

Letter of Transmittal

Submitted to:

Duabchi Vang

WI Dept. of Natural Resources
1300 W. Clairemont Ave
Eau Claire WI 54601

Date:

5/27/2020

Attached

Job:

Rymenam's Property

Under Separate Cover

Contents:

Well Abandonment Forms for the Rymenam's Property site located at W199 STH 54 in Pittsville (City Point), WI.
BRRTS #: 03-27-109550

Remarks:

Attached are the well abandonment forms for the above site as requested in your email correspondence dated 5/14/20. The wells have been properly abandoned and no investigative waste remains on-site. Attached are well abandonment forms documenting that the work was completed. Following your review of this information and payment of closure fee's please forward the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

cc: Kathy Brookhart - Client

METCO
709 Gillette St., Ste 3
La Crosse, WI 54603-2382
(608)781-8879 fax (608)781-8893

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County: JACKSON WI Unique Well # of Removed Well: VP315 Hicap #: _____

Latitude / Longitude (Degrees and Minutes): 44 ° 21.1 ' N 90 ° 19.33 ' W

Method Code (see instructions): _____

Section: 36 Township: 22 N Range: 1 E

Well Street Address: W199 State Highway 54

Well City, Village or Town: City Point Well ZIP Code: 54466-

Subdivision Name: _____ Lot #: _____

Facility Name: Rymenam's Property

Facility ID (FID or PWS): 627054230

License/Permit/Monitoring #: _____

Original Well Owner: Kathy Brookhart

Present Well Owner: Kathy Brookhart

Mailing Address of Present Owner: W199 STH 54

City of Present Owner: City Point State: WI ZIP Code: 54466-

Reason For Removal From Service: Sampling Complete WI Unique Well # of Replacement Well: _____

3. Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy): 10/1/2015

Water Well

Borehole / Drillhole If a Well Construction Report is available, please attach.

Construction Type:

Drilled Driven (Sandpoint) Dug

Other (specify): _____

Formation Type:

Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.): 7 Casing Diameter (in.): 2

Lower Drillhole Diameter (in.): 8 Casing Depth (ft.): 2

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? 1.5 Depth to Water (feet): 1.25

4. Pump, Liner, Screen, Casing & Sealing Material

Pump and piping removed? Yes No N/A

Liner(s) removed? Yes No N/A

Screen removed? Yes No N/A

Casing left in place? Yes No N/A

Was casing cut off below surface? Yes No N/A

Did sealing material rise to surface? Yes No N/A

Did material settle after 24 hours? Yes No N/A

If yes, was hole retopped? Yes No N/A

If bentonite chips were used, were they hydrated with water from a known safe source? Yes No N/A

Required Method of Placing Sealing Material

Conductor Pipe-Gravity Conductor Pipe-Pumped

Screened & Poured (Bentonite Chips) Other (Explain): Gravity

Sealing Materials

Neat Cement Grout Clay-Sand Slurry (11 lb./gal. wt.)

Sand-Cement (Concrete) Grout Bentonite-Sand Slurry " "

Concrete Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips Bentonite - Cement Grout

Granular Bentonite Bentonite - Sand Slurry

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	7	11

6. Comments

MW-1R

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing: Jason Powell - METCO License #: _____ Date of Filling & Sealing (mm/dd/yyyy): 5/22/2020

Street or Route: 709 Gillette Street, Suite 3 Telephone Number: (608) 781-8879

City: La Crosse State: WI ZIP Code: 54603- Signature of Person Doing Work: *Jason Powell* Date Signed: 5/27/2020

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Verification Only of Fill and Seal

Route to:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County JACKSON	WI Unique Well # of Removed Well _____ VP316 _____	Hicap # _____	Facility Name Rymenam's Property		
Latitude / Longitude (Degrees and Minutes) 44 ° 21.1 ' N		Method Code (see instructions) _____			Facility ID (FID or PWS) 627054230
90 ° 19.33 ' W		License/Permit/Monitoring # _____			
1/4 NW or Gov't Lot #	1/4 NE	Section 36	Township 22 N	Range 1	
Original Well Owner Kathy Brookhart					
Well Street Address W199 State Highway 54					
Present Well Owner Kathy Brookhart					
Mailing Address of Present Owner W199 STH 54					
Well City, Village or Town City Point			Well ZIP Code 54466-	City of Present Owner City Point	
Subdivision Name _____			Lot # _____	State WI	ZIP Code 54466-

