MICH. DEPT. OF PUB. HEALTH JAN 27 1987 Bureau of Environmental and Occupational Health (EWH)		8 SCREEN: ☐ Not Installed Type <u>Phonon</u> Diameter <u>3"</u> Slot/Groove <u>10</u> Length <u>5'</u> Set between <u>75</u> ft. and <u>80</u> ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bremer Check ☐ Blank above screen _____ ft. Other _____																									
		9 STATIC WATER LEVEL: <u>48</u> ft. below land surface ☐ Flow 10 PUMPING LEVEL: below land surface <u>75</u> ft. after <u>1</u> hrs. pumping at <u>30</u> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.																									
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>Smith Well Pumping</u> 08-1793 REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>2301 Hickory Rd</u> <u>Barber Creek</u> Signed <u>MJ Smith</u> Date <u>12-1-86</u> AUTHORIZED REPRESENTATIVE		11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit																									
		12 WELL GROUTED? ☐ No ☒ Yes From <u>6</u> to <u>25</u> ft. ☐ Neat cement ☐ Bentonite ☒ Other <u>Benzal Curing</u> No. of bags of cement _____ Additives _____																									
13 Nearest source of possible contamination Type <u>Sewage</u> Distance <u>50+</u> ft. Direction <u>E</u> Well disinfected upon completion? ☒ Yes ☐ No		14 PUMP: ☐ Not Installed ☐ Pump Installation Only Manufacturer's name <u>Standard</u> Model number _____ HP <u>1</u> Volts <u>220</u> Length of Drop Pipe <u>68</u> ft. capacity <u>18</u> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name <u>WELL XTROL</u> Model number <u>250</u> Capacity <u>15.5</u> Gallons																									

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

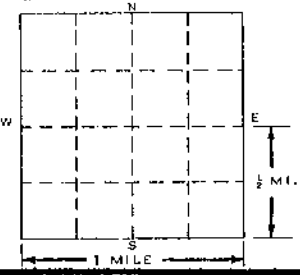
WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		Fraction		Section Number		Town Number		Range Number	
County <u>KAL</u>		Township Name <u>Chitleston</u>		<u>SW 1/4 Sec 14 Twp 14 N</u>		<u>6</u>		<u>2 S 9 W</u>	
Distance And Direction From Road Intersection									
Street Address & City of Well Location					3 OWNER OF WELL: <u>DAN BANKS</u>				
Locate with "X" in Section Below					Address <u>5775 S. 30th St</u>				
					Address Same As Well Location? ☒ Yes ☐ No				
					4 WELL DEPTH: (completed) <u>77</u> ft. Date of Completion <u>12-30-86</u>				
Sketch Map 1 MILE 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				
7 CASING: ☒ Steel ☐ Threaded ☐ Height: Above/Below ☐ Plastic ☐ Welded Surface <u>11</u> ft. Weight <u>11</u> lbs./ft. Drive Shoe ☒ Yes ☐ No					8 SCREEN: ☐ Not Installed				
					Type <u>PLASTIC</u> Diameter <u>4</u>				
9 STATIC WATER LEVEL: <u>30</u> ft. below land surface ☐ Flow 10 PUMPING LEVEL: below land surface <u>30</u> ft. after <u>1</u> hrs. pumping at <u>30</u> G.P.M. <u> </u> ft. after <u> </u> hrs. pumping at <u> </u> G.P.M.					Type <u>12</u> Slot/Gauze <u>5</u> Length <u>5</u>				
					Set between <u>72</u> ft. and <u>77</u> ft.				
11 WELL HEAD COMPLETION: ☒ Fitters adaptor ☐ 12" above grade ☐ Basement offset ☐ Approved pit					FITTINGS: ☐ K-Packer ☒ Lead Packer ☐ Bremer Check				
					☒ Blank above screen <u>1</u> ft. Other <u> </u>				
12 WELL GROUTED? ☐ No ☒ Yes From <u> </u> to <u> </u> ft. ☐ Neat cement ☒ Bentonite ☐ Other <u> </u> No. of bags of cement <u> </u> Additives <u> </u>					13 Nearest source of possible contamination				
					Type <u> </u> Distance <u> </u> ft. Direction <u> </u>				
14 PUMP: ☐ Not Installed ☐ Pump Installation Only Manufacturer's name <u>BURKS</u> Model number <u>55N8B</u> HP <u>1/2</u> Volts <u>220</u> Length of Drop Pipe <u>63</u> ft. capacity <u>10</u> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: <u>X</u> Tvc 1 Manufacturer's name <u> </u> Model number <u>203</u> Capacity <u>9</u> Gallons					Well disinfected upon completion? ☒ Yes ☐ No				
					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. <u>Walt Adams</u> <u>436</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>1341</u> Signed <u>Walt Adams</u> Date <u>12-30-86</u> AUTHORIZED REPRESENTATIVE					Authority: <u> </u>				
					Act 368 PA 1978				

2 MAY 30 1975

WATER WELL RECORD
ACT 294 PA 1965MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		County Kal		Township Name Charleston		Fraction N 1/4 Sec 6		Section Number 6		Town Number 2 N.S.		Range Number 9 E.W.							
Distance And Direction from Road Intersections 7/10th N N of H Ave 1/10th E E of N 36th St.																			
Street address & City of Well Location Locate with "X" in section below																			
 Sketch Map:																			
2 FORMATION				THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		3 OWNER OF WELL: Charles Shaw Address Rt #1, Galesburg, Mich.											
								4 WELL DEPTH: (completed) Date of Completion 118 ft. 4 / 5 / 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. _____ ft. Depth _____ ft. Weight 1200 lbs./ft. Drive Shoe? Yes ☒ No ☐											
								8 SCREEN: Type: wire wound Dia.: 4 Slot/Gauze 12 Length 5 Set between _____ ft. and _____ ft. Fittings: lead packer 1 thread in bottom											
								9 STATIC WATER LEVEL 80 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 ? _____ feet _____ Direction _____ Type _____ Well disinfected upon completion ☒ Yes ☐ No											
								15 PUMP: ☐ Not installed Manufacturer's Name Jacuzzi Mfg. Co. Model Number 1S4C HP 1 Volts 220 Length of Drop Pipe 94 ft. capacity 20 G.P.M. Type: ☒ Submersible ☐ Jet ☐ Reciprocating											
								16 Remarks, elevation, source of data, etc. ADDED INFO BY DRILLER, ITEM NO. _____ *CORRECTED BY _____ **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. REGISTERED BUSINESS NAME _____ REGISTRATION NO. 117 Address 2928 Romeuse Signed _____ Date 4/5/73 AUTHORIZED REPRESENTATIVE			

