TOWN OF WEST GREENWICH DOMESTIC WELL COMPLETION REPORT

| | | | WELL | INFORMATION | | |
|------------------------------------|------------|---|-----------------|-------------------------|--|-------------|
| WELL OWNER | : | | | | | |
| WELL OWNER | ADDRESS |): | | | | |
| WELL LOCATION | ON (ADDRE | ESS): | | | | |
| STATIC WATE | R LEVEL (F | 'BG): | > | | | |
| PUMP DEPTH | | | | | | |
| EFFECTIVE W | ELL DEPTH | H (FT)^: | | | | |
| FFECTIVE ST | TORAGE C | APACITY (GAL) | A | | | |
| SEE FORMU | LAS IN TOV | NN ORDINANC | É | | | |
| | | | YIELD TE | ST INFORMATIO | N | |
| IELD TEST START DATE: | | | | TIME: | NOTES: | |
| /IELD TEST E | ND | DATE: | | TIME: | TIME: | |
| EST DURATI | ON (HOUR: | S): | 2.00 | | | |
| RIDEM REQUIRED YIELD (GPM): | | | | | | |
| REQUIRED CONSTANT PUMP RATE (GPM): | | | | | | |
| ACTUAL PUMP | RATE (GF | PM): | | | 1 | |
| | | SEPTH TO WAS | ER MEASUREN | IENTS (FBG) AND PUMP | FLOW BATES (CDM) | |
| | | TO WATER | FLOW RATE | ILINIO (I DO) AND FORIE | DEPTH TO WATER | FLOW RATE |
| TATIC | OLI II | TIOWATER | T LOW NAIL | 2.5 HOURS | DEFIT TO WATER | TI LOW KAIL |
| 0 HOURS | | | | 3.0 HOURS | | + |
| 5 HOURS | | | + | 3.5 HOURS | | |
| .0 HOURS | | **** | + | 4.0 HOURS | | + |
| 5 HOURS | | | + | 4.5 HOURS | | |
| .0 HOURS | | | + | 5.0 HOURS | | + |
| | | 1 | RECOVER | RY REQUIREMEN | JT | 1 |
| INAL DEPTH | TO WATER | R MEASUREME | | DATE: | TIME: | |
| DEPTH TO WATER (FBG): | | | | DATE: | NOTES: | |
| OURS FROM | | | | | - NOTES. | |
| | | | | | - | |
| PERCENT RE | COVERY: | | *** | | | |
| RECOVERY R. | | 8)*: | | | | |
| | | | H IS -450 FT AN | D THE PERCENT RECO | VERY AFTER 18 HOURS IS | G <85%) |
| | | | | | | |
| | | BOX - TOWN U | SE ONLY | | | |
| APPLICATION | RECEIPT | DATE: | | • | | |
| EE PAID: | | | - | DATE: | | |
| PPROVED B | Y: | | | | | |
| AFFILIATION: | | 1 | , | DATE: | | 5- |
| SPS COÓRDII | IATES: Y | LATTITUDE | | LONGITUDE: | | |