

*Guide for Using the Hydrogeologic Classification System for Logging Water Well Boreholes by Thomas M. Hanna NGWA Press

20221

WATER WELL RECORD
STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
Division of Geological & Geophysical Surveys

LOCATION OF WELL (Please complete either 1a, 1b or 1c.)

Drilling Permit No. _____
A.D.L. No. _____

1a. Borough Subdivision Lot Block ANC SUN VY 1 2				1b. 1/4 qtrs. Section No. Township ☐ N Range ☐ E Meridian _____ of _____ of _____ _____ _____ ☐ S ☐ W _____	
1c. DISTANCE AND DIRECTION FROM ROAD INTERSECTIONS Street Address and Area of Well Location _____				3. OWNER OF WELL: Address: CARL DISOTELL	
2. WELL LOG		Feet Below Surface		4. WELL DEPTH: (final) 63 ft.	
Material Type		Top Bottom		5. DATE OF COMPLETION 10 - 26 - 86	
GRAVEL & SILT		0 4		6. ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Auger ☐ Jetted ☐ Bored ☐ Other:	
GRAVEL & BOULDERS		4 20		7. USE: ☒ Domestic ☐ Public Supply ☐ Industry ☐ Irrigation ☐ Recharge ☐ Commercial ☐ Test Well ☐ Other:	
GRAVEL		20 40		8. CASING: ☐ Threaded ☒ Welded diam. 6 in. to 6 1/2 in. Depth Weight 17 lbs./ft. diam. _____ in. to _____ in. Depth Slickup _____ ft.	
GRAVEL & SAND H2O		40 63		9. FINISH OF WELL: OPEN Type: _____ Diameter: 6 Slot/Mesh Size: _____ Length: _____ Set between _____ ft. and _____ ft. Backfilling _____ Gravel pack _____	
				10. STATIC WATER LEVEL: n 4 ft. 1026/86 ☐ Above or ☒ Below land surface Date Equipment used: _____	
				11. PUMPING LEVEL below land surface and YIELD 30 ft. after 1 hrs. pumping 20 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.	
				12. GROUTING Well Grouted: ☐ Yes ☒ No Material: ☐ Neat Cement ☐ Other:	
				13. PUMP: (if available) HP 1 1/2 Length of Drop Pipe 42 ft. capacity 10 g.p.m. ☒ Subm. ☐ Jet ☐ Centrifical ☐ Other	
				14. REMARKS:	
				15. Water Temperature _____ ° ☐ F ☐ C	
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; GENE SKYLES WELL DRILLING A 16951 Registered Business Name Contract License Number Address: P.O. BOX 671473 CHUGIAK AK. Signed: <i>Eugene M. Skyles</i> Date: Dec 10, 1986 Authorized Representative					

MUNICIPALITY OF ANCHORAGE
DEPT. OF HEALTH &
ENVIRONMENTAL PROTECTION

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