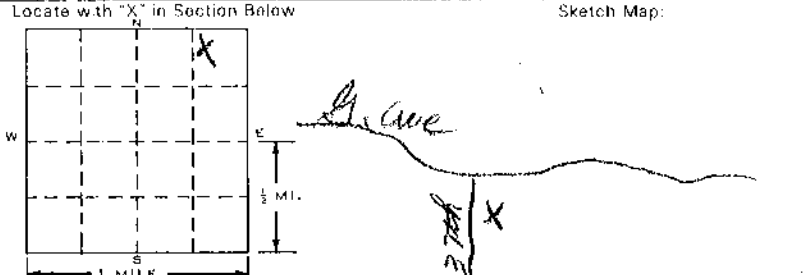
WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		County <u>Kalamazoo</u>		Township Name <u>Charleston</u>		Fraction <u>1/4</u>		Section Number <u>6</u>		Town Number <u>T2</u>		Range Number <u>R9</u>													
Distance And Direction From Road Intersection		<u>1/2 mile north on 36th St from HJ AVE then 50 ft east</u>																							
Street Address & City of Well Location		<u>3768 N. 36th St. Galesburg MI.</u>																							
Locate with "X" in Section Below		Sketch Map																							
		2 FORMATION DESCRIPTION <table border="1"> <thead> <tr> <th>FORMATION DESCRIPTION</th> <th>THICKNESS OF STRATUM</th> <th>DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td>Gravel</td> <td>33</td> <td>33</td> </tr> <tr> <td>Red Clay</td> <td>3</td> <td>36</td> </tr> <tr> <td>Gravel</td> <td>24</td> <td>60</td> </tr> </tbody> </table>												FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	Gravel	33	33	Red Clay	3	36	Gravel	24	60
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Gravel	33	33																							
Red Clay	3	36																							
Gravel	24	60																							
3 OWNER OF WELL:		<u>Jeff Maxson</u> Address <u>3768 N. 36th St. Galesburg MI.</u> Address Same As Well Location? ☒ Yes ☐ No																							
4 WELL DEPTH:		Date Completed <u>2/13/92</u> Depth <u>60</u> ft. ☒ New Well ☐ Replacement Well																							
5		☒ Cable tool ☐ Rotary ☒ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐																							
6 USE:		☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐																							
7 CASING:		Diameter <u>4</u> in. to <u>54</u> ft. depth ☒ Steel ☒ Threaded ☐ Welded ☐ Plastic ☐ Height <u>1</u> ft. Grouted Drill Hole Diameter <u>1</u> lbs./ft. Drive Shoe ☒ Yes ☐ No																							
8 SCREEN		☐ Not Installed Type <u>Plastic</u> Diameter <u>4" 00</u> Not/Case <u>10</u> Length <u>4'</u> Set between <u>54</u> ft. and <u>60</u> ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Blower Check ☒ Blank above screen <u>1</u> ft. Other <u>3' Plug</u>																							
9 STATIC WATER LEVEL:		<u>33</u> ft. below land surface ☐ Flow																							
10 PUMPING LEVEL: below land surface		<u>54</u> ft. after <u>1</u> hrs. pumping at <u>60</u> G.P.M. <u>60</u> ft. after _____ hrs. pumping at _____ G.P.M.																							
11 WELL HEAD COMPLETION:		☒ Pitless adaptor ☐ 12" above grade ☐ Basement offset ☐ Approved pit																							
12 WELL GROUTED?		☒ No ☐ Yes From _____ to _____ ft. ☐ Neat cement ☐ Bentonite ☐ Other _____ No. of bags of cement _____ Additives _____																							
13 Nearest source of possible contamination		Type <u>Septic</u> Distance <u>50+</u> ft. Direction <u>E</u> Well disinfected upon completion? ☒ Yes ☐ No Was old well plugged? ☒ Yes ☐ No																							
14 PUMP:		☐ Not Installed ☐ Pump Installation Only Manufacturer's name <u>F + W</u> 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.		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>Lumbar Pump Sales & Service 0444</u> REGISTERED BUSINESS NAME REGISTRATION NO. <u>MI 49004</u> Address <u>97 Warden St. Kal. MI</u> Signed <u>Lyle V. Lumbar</u> Date <u>2-13-92</u> AUTHORIZED REPRESENTATIVE																							
17. Rig Operator's Name:		<u>Lyle V. Lumbar</u>																							

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL	
County <u>Kalamazoo</u>	Township Name <u>Charleston</u>	Fraction <u>NW 1/4 NE 1/4 NE 1/4</u>	Section Number <u>6</u>
Distance And Direction From Road Intersection <u>37th st</u>		Town Number <u>2 N 15</u>	Range Number <u>9 E 10</u>
Street Address & City of Well Location Locate with "X" in Section Below		Address <u>Jack Smith Builders</u> <u>6782 Woodlew</u> <u>Kal Ma 49004</u>	
Sketch Map: 		Address Same As Well Location? ☐ Yes ☒ No	
		4 WELL DEPTH: Date Completed MO. DAY YEAR <u>8 14 91</u> <u>67</u> ft. ☒ New Well ☐ Replacement Well	
		5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐	
		6 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐	
		7 CASING: Diameter ☐ Steel ☒ Plastic ☒ Threaded ☒ Welded <u>5</u> in. to <u>61</u> ft. depth Height: Above/Below Surface <u>1</u> ft. Weight _____ lbs./ft. Drive Shoe ☐ Yes ☒ No	
2 FORMATION DESCRIPTION		8 SCREEN: ☐ Not Installed Type <u>PVC</u> Diameter <u>3"</u> Slot/Gauge <u>15</u> Length <u>6'</u> Set between <u>61</u> ft. and <u>67</u> ft. FITTINGS: ☐ K-Packer ☐ Lead Packer ☐ Bromer Check ☐ Blank above screen _____ ft. Other _____	
		9 STATIC WATER LEVEL: <u>24</u> ft. below land surface ☐ Flow	
		10 PUMPING LEVEL: below land surface <u>AIR</u> ft. after <u>1</u> hrs. pumping at <u>30</u> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.	
		11 WELL HEAD COMPLETION: ☒ Wellless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit	
		12 WELL GROUTED? ☐ No ☒ Yes From <u>0</u> to <u>61</u> ft. ☐ Neat cement ☒ Bentonite ☒ Other <u>Hole Plug</u> No. of bags of cement <u>6</u> Additives _____	
		13 Nearest source of possible contamination Type <u>sewerage</u> Distance <u>50+</u> ft. Direction <u>N</u> Well disinfected upon completion? ☒ Yes ☐ No Was old well plugged? ☐ Yes ☐ No	
		14 PUMP ☐ Not installed ☐ Pump Installation Only Manufacturer's name <u>Myers</u> Model number _____ H.P. <u>1/2</u> Volts <u>220</u> Length of Drop Pipe <u>40</u> ft. capacity <u>10</u> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name <u>Wellrite</u> Model number <u>203</u> Capacity <u>25</u> Gallons	
		15. Remarks. elevation, source of data, etc.	
17. Rig Operator's Name: <u>MJ Smith</u>		16. 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>Smith Well & Pump</u> REGISTERED BUSINESS NAME <u>2300 Fair Rd</u> REGISTRATION NO. <u>08-1793</u> <u>MJ Smith</u> Signed <u>BC ML</u> Date <u>10-3-91</u> AUTHORIZED REPRESENTATIVE	