Reason For Removal From Service: **Sampling Complete**

WI Unique Well # of Replacement Well: _____

3. Well / Drillhole / Borehole Information **4. Pump, Liner, Screen, Casing & Sealing Material**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 10/1/2015	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Pump and piping removed?		
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed?		
<input type="checkbox"/> Borehole / Drillhole		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Screen removed?		
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place?		
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Was casing cut off below surface?		
Total Well Depth From Ground Surface (ft.) 7	Casing Diameter (in.) 2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface?		
Lower Drillhole Diameter (in.) 8	Casing Depth (ft.) 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours?		
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped?		
If yes, to what depth (feet)? 1.5	Depth to Water (feet) 1.9	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source?		

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs	
Bentonite Chips	Surface	7	11	

6. Comments
MW-2

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Jason Powell - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 5/22/2020	Date Received _____	Noted By _____
Street or Route 709 Gillette Street, Suite 3		Telephone Number (608) 781-8879	Comments _____	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 5/27/2020

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Verification Only of Fill and Seal

Route to:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County JACKSON		WI Unique Well # of Removed Well VP317		Hicap #		Facility Name Rymenam's Property	
Latitude / Longitude (Degrees and Minutes) 44 ° 21.1 ' N		Method Code (see instructions)		Facility ID (FID or PWS) 627054230		License/Permit/Monitoring #	
90 ° 19.33 ' W				Original Well Owner Kathy Brookhart		Present Well Owner Kathy Brookhart	
1/4 NW or Gov't Lot #		Section 36	Township 22 N	Range 1	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Mailing Address of Present Owner W199 STH 54	
Well Street Address W199 State Highway 54				City of Present Owner City Point			
Well City, Village or Town City Point				Well ZIP Code 54466-		State WI	
Subdivision Name				Lot #		ZIP Code 54466-	

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. Well / Drillhole / Borehole Information			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 10/1/2015	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.	
<input type="checkbox"/> Borehole / Drillhole			
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.) 7		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 2	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)? 1.5		Depth to Water (feet) 0.5	

4. Pump, Liner, Screen, Casing & Sealing Material			
Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Screen removed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input checked="" type="checkbox"/> Other (Explain): Gravity	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite-Sand Slurry " "	
<input type="checkbox"/> Concrete		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input checked="" type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used To Fill Well / Drillhole			
	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	7	11

6. Comments
MW-3

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Jason Powell - METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 5/22/2020	Date Received	Noted By
Street or Route 709 Gillette Street, Suite 3		Telephone Number (608) 781-8879		Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Jason Powell</i>	Date Signed 5/27/2020	

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Verification Only of Fill and Seal

Route to:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

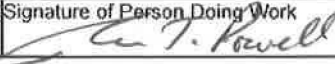
1. Well Location Information				2. Facility / Owner Information			
County JACKSON		WI Unique Well # of Removed Well _____ VP318 _____		Hicap #		Facility Name Rymenam's Property	
Latitude / Longitude (Degrees and Minutes) 44 ° 21.1 ' N 90 ° 19.33 ' W				Method Code (see instructions)			
Facility ID (FID or PWS) 627054230		License/Permit/Monitoring #		Original Well Owner Kathy Brookhart		Present Well Owner Kathy Brookhart	
Mailing Address of Present Owner W199 STH 54		City of Present Owner City Point		State WI		ZIP Code 54466-	
Well Street Address W199 State Highway 54		Well City, Village or Town City Point		Well ZIP Code 54466-		City of Present Owner City Point	
Subdivision Name		Lot #		State WI		ZIP Code 54466-	

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. Well / Drillhole / Borehole Information			
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 10/1/2015	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		If a Well Construction Report is available, please attach.	
Total Well Depth From Ground Surface (ft.) 7		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 8		Casing Depth (ft.) 2	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)? 1.5		Depth to Water (feet) 1.26	

