Send original copy by certified mail to: TNRCC, P.O. Box 13087, Austin, TX 78711-3087

Please use black ink.

ATTENTION OWNER: *Confidentiality Privilege Notice on Reverse Side*

State of Texas WELL REPORT

Texas Water Well Drillers Advisory Council
P.O. Box 13087
Austin, TX 78711-3087
512-239-0530

1) OWNER [redacted] (Name) ADDRESS [redacted] (Street or RFD) (City) (State) (Zip)

2) ADDRESS OF WELL: County [redacted] (Street, RFD or other) (City) (State) (Zip) GRID # _____

3) TYPE OF WORK (Check): ☑ New Well ☐ Deepening ☐ Reconditioning ☐ Plugging

4) PROPOSED USE (Check): ☐ Monitor ☐ Environmental Soil Boring ☑ Domestic ☐ Industrial ☐ Irrigation ☐ Injection ☐ Public Supply ☐ De-watering ☐ Testwell
If Public Supply well, were plans submitted to the TNRCC? ☐ Yes ☐ No

5) N

6) WELL LOG:
Date Drilling:
Started 5-20 19 96
Completed 5-21 19 96

DIAMETER OF HOLE		
Dia. (in.)	From (ft.)	To (ft.)
8 3/4	Surface	101

7) DRILLING METHOD (Check): ☐ Driven ☐ Air Rotary ☑ Mud Rotary ☐ Bored ☐ Air Hammer ☐ Cable Tool ☐ Jetted ☐ Other _____

From (ft.)	To (ft.)	Description and color of formation material
0	15	SOIL CLAY
15-41		CALICHE
41-65		SD
65-135		CLAY
135-140		SD
140-165		CLAY
165-181		SD

(Use reverse side if necessary)

8) Borehole Completion (Check): ☐ Open Hole ☐ Straight Wall ☐ Underreamed ☐ Gravel Packed ☑ Other SCREEN
If Gravel Packed give interval ... from _____ ft. to _____ ft.

CASING, BLANK PIPE, AND WELL SCREEN DATA:

Dia. (in.)	New or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft.) From	Setting (ft.) To	Gage Casing Screen
6	NEW	PVC	0	101	SCH 40
5	NEW	PVC SCREEN	101	121	0.5

9) CEMENTING DATA [Rule 338.44(1)]
Cemented from 0 ft. to 13 ft. No. of sacks used 3
ft. to _____ ft. No. of sacks used _____
Method used THREW BUCKET
Cemented by THOMPSON WATER WELL
Distance to septic system field lines or other concentrated contamination _____ ft.
Method of verification of above distance MEASURED

10) SURFACE COMPLETION
☐ Specified Surface Slab Installed [Rule 338.44(2)(A)]
☑ Specified Steel Sleeve Installed [Rule 338.44(3)(A)]
☐ Pitless Adapter Used [Rule 338.44(3)(b)]
☐ Approved Alternative Procedure Used [Rule 338.71]

11) WATER LEVEL:
Static level 33 ft. below land surface Date 5-20-96
Artesian flow _____ gpm. Date _____

12) PACKERS:

Type	Depth
PLASTIC	101

13) TYPE PUMP:
☐ Turbine ☐ Jet ☑ Submersible ☐ Cylinder
☐ Other _____
Depth to pump bowls, cylinder, jet, etc. 120 ft.

14) WELL TESTS:
Type test: ☐ Pump ☐ Bailer ☐ Jetted ☐ Estimated
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.

15) WATER QUALITY:
Did you knowingly penetrate any strata which contained undesirable constituents?
☐ Yes ☑ No If yes, submit "REPORT OF UNDESIRABLE WATER"
Type of water? _____ Depth of strata _____
Was a chemical analysis made? ☐ Yes ☐ No

I hereby certify that this well was drilled by me (or under my supervision) and that each and all of the statements herein are true to the best of my knowledge and belief. I understand that failure to complete items 1 thru 15 will result in the log(s) being returned for completion and resubmittal.

COMPANY NAME THOMPSON WATER WELL (Type or print) WELL DRILLER'S LICENSE NO. 5580

ADDRESS P.O. BOX 434 GOLIAD, TX 77963
(Street or RFD) (City) (State) (Zip)

(Signed) [signature] (Licensed Well Driller) (Signed) [signature] (Registered Driller Trainee)

Please attach electric log, chemical analysis, and other pertinent information, if available.

TNRCC-0199 (Rev. 11-01-94) WELL OWNER'S COPY