9513

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL:													
County <u>Kalamazoo</u>	Township Name <u>Charleston</u>	Fraction <u>110 1/4 NW 1/4 11 1/4 N 1/4 E</u>	Section Number <u>6</u>												
Distance And Direction From Road Intersection <u>5108 North 31th St.</u>		Town Number <u>2 N/S</u>	Range Number <u>9 E/W</u>												
Street Address & City of Well Location <u>Cakeburg</u>		Address <u>22258 Bluebird Ave. Mattawan</u>													
Locate with "X" in Section Below		Address Same As Well Location? ☐ Yes ☒ No													
		4 WELL DEPTH: <u>127</u> FT. Date Completed: <u>9</u> MO. <u>6</u> DAY <u>92</u> YEAR ☒ New Well ☐ Replacement Well													
2 FORMATION DESCRIPTION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>THICKNESS OF STRATUM</th> <th>DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><u>Brown clay, sand & gravel</u></td> <td><u>71</u></td> <td><u>71</u></td> </tr> <tr> <td><u>Brown sand & gravel (wt)</u></td> <td><u>60</u></td> <td><u>121</u></td> </tr> <tr> <td><u>coarse sand & gravel</u></td> <td><u>6</u></td> <td><u>127</u></td> </tr> </tbody> </table>			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<u>Brown clay, sand & gravel</u>	<u>71</u>	<u>71</u>	<u>Brown sand & gravel (wt)</u>	<u>60</u>	<u>121</u>	<u>coarse sand & gravel</u>	<u>6</u>	<u>127</u>	5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐	
			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM											
		<u>Brown clay, sand & gravel</u>	<u>71</u>	<u>71</u>											
<u>Brown sand & gravel (wt)</u>	<u>60</u>	<u>121</u>													
<u>coarse sand & gravel</u>	<u>6</u>	<u>127</u>													
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 <u>4</u> in. to <u>121</u> ft. depth Grouted Drill Hole Diameter _____ in. to _____ ft. depth Drive Shoe ☒ Yes ☐ No		Height: Above/Below Surface <u>1</u> ft. Weight <u>11</u> lbs./ft.													
8 SCREEN: ☐ Not Installed Type <u>Slot</u> Diameter <u>4"</u> Slot/Gauze <u>15</u> Length <u>6'</u> Set between <u>121</u> ft. and <u>127</u> ft. FITTINGS: ☒ R-Packer ☐ Lead Packer ☐ Bremer Check ☒ Blank above screen <u>1</u> ft. Other _____		9 STATIC WATER LEVEL: <u>71</u> ft. below land surface ☐ Flow													
10 PUMPING LEVEL: below land surface <u>phenger</u> <u>71</u> ft. after <u>1</u> hrs. pumping at <u>22</u> 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 <u>6</u> to <u>25</u> ft. ☐ Neat cement ☒ Bentonite ☐ Other _____ No. of bags of cement <u>2</u> Additives _____		13 Nearest source of possible contamination Type <u>Septic</u> Distance <u>100</u> ft. Direction <u>South</u> Well disinfected upon completion? ☒ Yes ☐ No Was old well plugged? ☐ Yes ☐ No													
14 PUMP ☐ Not Installed ☐ Pump Installation Only Manufacturer's name <u>Sta Rite</u> Model number <u>2044CAT</u> HP <u>1</u> Volts <u>230</u> Length of Drop Pipe <u>54</u> ft. capacity <u>20</u> G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name <u>Can Air</u> Model number <u>CT&2</u> Capacity _____ Gallons		15 REMARKS, ELEVATION, SOURCE OF DATA, ETC. <u>Permit # 10273</u>													
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>Earl Sanchez & Son</u> REGISTERED BUSINESS NAME REGISTRATION NO. _____ Address <u>77814 111-40</u> Signed <u>K. Sanchez</u> AUTHORIZED REPRESENTATIVE Date <u>9/1/92</u>		17 RIG OPERATOR'S NAME: <u>Rick</u>													

AUG 26 1975

WATER WELL RECORD

ACT 294

PA 1965

MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL		TOWNSHIP NAME		Fraction	Section Number	Town Number	Range Number
County <u>Kalamazoo</u>		<u>Charleston</u>		<u>NE 1/4 SW 1/4</u>	<u>6</u>	<u>2 N/S.</u>	<u>9 E/W.</u>
Distance And Direction from Road Intersections <u>4 1/10 Mile South of East G. Ave. on North 37th Street</u> <u>125' East of 37th Street</u>							
Street address & City of Well Location <u>4684 N. 37th Augusta</u>							
Locate with "X" in section below							
2 FORMATION		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	3 OWNER OF WELL: <u>William Weese</u>			
<u>Sand</u>		<u>10</u>	<u>10</u>	Address <u>4684 N. 37th St.</u>			
<u>Brown Clay-sand</u>		<u>12</u>	<u>22</u>	Date of Completion <u>6-18-75</u>			
<u>Brown Clay-stoney</u>		<u>3</u>	<u>25</u>	4 WELL DEPTH: (completed) <u>41</u> ft.			
<u>Brown Clay</u>		<u>11</u>	<u>36</u>	5 ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug			
<u>Stone</u>		<u>2</u>	<u>38</u>	☐ Hollow rod ☒ Jetted ☐ Borod			
<u>Sand-stoney</u>		<u>3</u>	<u>41</u>	6 USE: ☒ Domestic ☐ Public Supply ☐ Industry			
				☐ Irrigation ☐ Air Conditioning ☐ Commercial			
				☐ Test Well			
				7 CASING: Threaded ☒ Welded ☐ Height: Above/Below Surface <u>1</u> ft.			
				Diam. <u>2</u> in. to <u>38</u> ft. Depth <u>2</u> in. to <u>38</u> ft. Depth Weight <u>2.75</u> lbs./ft.			
				Drive Shoe? Yes ☒ No ☐			
				8 SCREEN: Type: <u>Strainer</u> Dia.: <u>1 1/4"</u>			
				Slot/Groove <u>10</u> Length <u>3 1/2'</u>			
				Set between <u>37 1/2</u> ft. and <u>41</u> ft.			
				Fittings: <u>1-1 1/4" Coupling</u>			
				9 STATIC WATER LEVEL <u>15</u> ft. below land surface			
				10 PUMPING LEVEL below land surface			
				<u>18</u> ft. after <u>1</u> hrs. pumping <u>13</u> g.p.m.			
				<u>18</u> ft. after <u>1</u> hrs. pumping <u>13</u> g.p.m.			
				11 WATER QUALITY in Parts Per Million:			
				Iron (Fe) _____ Chlorides (Cl) _____			
				<u>Not Known</u>			
				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			
				<u>Disposal System not yet installed</u> Type _____			
				Well disinfectant 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.		17 WATER WELL CONTRACTOR'S CERTIFICATION:					
ADDED INFO BY DRILLER, ITEM NO.		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.					
*CORRECTED BY <u>B</u>		<u>Standish Well Drilling</u> <u>1153</u>					
**ADDITION BY		REGISTERED BUSINESS NAME REGISTRATION NO.					
ELEVATION		Address <u>3208 Jennings Kalamazoo</u>					
DEPTH TO ROCK		Signed <u>Bruce Standish</u> Date <u>7-14-75</u>					
		AUTHORIZED REPRESENTATIVE					