4. Pump, Liner, Screen, Casing & Sealing Material			
Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Screen removed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		
<input type="checkbox"/> Screened & Poured (Bentonite Chips)	<input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>		
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)		
<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Bentonite-Sand Slurry " "		
<input type="checkbox"/> Concrete	<input type="checkbox"/> Bentonite Chips		
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input checked="" type="checkbox"/> Bentonite Chips	<input type="checkbox"/> Bentonite - Cement Grout		
<input type="checkbox"/> Granular Bentonite	<input type="checkbox"/> Bentonite - Sand Slurry		

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	7	11

6. Comments
MW-4

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Jason Powell - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 5/22/2020	Date Received	Noted By
Street or Route 709 Gillette Street, Suite 3		Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 5/27/2020

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Verification Only of Fill and Seal

Route to:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

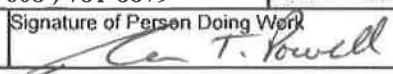
1. Well Location Information				2. Facility / Owner Information			
County JACKSON		WI Unique Well # of Removed Well VP319	Hicap #	Facility Name Rymenam's Property		Facility ID (FID or PWS) 627054230	
Latitude / Longitude (Degrees and Minutes) 44 ° 21.1 ' N 90 ° 19.33 ' W		Method Code (see instructions)		License/Permit/Monitoring #		Original Well Owner Kathy Brookhart	
1/4 NW or Gov't Lot #	1/4 NE	Section 36	Township 22 N	Range 1	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Present Well Owner Kathy Brookhart	
Well Street Address W199 State Highway 54				Mailing Address of Present Owner W199 STH 54			
Well City, Village or Town City Point			Well ZIP Code 54466-		City of Present Owner City Point		State WI
Subdivision Name			Lot #		ZIP Code 54466-		

Reason For Removal From Service Sampling Complete	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material			
3. Well / Drillhole / Borehole Information		Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 10/1/2015	Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Screen removed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Casing left in place?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 7	Casing Diameter (in.) 2	Did material settle after 24 hours? If yes, was hole retopped?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 8	Casing Depth (ft.) 2	If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Required Method of Placing Sealing Material			
If yes, to what depth (feet)? 1.5	Depth to Water (feet) 1.68	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>			

Sealing Materials		<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Concrete		<input type="checkbox"/> Bentonite-Sand Slurry " "	
<input type="checkbox"/> Bentonite Chips		For Monitoring Wells and Monitoring Well Boreholes Only:			
<input checked="" type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout		<input type="checkbox"/> Bentonite - Sand Slurry	
<input type="checkbox"/> Granular Bentonite					

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	7	11

6. Comments
MW-5

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Jason Powell - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 5/22/2020	Date Received	Noted By	
Street or Route 709 Gillette Street, Suite 3		Telephone Number (608) 781-8879	Comments		
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 		Date Signed 5/27/2020

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Verification Only of Fill and Seal

Route to:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County: **JACKSON**

WI Unique Well # of Removed Well: _____

Hicap #: _____

Latitude / Longitude (Degrees and Minutes):
44 ° 21.1 ' N
90 ° 19.33 ' W

Method Code (see instructions): _____

1/4 NW, 1/4 NE, Section: 36, Township: 22 N, Range: 1 E, W

Well Street Address: W199 State Highway 54

Well City, Village or Town: City Point

Well ZIP Code: 54466-

Subdivision Name: _____

Lot #: _____

Facility Name: Rymenam's Property

Facility ID (FID or PWS): 627054230

License/Permit/Monitoring #: _____

Original Well Owner: Club 54

Present Well Owner: Kathy Brookhart

Mailing Address of Present Owner: W199 STH 54

City of Present Owner: City Point, State: WI, ZIP Code: 54466-

Reason For Removal From Service: Sampling Complete

WI Unique Well # of Replacement Well: _____

3. Well / Drillhole / Borehole Information

Monitoring Well
 Water Well
 Borehole / Drillhole

Original Construction Date (mm/dd/yyyy): 5/1/1997

If a Well Construction Report is available, please attach. _____

Construction Type:
 Drilled Driven (Sandpoint) Dug
 Other (specify): _____

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.): 7 Casing Diameter (in.): 2

