WESTERN MICHIGAN UNIVERSITY

Department of Geosciences

AQUIFER TEST DATA

Owner: ___________________________________ Address: ______________________________ County: _______________________ State: _________________

Date: __________________ Company Performing Test: ____ Measured by: __________________________

Well No.: ______________ Distance From Pumping Well: _______________________ Type of Test: ____________________________ Test No.: ______________

Measuring Equipment: ____ [Page _____ of _____]

Time Data

Pump On: Date__________ Time__________ (t)

Pump Off: Date__________ Time__________ (t')

Duration of Aquifer test:

Pumping:_____________ Recovery:_____________

Water Level Data

Static Water Level:_______________________

Measuring Point:_________________________

Elevation of Measuring Point:_____________

Or - Stickup:___________________________

Discharge Date

How Q Measured:________________

Depth of pump/air Line:___________

Previous Pumping? Yes____ No____

Duration__________ End__________

Comments

(Factors affecting test data - e.g. Weather or Changew of Equipment and / or People)

Date	Clock Time	Time Since Pump Started (t)	Time Since Pump Stopped (t')	t / t'	Water Level Measurment	Correction or Conversion	Water Level	Water Level Change s or s'	Cumulative Discharge Measurement	Rate	Comments