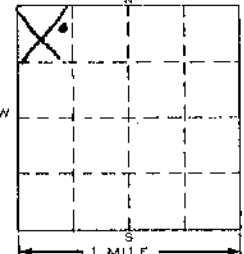
WATER WELL RECORD

ACT 294 PA 1965

MICHIGAN DEPARTMENT

OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Kalamazoo	Township Name Charleston	Fraction SW 1/4 NW 1/4 NW 1/4	Section Number 6	Town Number T25 N/S.	Range Number R9W E/W.
Distance And Direction from Road Intersections 2 1/2 mile S. OF G AVE, E.			3 OWNER OF WELL: Deary's Landscape Service		
Street Address & City of Well Location 4650 NORTH 36th ST. KALAMAZOO,			Address 4650 North 36th Street		
Localities with "X" in section below			4 WELL DEPTH: (completed) 125 ft. Date of Completion Decemb 22, 1969		
			5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jotted ☐ Bored ☐		
			6 USE: ☒ Domestic ☐ Public Supply ☐ Industry ☒ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☐		
Sketch Map:			7 CASING: Threaded ☒ Welded ☐ Diam. 4 in. to _____ ft. Depth _____ in. to _____ ft. Depth Height: Above/Below Surface 8 ft. Weight _____ lbs./ft. Drive Shoe? Yes ☒ No ☐		

2 FORMATION

FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	8 SCREEN:
SAND GRAVEL	18	18	Type: Johnson Dia.: 3"
GRAVEL	18	18	Slot/Gauze: 25/10 Length 4 feet
GRAVEL SOME SAND	18	18	Set between _____ ft. and _____ ft.
SAND	18	18	Fittings: Lead packer
SAND SOME GRAVEL	18	18	9 STATIC WATER LEVEL 72 ft. below land surface
SAND CLAY MIX	18	18	10 PUMPING LEVEL below land surface 93 ft. after 4 hrs. pumping 60 g.p.m.
GRAVEL SAND	9	9	_____ ft. after _____ hrs. pumping _____ g.p.m.
WATER SAND	8	8	11 WATER QUALITY in Parts Per Million: Iron (Fe) ? Chlorides (Cl) _____ Hardness _____ Other _____
			12 WELL HEAD COMPLETION: ☐ In Approved Pit ☒ Tank pitless unit ☐ Pitless Adapter ☐ 12" Above Grade
			13 Well Grouted? ☐ Yes ☒ No ☐ Neat Cement ☐ Bentonite ☐ _____ Depth: From _____ ft. to _____ ft.
			14 Nearest Source of possible contamination 25 ft or more feet West Direction Septic Tank Type Well disinfected upon completion ☒ Yes ☐ No
			15 PUMP: ☐ Not installed Manufacturer's Name Rapidayton Model Number _____ HP 3 Volts Length of Drop Pipe 93 ft. capacity 42 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: **6**

**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.

B & H Well Drilling **0267**
REGISTERED BUSINESS NAME REGISTRATION NO.Address **623 Spafford Dr. Kal. Mich.**Signed **Robert Raymond** Date **May 26, 70**
AUTHORIZED REPRESENTATIVE

D670 2/89

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

WATER WELL AND PUMP RECORD

PERMIT NUMBER

950445

1 LOCATION OF WELL		TOWNSHIP NAME		Fraction	Section Number	Town Number	Range Number
County Kalamazoo		Charleston		$\frac{1}{4}$	$\frac{1}{4}$	6	2 N 9 E
Distance And Direction From Road Intersection 1/2 mile South of G Ave. East side of 36th St. 3716 N. 36th Street							
Street Address & City of Well Location Halesburg							
Locate with "X" in Section Below				Sketch Map			
2 FORMATION DESCRIPTION		THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM		3 OWNER OF WELL: Don Kramer		
sand & gravel		45	45		Address 3716 N. 36th Street		
Brown Clay		20	65		Address Same As Well Location ☒ Yes ☐ No		
sand & gravel		7	72		4 WELL DEPTH: 116 FT. Date Completed 8-7-95 ☐ New Well ☒ Replacement Well		
Gray Clay		6	78		5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug		
sand & gravel		8	86		☐ Hollow rod ☐ Auger ☐ Jetted ☐		
Gray Clay		12	98		6 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public		
sand & gravel		18	116		☐ Irrigation ☐ Type IIa Public ☐ Heat pump		
Water					☐ 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 SS Diameter 3		
					Slot/Gauge 15 Length 6		
					Set between 116 ft. and 110 ft.		
					FITTINGS: ☐ K-Packer ☐ Lead Packer ☐ Bremer Check		
					☐ Blank above screen _____ ft. Other _____		
					9 STATIC WATER LEVEL: 60 ft. below land surface ☐ Flow		
					10 PUMPING LEVEL: below land surface		
					110 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 _____ to _____ ft.		
					☐ Neat cement ☐ Bentonite ☐ Other		
					No. of bags of cement _____ Additives 120 job grout		
					13 Nearest source of possible contamination		
					Type Septic Distance 100 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 Red Jackit		
					Model number 50SEW1-9BC-HP Volts 240		
					Length of Drop Pipe 85 ft. capacity 10 G.P.M.		
					TYPE: ☒ Submersible ☐ Jet		
					PRESSURE TANK: Existing		
					Manufacturer's name _____ Capacity _____ Gallons		
					Model number _____		
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.					
		C.S. & S. Well Drilling 0209					
		REGISTERED BUSINESS NAME REGISTRATION NO.					
		Address P.O. Box 25 Richland, MI.					
		Signed Charles Short Date 08-07-95					
		AUTHORIZED REPRESENTATIVE					
17. Rig Operator's Name:		Authority: Completion: Act 388 PA 1978					
Mike Smith Jr.		Penalty: Required Conviction of a violation of any provision is a misdemeanor.					