Lower Drillhole Diameter (in.): 8 Casing Depth (ft.): 2

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? 1.5 Depth to Water (feet): 1.76

4. Pump, Liner, Screen, Casing & Sealing Material

Pump and piping removed? Yes No N/A

Liner(s) removed? Yes No N/A

Screen removed? Yes No N/A

Casing left in place? Yes No N/A

Was casing cut off below surface? Yes No N/A

Did sealing material rise to surface? Yes No N/A

Did material settle after 24 hours? Yes No N/A

If yes, was hole retopped? Yes No N/A

If bentonite chips were used, were they hydrated with water from a known safe source? Yes No N/A

Required Method of Placing Sealing Material:
 Conductor Pipe-Gravity Conductor Pipe-Pumped
 Screened & Poured (Bentonite Chips) Other (Explain): Gravity

Sealing Materials:
 Neat Cement Grout Clay-Sand Slurry (11 lb./gal. wt.)
 Sand-Cement (Concrete) Grout Bentonite-Sand Slurry " "
 Concrete Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:
 Bentonite Chips Bentonite - Cement Grout
 Granular Bentonite Bentonite - Sand Slurry

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	7	11

6. Comments
Club 54 MW-1

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing: Jason Powell - METCO	License #: _____	Date of Filling & Sealing (mm/dd/yyyy): 5/22/2020	Date Received: _____	Noted By: _____
Street or Route: 709 Gillette Street, Suite 3	Telephone Number: (608) 781-8879	Comments: _____		
City: La Crosse	State: WI	ZIP Code: 54603-	Signature of Person Doing Work: <i>Jason T. Powell</i>	Date Signed: 5/27/2020

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

<input type="checkbox"/> Verification Only of Fill and Seal	Route to: <input type="checkbox"/> Drinking Water <input type="checkbox"/> Watershed/Wastewater <input checked="" type="checkbox"/> Remediation/Redevelopment <input type="checkbox"/> Waste Management <input type="checkbox"/> Other: _____
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1. Well Location Information	2. Facility / Owner Information
County: JACKSON WI Unique Well # of Removed Well: _____ Hicap #: _____ Latitude / Longitude (Degrees and Minutes): 44 ° 21.1 ' N 90 ° 19.33 ' W Method Code (see instructions): _____ Township: 22 N Range: 1 E Section: 36 Well Street Address: W199 State Highway 54 Well City, Village or Town: City Point Well ZIP Code: 54466- Subdivision Name: _____ Lot #: _____	Facility Name: Rymenam's Property Facility ID (FID or PWS): 627054230 License/Permit/Monitoring #: _____ Original Well Owner: Club 54 Present Well Owner: Kathy Brookhart Mailing Address of Present Owner: W199 STH 54 City of Present Owner: City Point State: WI ZIP Code: 54466-

Reason For Removal From Service: Sampling Complete WI Unique Well # of Replacement Well: _____	4. Pump, Liner, Screen, Casing & Sealing Material Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
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3. Well / Drillhole / Borehole Information <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole Original Construction Date (mm/dd/yyyy): 5/1/1997 If a Well Construction Report is available, please attach. _____ Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____ Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock Total Well Depth From Ground Surface (ft.): 17.5 Casing Diameter (in.): 2 Lower Drillhole Diameter (in.): 8 Casing Depth (ft.): 12.5 Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, to what depth (feet)? 1.5 Depth to Water (feet): 3.1	Required Method of Placing Sealing Material: <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): Gravity Sealing Materials: <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry
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5. Material Used To Fill Well / Drillhole		
From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	17.5 28

6. Comments
Club 54 PZ-1

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing (mm/dd/yyyy)	Date Received	Noted By	
Jason Powell - METCO		5/22/2020			
Street or Route	Telephone Number		Comments		
709 Gillette Street, Suite 3	(608) 781-8879				
City	State	ZIP Code	Signature of Person Doing Work		Date Signed
La Crosse	WI	54603-			5/27/2020