

WELL SCHEDULE

Earthtech, Inc.

Project #

Well #: Field _____ Office _____

Property Owner: Robert + Barbara TroutDate: 8-19-24Address: 159 Eagle Hill Rd PO Box
22 Rockwood, PA 15557Inventoried By: AS/JEPerson Interviewed: Robert Trout

Phone Number: _____

WELL DATA	Depth (ft): rept'd <u>50'</u> measured _____ Type: ☒ drilled ☐ dug other _____ Date Installed: _____ Driller: _____ Use: ☒ domestic other _____ Treatment: ☐ none ☐ softening other <u>Salt + Filter</u> Depth Water Encountered (ft): _____ Rep'd Static Water Level (ft): _____		CASING DATA	☐ Accessible ☐ Inaccessible Diameter (in): _____ Depth (ft): _____ Type: _____ Finish: ☐ open hole ☐ well screen other _____ Grouting: ☐ NO ☐ YES _____																									
	QUALITY	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>REMARKS</th> </tr> </thead> <tbody> <tr> <td>Staining</td> <td>☐</td> <td>☐</td> <td>_____</td> </tr> <tr> <td>Odor</td> <td>☐</td> <td>☐</td> <td>_____</td> </tr> <tr> <td>Bad Taste</td> <td>☐</td> <td>☐</td> <td>_____</td> </tr> <tr> <td>Cloudiness</td> <td>☐</td> <td>☐</td> <td>_____</td> </tr> <tr> <td>Ever Go Dry</td> <td>☐</td> <td>☐</td> <td>_____</td> </tr> </tbody> </table>			YES	NO	REMARKS	Staining	☐	☐	_____	Odor	☐	☐	_____	Bad Taste	☐	☐	_____	Cloudiness	☐	☐	_____	Ever Go Dry	☐	☐	_____	PUMP DATA	Type: ☐ submersible ☐ jet other _____ Capacity (gpm): _____ Horsepower: _____ Pump Setting (ft): _____ Power: ☐ electric other _____
		YES	NO	REMARKS																									
Staining	☐	☐	_____																										
Odor	☐	☐	_____																										
Bad Taste	☐	☐	_____																										
Cloudiness	☐	☐	_____																										
Ever Go Dry	☐	☐	_____																										
FIELD DATA	T(°C): <u>24'</u> K: _____ pH: <u>7.8</u> Sample taken from: <u>Jug filled by owner (Post treatment)</u> Water Level: _____ ft below surface Date of measurements: _____ SAMPLE LAB NUMBER: <u>18</u> ☐ None		YIELD	Q (gpm): rept'd _____ measured _____ Drawdown: _____ feet after _____ hours of pumping at _____ gpm.																									
	REMARKS	OFFICE DATA		Surface Elevation: _____ MSL Static Water Level: _____ MSL Well Bottom: _____ MSL Probable Yielding Formation(s): _____																									
LOCATION		SKETCH		other structures across the road used to have spring water but nobody lives there and structures are falling down/ Collapsing																									
	State: _____ County: _____ Township: _____ USGS Quad: _____ ☐ 7.5' ☐ 15' North _____ East _____ Location of property relative to roads (include road #), intersections, etc.: _____ Location of well relative to house or other point of reference: _____																												