			9	7	0	7	5	8
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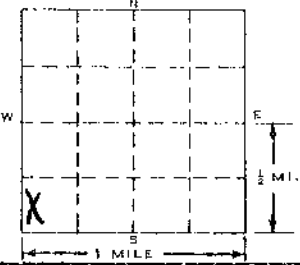
Authority: Act 368 PA 1978
Completion: Required
Penalty: Conviction of a violation of any provision is a misdemeanor.

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		Township Name		Fraction	Section Number	Town Number	Range Number
County <u>KAL</u>		<u>CHARLESTON</u>		<u>SW 1/4</u>	<u>6</u>	<u>2</u> S	<u>9</u> W
Distance And Direction From Road Intersection		3 OWNER OF WELL: <u>M. SHANLEY</u>					
Street Address & City of Well Location		Address <u>3340 N. 36TH ST</u>					
Locate with "X" in Section Below		Address Same As Well Location? ☐ Yes ☐ No					
Sketch Map:		4 WELL DEPTH: <u>86</u> FT. Date Completed <u>11/5/87</u>					
		☐ New Well ☐ Replacement Well					
		5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug					
		☐ Hollow rod ☐ Auger ☐ Jetted ☐					
		6 USE: ☒ Domestic ☐ Type I Public ☐ Type II Public					
		☐ Irrigation ☐ Type IIA Public ☐ Heat pump					
		☐ Test Well ☐ Type IIB Public ☐					
		7 CASING: Diameter ☒ Steel ☒ Threaded Height Above Ground <u>1</u> ft.					
		☐ Plastic ☐ Welded Surface <u>1</u> ft.					
		<u>4</u> in. to <u>81</u> ft. depth Weight <u>11</u> lbs./ft.					
		Grouted Drill Hole Diameter <u>4</u> in. to <u>81</u> ft. depth					
		Drive Shoe ☒ Yes ☐ No					
2 FORMATION DESCRIPTION		THICKNESS OF STRATUM		8 SCREEN ☐ Not Installed			
<u>0-65. SAND</u>		<u>65</u>		Type <u>Plastic</u> Diameter <u>4"</u>			
<u>65-86. WATER SAND</u>		<u>21</u>		Slot/Gauze <u>1/2"</u> Length <u>5'</u>			
				Set between <u>81</u> ft and <u>86</u> ft.			
				FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bronor Check			
				☒ Blank above screen <u>1</u> ft Other _____			
				9 STATIC WATER LEVEL: <u>65</u> ft. below land surface ☐ Flow			
				10 PUMPING LEVEL: below land surface			
				_____ ft. after _____ hrs. pumping at <u>SD</u> 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 <u>SEWER</u> Distance <u>50'</u> ft. Direction <u>5</u>			
				Well disinfected upon completion? ☒ Yes ☐ No			
				Was old well plugged? ☒ Yes ☐ No			
				14 PUMP: ☐ Not Installed ☐ Pump Installation Only			
				Manufacturer's name <u>BLURKS</u>			
				Model number <u>SSNBB</u> HP <u>3</u> Volts <u>220</u>			
				Length of Drop Pipe <u>70</u> ft. capacity <u>10</u> G.P.M.			
				TYPE: ☒ Submersible ☐ Jet			
				PRESSURE TANK:			
				Manufacturer's name <u>X TRC</u>			
				Model number <u>ROR</u> Capacity <u>5</u> 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.					
		<u>WALT ADAMS</u> <u>436</u>					
		REGISTERED BUSINESS NAME REGISTRATION NO.					
		Address <u>KAL</u>					
		Signed <u>Walt Adams</u> Date <u>11/5/87</u>					
		AUTHORIZED REPRESENTATIVE					

RECEIVED
Mich. Dept. of Public Health

NOV 23 1987

Bureau of Environmental and
Occupational Health - GWOS

USE A 2ND SHEET IF NEEDED

17. Reg Operator's Name:

Jim Doonhag

D87d 12/85

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 KAL.	Township Name CHARLESTON	Section Number 6	Town Number 2 NIS Range Number 9 NW
Distance And Direction From Road Intersection		Address 3340 No. 36th	
Street Address & City of Well Location		Address Same As Well Location? ☒ Yes ☐ No	
Locate with "X" in Section Below		4 WELL DEPTH: 75 FT. Date Completed 11-5-87 ☐ New Well ☐ Replacement Well	
Sketch Map: 		5 ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted	
		6 USE: ☐ Domestic ☐ Type I Public ☐ Type II Public ☐ Irrigation ☐ Type IIIa Public ☐ Heat pump ☐ Test Well ☐ Type IIIb Public	
2 FORMATION DESCRIPTION well G-ROUTED WITH BENTONITE		7 CASING: ☐ Steel ☐ Threaded ☐ Plastic ☐ Welded Height: Above/Below Surface _____ ft. Weight _____ lbs./ft.	
		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 adaptor ☐ 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 _____ 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.		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. WALT ADAMS 436	
17. Rig Operator's Name:		REGISTERED BUSINESS NAME KAL. REGISTRATION NO. _____ Address _____ Signed <i>Walt Adams</i> Date 11-5-87 AUTHORIZED REPRESENTATIVE	

D67d 12/85

GEOLOGICAL SURVEY COPY

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

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		3 OWNER OF WELL:																
County <u>Kalamazoo</u>	Township Name <u>Charleston</u>	Fraction <u>SE 1/4 NE 1/4 SE 1/4</u>	Section Number <u>6</u>															
Distance And Direction From Road Intersection <u>37th St. Parking Area, abandoned Fish Hatchery</u>		Town Number <u>2 NIS</u>	Range Number <u>9 NW</u>															
Street Address & City of Well Location Locate with "X" in Section Below		Address <u>Keshu, Va.</u> Address Same As Well Location? ☐ Yes ☒ No																
		4 WELL DEPTH: Date Completed MO. <u>4</u> DAY <u>6</u> YEAR <u>87</u> <u>29</u> FT. ☐ New Well ☐ Replacement Well																
2 FORMATION DESCRIPTION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>THICKNESS OF STRATUM</th> <th>DEPTH TO BOTTOM OF STRATUM</th> </tr> </thead> <tbody> <tr> <td><u>Brown clay + cobbles</u></td> <td><u>5</u></td> <td><u>5</u></td> </tr> <tr> <td><u>coarse sand + gravel</u></td> <td><u>5</u></td> <td><u>10</u></td> </tr> <tr> <td><u>coarse wet sand</u></td> <td><u>10</u></td> <td><u>20</u></td> </tr> <tr> <td><u>coarse wet sand</u></td> <td><u>9</u></td> <td><u>29</u></td> </tr> </tbody> </table>			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<u>Brown clay + cobbles</u>	<u>5</u>	<u>5</u>	<u>coarse sand + gravel</u>	<u>5</u>	<u>10</u>	<u>coarse wet sand</u>	<u>10</u>	<u>20</u>	<u>coarse wet sand</u>	<u>9</u>	<u>29</u>	5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted	
			THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM														
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6 USE: ☐ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public		7 CASING: Diameter ☒ 4" ☐ 6" ☐ 8" ☐ 10" ☐ 12" ☐ 14" ☐ 16" ☐ 18" ☐ 20" ☐ 24" ☐ 30" ☐ 36" ☐ 42" ☐ 48" ☐ 54" ☐ 60" ☐ 66" ☐ 72" ☐ 78" ☐ 84" ☐ 90" ☐ 96" ☐ 102" ☐ 108" ☐ 114" ☐ 120" ☐ 126" ☐ 132" ☐ 138" ☐ 144" ☐ 150" ☐ 156" ☐ 162" ☐ 168" ☐ 174" ☐ 180" ☐ 186" ☐ 192" ☐ 198" ☐ 204" ☐ 210" ☐ 216" ☐ 222" ☐ 228" ☐ 234" ☐ 240" ☐ 246" ☐ 252" ☐ 258" ☐ 264" ☐ 270" ☐ 276" ☐ 282" ☐ 288" ☐ 294" ☐ 300" ☐ 306" ☐ 312" ☐ 318" ☐ 324" ☐ 330" ☐ 336" ☐ 342" ☐ 348" ☐ 354" ☐ 360" ☐ 366" ☐ 372" ☐ 378" ☐ 384" ☐ 390" ☐ 396" ☐ 402" ☐ 408" ☐ 414" ☐ 420" ☐ 426" ☐ 432" ☐ 438" ☐ 444" ☐ 450" ☐ 456" ☐ 462" ☐ 468" ☐ 474" ☐ 480" ☐ 486" ☐ 492" ☐ 498" ☐ 504" ☐ 510" ☐ 516" ☐ 522" ☐ 528" ☐ 534" ☐ 540" ☐ 546" ☐ 552" ☐ 558" ☐ 564" ☐ 570" ☐ 576" ☐ 582" ☐ 588" ☐ 594" ☐ 600" ☐ 606" ☐ 612" ☐ 618" ☐ 624" ☐ 630" ☐ 636" ☐ 642" ☐ 648" ☐ 654" ☐ 660" ☐ 666" ☐ 672" ☐ 678" ☐ 684" ☐ 690" ☐ 696" ☐ 702" ☐ 708" ☐ 714" ☐ 720" ☐ 726" ☐ 732" ☐ 738" ☐ 744" ☐ 750" ☐ 756" ☐ 762" ☐ 768" ☐ 774" ☐ 780" ☐ 786" ☐ 792" ☐ 798" ☐ 804" ☐ 810" ☐ 816" ☐ 822" ☐ 828" ☐ 834" ☐ 840" ☐ 846" ☐ 852" ☐ 858" ☐ 864" ☐ 870" ☐ 876" ☐ 882" ☐ 888" ☐ 894" ☐ 900" ☐ 906" ☐ 912" ☐ 918" ☐ 924" ☐ 930" ☐ 936" ☐ 942" ☐ 948" ☐ 954" ☐ 960" ☐ 966" ☐ 972" ☐ 978" ☐ 984" ☐ 990" ☐ 996" ☐ 1000" Height: Above/Below Surface <u>2</u> ft. Weight <u>11</u> lbs./ft. Drive Shoe ☒ Yes ☐ No																
8 SCREEN: ☐ Not Installed Type <u>5 steel</u> Diameter <u>4"</u> Slot/Gauge <u>10</u> Length <u>3'</u> Set between <u>26</u> ft. and <u>29</u> ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Brammer Check ☒ Blank above screen <u>1</u> ft. Other _____																		
9 STATIC WATER LEVEL: <u>6</u> ft. below land surface ☐ Flow		10 PUMPING LEVEL: below land surface <u>6</u> ft. after <u>1</u> hrs. pumping at <u>50</u> G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.																
11 WELL HEAD COMPLETION: ☒ Fittless adapter ☒ 12" above grade ☐ Basement offset ☐ Approved pit		12 WELL GROUTED? ☐ No ☒ Yes From <u>0</u> to <u>10</u> ft. ☐ Neat cement ☒ Bentonite ☐ Other _____ No. of bags of cement <u>1</u> Additives _____																
13 Nearest source of possible contamination Type <u>None</u> 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. <u>Permit #1422</u>		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>Earl Sanders & Son</u> <u>0112</u> REGISTERED BUSINESS NAME REGISTRATION NO. Address <u>72519 121-40 Hawthorn, Mich.</u> Signed <u>K. J. Jett</u> Date <u>7</u> AUTHORIZED REPRESENTATIVE																
17. Rig Operator's Name: <u>Cayo</u>																		

PERMIT NUMBER

1 LOCATION OF WELL		TOWNSHIP		RANGE	
County	Township Name	Fraction	Section Number	Town Number	Range Number
Kalamazoo	Clint	N 1/4 Sec 16	6	2 N	9 E
Distance And Direction From Road Intersection		3 OWNER OF WELL:			
5768 Leon		Fred Faus			
Street Address & City of Well Location		Address			
Locate with "X" in Section Below		Address Same As Well Location? ☒ Yes ☐ No			
Sketch Map:		4 WELL DEPTH: (completed) 41 ft. Date of Completion 10/27/87			
		5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐			
2 FORMATION DESCRIPTION		6 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐			
THICKNESS OF STRATUM		7 CASING: ☒ Steel ☐ Threaded ☐ Welded ☐ Plastic ☐ Diameter 4 in. to 37 ft. depth			
DEPTH TO BOTTOM OF STRATUM		Height: Above/Below Surface 1 ft. Weight 11 lbs./ft.			
sand		4 in. to 37 ft. depth			
sand & gravel		Grouted Drill Hole Diameter 4 in. to 37 ft. depth			
		Drive Shoe ☒ Yes ☐ No			
		8 SCREEN: ☐ Not Installed			
		Type 5 steel Diameter 4"			
		Slot/Gauze 15 Length 4'			
		Set between 37 ft. and 41 ft.			
		FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bremer Check			
		☒ Blank above screen 1 ft. Other			
		9 STATIC WATER LEVEL: 20 ft. below land surface ☐ Flow			
		10 PUMPING LEVEL: below land surface			
		20 ft. after 1 hrs. pumping at 50 G.P.M.			
		ft. after hrs. pumping at G.P.M.			
		11 WELL HEAD COMPLETION: ☒ Flare adapter ☐ 12" above grade			
		☐ Basement offset ☐ Approved pit			
		12 WELL GROUTED? ☐ No ☒ Yes From 0 to 20 ft.			
		☐ Neat cement ☒ Bentonite ☐ Other			
		No. of bags of cement Additives			
		13 Nearest source of possible contamination			
		Type Septic Distance 75 ft. Direction west			
		Well disinfected upon completion? ☒ Yes ☐ No			
		14 PUMP: ☐ Not Installed ☒ Pump Installation Only			
		Manufacturer's name Sta. Hite			
		Model number 14-B HP 1/2 Volts 230			
		Length of Drop Pipe 25 ft. capacity 14 G.P.M.			
		TYPE: ☒ Submersible ☐ Jet			
		PRESSURE TANK: custom tank			
		Manufacturer's name			
		Model number Capacity Gallons			
15. Remarks, elevation, source of data, etc.		16. WATER WELL CONTRACTOR'S CERTIFICATION:			
Permit # 6863		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
		E. J. Sanders & Son			
		REGISTERED BUSINESS NAME 12819 M-40			
		Address			
		Signed R. Slaw			
		Date 11/2/87			

D67d 2/84

APR - 6 1976

WATER WELL RECORD
ACT 294 PA 1965MICHIGAN DEPARTMENT
OF
PUBLIC HEALTH

1 LOCATION OF WELL

County Washtenaw Township Name CHARLESTON Fraction NE 1/4 NE 1/4 NW 1/4 Section Number 6 Town Number 2 N/S. Range Number 9 E/W.

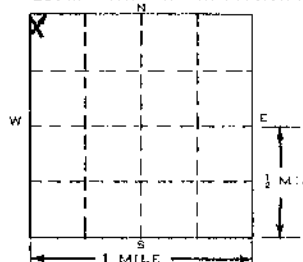
Distance And Direction from Road Intersections

~~825~~
10452 E. G AVE

Street address & City of Well Location

Locate with "X" in section below

Sketch Map:



2 FORMATION

THICKNESS
OF
STRATUMDEPTH TO
BOTTOM OF
STRATUM

Gravel	50	50
Gray clay & Gravel	40	90
water sand	4	94

3 OWNER OF WELL:

Address L. ROBERTS
2631 BEETHOVEN AVE

4 WELL DEPTH: (completed) Date of Completion

94 ft. 4-1-76

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
Diam. Surface 1 ft.

4 in. to 90 ft. Depth Weight 11 lbs./ft.
in. to ft. Depth Drive Shoe? Yes ☒ No ☐

8 SCREEN:

Type: Johnson 3/8" Dia. Dia.: 4"

Slot/Gauge 10 Length 4"

Set between 90 ft. and 94 ft.

Fittings: Lead packer & plug

9 STATIC WATER LEVEL

20 ft. below land surface

10 PUMPING LEVEL below land surface

80 ft. after 4 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

feet Direction Type

Well disinfected upon completion ☒ Yes ☐ No

15 PUMP:

☐ Not installed

Manufacturer's Name REDA

Model Number 909p101 HP 4 Volts 220

Length of Drop Pipe 30 ft. capacity 12 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.

WALT ADAMS 436
REGISTERED BUSINESS NAME REGISTRATION NO.

Address Washtenaw

Signed Walt Adams Date 4-1-76
AUTHORIZED REPRESENTATIVE

GEOLOGICAL SURVEY COPY

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		County KAL		Township Name CHARLESTON		Fraction SE 1/4 NW 1/4 SE 1/4		Section Number 6		Town Number 2		Range Number 9	
Distance And Direction From Road Intersection AUGUSTA DR NORTH OF GALESBURG TO 37TH ST.													
Street Address & City of Well Location 4111 N. 37TH ST GALESBURG MICH.													
Address Same As Well Location? ☒ Yes ☐ No													
2 FORMATION DESCRIPTION				THICKNESS OF STRATUM		DEPTH TO BOTTOM OF STRATUM		3 OWNER OF WELL					
RECEIVED MICH. DEPT. OF PUBLIC HEALTH DEC - 9 93 BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH # 930430						GARIAND JOHANSON Address 4111 N. 37TH ST GALESBURG MICH. Date Completed 11-22-93 ☒ New Well ☒ Replacement Well							
						4 WELL DEPTH: 68 FT. Date Completed 11-22-93 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Auger ☐ Jetted ☐							
						5 USE: ☒ Domestic ☐ Type I Public ☐ Type III Public ☐ Irrigation ☐ Type IIa Public ☐ Heat pump ☐ Test Well ☐ Type IIb Public ☐							
						6 CASING Diameter 4 in. to 64 ft. depth ☒ Steel ☒ Threaded ☐ Height Above/Below Surface 1 ft. ☐ Plastic ☐ Welded ☐ Weight 11 lbs./ft. Grouted Drill Hole Diameter ☐ Drive Shoe ☒ Yes ☐ No ☐ in. to ☐ ft. depth							
								8 SCREEN ☐ Not installed Type 5/Steel Diameter 4" Slot/Gauze 12 Length 4' Set between 64 ft. and 68 ft. FITTINGS ☒ K-Packer ☐ Lead Packer ☐ Bromer Check ☒ Blank above screen ☐ ft. Other					
								9 STATIC WATER LEVEL 13 ft. below land surface ☐ Flow					
								10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping at 50 G.P.M. _____ ft. after _____ hrs. pumping at _____ G.P.M.					
								11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit					
								12 WELL GROUTED? ☐ No ☐ Yes From _____ to _____ ft. ☐ Neat cement ☐ Bentonite ☐ Other _____ No. of bags of cement _____ 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 MYERS Model number NS10R HP 1/2 Volts 115 Length of Drop Pipe 42 ft. capacity 12 G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: Manufacturer's name OWN TANK Model number 202 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. WALT ADAMS 436 REGISTERED BUSINESS NAME REGISTRATION NO. Address KAL Signed Walt Adams Date 11-24-93 AUTHORIZED REPRESENTATIVE									
17. Rig Operator's Name:				John Dornhues Authority: Completion: Penalty: Act 368 PA 1978 Required Conviction of a violation of any provision is a misdemeanor.									

WATER WELL AND PUMP RECORD

PERMIT NUMBER

1 LOCATION OF WELL		County KAL.		Township Name CHARLESTON		Fraction 1/4 SE 1/4		Section Number 6		Town Number 2 N/S		Range Number 9 E/W	
Distance And Direction From Road Intersection M-96 NORTH TO 37TH													
Street Address & City of Well Location 4274 N. 37TH GALESBURG MICH													
Address Same As Well Location? ☒ Yes ☐ No													
4 WELL DEPTH: 76 FT. Date Completed MO. 11 DAY 5 YEAR 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: ☒ Steel ☒ Threaded ☐ Welded 14 in to 12 ft. depth Grouted Drill Hole Diameter n to ft. depth n to ft. depth n to ft. depth													
Height Above/Below Surface 1 ft Weight 11 lbs./ft. Drive Shoe ☒ Yes ☐ No													
8 SCREEN: ☐ Not Installed Type 5/Steel Diameter 4" Slot/Gauze 12 Length 4' Set between 72 ft. and 76 ft. FITTINGS: ☒ K-Packer ☐ Lead Packer ☐ Bromor Check ☒ Blank above screen 1 ft. Other													
9 STATIC WATER LEVEL 25 ft. below land surface ☐ Flow													
10 PUMPING LEVEL: below land surface ft. after hrs. pumping at 50 G.P.M. ft. after hrs. pumping at G.P.M.													
11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12" above grade ☐ Basement offset ☐ Approved pit													
12 WELL GROUTED? ☐ No ☒ Yes From to ft. ☐ Neat cement ☒ Bentonite ☐ Other No. of bags of cement 3 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 MYERS Model number 512R HP 1/2 Volts 220 Length of Drop Pipe 42 ft. capacity 12 G.P.M. TYPE: ☒ Submersible ☐ Jet PRESSURE TANK: well x Tre 1 Manufacturer's name Model number 203 Capacity 10 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. WALT ADAMS 436 REGISTERED BUSINESS NAME REGISTRATION NO. Address KAL Signed Walt Adams Date 11-8-93 AUTHORIZED REPRESENTATIVE													
17. Rig Operator's Name: Jim Donahoe													

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MICH. DEPT. OF PUBLIC HEALTH

NOV 10 93

BUREAU OF ENVIRONMENTAL
AND OCCUPATIONAL HEALTH

USE A 2ND SHEET IF NEEDED

WATER WELL AND PUMP RECORD

PERMIT NUMBER

9801

1 LOCATION OF WELL			3 OWNER OF WELL:		
County <u>KAL</u>	Township Name <u>CHARLESTON</u>	Fraction <u>5 1/4 5 1/4 5 1/4</u>	Section Number <u>6</u>	Town Number <u>2 MS</u>	Range Number <u>2 EW</u>
Distance And Direction From Road Intersection <u>1/4 mile north of HADAC on the east side</u>			Address <u>3264 N. 30th</u> <u>CARLEBURG MICH.</u>		
Street Address & City of Well Location			Address Same As Well Location? ☒ Yes ☐ No		
Locate with "X" in Section Below			4 WELL DEPTH: <u>85</u> FT. Date Completed <u>2</u> <u>11</u> <u>92</u>		
			☒ 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		
2 FORMATION DESCRIPTION			Height: Above/Below <u>1</u> ft.		
			Surface <u>1</u> ft.		
THICKNESS OF STRATUM			Weight <u>11</u> lbs./ft.		
DEPTH TO BOTTOM OF STRATUM			Drive Shoe ☒ Yes ☐ No		
<u>SAND</u>			<u>4</u> in. to <u>80</u> ft. depth		
<u>GRAY CLAY</u>			<u>7</u> in. to <u>54</u> ft. depth		
<u>SAND</u>			<u>11</u> in. to <u>65</u> ft. depth		
<u>CLAY</u>			<u>3</u> in. to <u>68</u> ft. depth		
<u>SAND WATER</u>			<u>17</u> in. to <u>85</u> ft. depth		
			8 SCREEN: ☐ Not Installed		
			Type <u>PLASTIC</u> Diameter <u>4"</u>		
			Slot/Gauze <u>12</u> Length <u>5'</u>		
			Set between <u>80</u> ft. and <u>85</u> ft.		
			FITTINGS: ☒ K-Packer ☐ Load Packer ☐ Brenner Check		
			☒ Blank above screen <u>1</u> ft. Other <u></u>		
			9 STATIC WATER LEVEL: <u>65</u> ft. below land surface ☐ Flow		
			10 PUMPING LEVEL: below land surface		
			<u>1</u> ft. after <u>1</u> hrs. pumping at <u>60</u> G.P.M.		
			<u></u> ft. after <u></u> hrs. pumping at <u></u> G.P.M.		
			11 WELL HEAD COMPLETION: ☒ Pitless adapter ☐ 12' above grade		
			☐ Basement offset ☐ Approved pit		
			12 WELL GROUTED? ☐ No ☒ Yes From <u></u> to <u></u> ft.		
			☐ Neat cement ☒ Bentonite ☐ Other <u></u>		
			No. of bags of cement <u></u> Additives <u></u>		
			13 Nearest source of possible contamination		
			Type <u>5-TANK</u> Distance <u>50</u> ft. Direction <u>N/E</u>		
			Well disinfected upon completion? ☒ Yes ☐ No		
			Was old well plugged? ☐ Yes ☐ No		
			14 PUMP. ☐ Not Installed ☐ Pump Installation Only		
			Manufacturer's name <u>BUAKS</u>		
			Model number <u>5-80</u> HP <u>1/2</u> Volts <u>220</u>		
			Length of Drop Pipe <u>75</u> ft. capacity <u>12</u> G.P.M.		
			TYPE: ☒ Submersible ☐ Jet		
			PRESSURE TANK: <u>X</u> <u>TROL</u>		
			Manufacturer's name <u>X</u> <u>TROL</u>		
			Model number <u>202</u> Capacity <u>5</u> 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.		
			<u>WALT ADAMS</u> <u>430</u>		
			REGISTERED BUSINESS NAME <u>KAL</u> REGISTRATION NO. <u></u>		
17. Rig Operator's Name:			Address <u></u>		
			Signed <u>Walt Adams</u> Date <u>2-11-92</u>		
			AUTHORIZED REPRESENTATIVE		

USE A 2ND SHEET IF NEEDED

RECEIVED
Mich. Dept. of Public Health

FEB 18 1992

BUREAU OF ENVIRONMENTAL AND
OCCUPATIONAL HEALTH-GWQS