

Letter of Transmittal

Submitted to:

Andrew James

WI Dept. of Natural Resources

2984 Shawano Ave.

Green Bay WI 54313 6727

Date:

6/26/2020

☒ Attached

Job:

Sheleski Property

☒ Under Separate Cover

Contents:

ROW Notification to City of Menasha and Well Abandonment Forms for the Sheleski Property site located at 221 Washington Street in Menasha, WI. BRRTS #: 03-71-186591

Remarks:

Attached are the requested ROW notification for soil and groundwater contaminant plumes extended onto the ROW and well abandonment forms for the above site as requested in your email correspondence dated 6/19/20. 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 SIR/Closure Packet submitted on 6/8/20 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: Richard Sheleski - Client

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

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

Page 1 of 2

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

County	WI Unique Well # of Removed Well	Hicap #
WINNEBAGO		
Latitude / Longitude (Degrees and Minutes)	Method Code (see instructions)	
44 ° 11.67 ' N		
88 ° 27.23 ' W		
1/4 1/4 SW 1/4 NE	Section	Township
or Gov't Lot #	22	20 N
Well Street Address	Range 17 E	
221 Washington Street	<input checked="" type="checkbox"/> W	
Well City, Village or Town	Well ZIP Code	
Menasha	54952-	
Subdivision Name	Lot #	

2. Facility / Owner Information

Facility Name		
Sheleski Property		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Richard Sheleski		
Present Well Owner		
Richard Sheleski		
Mailing Address of Present Owner		
247 Highway H		
City of Present Owner	State	ZIP Code
Leasburg	MO	54313-

Reason For Removal From Service WI Unique Well # of Replacement Well

Sampling Complete

3. Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)
<input type="checkbox"/> Water Well	4/6/2002
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type:	
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)
<input type="checkbox"/> Other (specify):	<input type="checkbox"/> Dug

Formation Type:

☒ Unconsolidated Formation ☐ Bedrock

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

13

2

Lower Drillhole Diameter (in.) Casing Depth (ft.)

8.25

3

Was well annular space grouted? ☐ Yes ☒ No ☐ Unknown

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

4.73

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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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

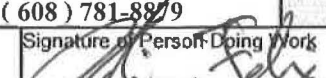
5. Material Used To Fill Well / Drillhole

	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	13	20.8

6. Comments

Monitoring Well MW-1

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing (mm/dd/yyyy)	DNR Use Only	
Kaylin Felix - METCO		6/25/2020	Date Received	Noted By
Street or Route	Telephone Number		Comments	
709 Gillette St., Ste. #3	(608) 781-8879			
City	State	ZIP Code	Signature of Person Doing Work	Date Signed
La Crosse	WI	54603-		6/26/220

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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 WINNEBAGO		WI Unique Well # of Removed Well _____		Hicap # _____		Facility Name Sheleski Property	
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____		Facility ID (FID or PWS) _____		License/Permit/Monitoring # _____	
$\frac{1}{4}$ SW $\frac{1}{4}$ NE or Gov't Lot #		Section 22	Township 20 N	Range 17	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner Richard Sheleski	
Well Street Address 221 Washington Street				Present Well Owner Richard Sheleski			
Well City, Village or Town Menasha				Mailing Address of Present Owner 247 Highway H			
Subdivision Name _____				City of Present Owner Leasburg		State MO	ZIP Code 54313-
Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well _____		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 4/6/2002 If a Well Construction Report is available, please attach.		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
3. Well / Drillhole / Borehole Information				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			
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 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 checked="" type="checkbox"/> N/A			
				If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				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			
Total Well Depth From Ground Surface (ft.) 13		Casing Diameter (in.) 2		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			
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 3		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			
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown							
If yes, to what depth (feet)? _____		Depth to Water (feet) 4.89					
5. Material Used To Fill Well / Drillhole							
Bentonite Chips		From (ft.) Surface	To (ft.) 13	lbs 20.8			
6. Comments Monitoring Well MW-2							
7. Supervision of Work							
Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO		License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020		DNR Use Only Date Received _____		
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-9879		Noted By _____			
City La Crosse		State WI	ZIP Code 54603-	Signature of Person Doing Work 		Date Signed 6/26/220	

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

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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

County WINNEBAGO	WI Unique Well # of Removed Well _____	HiCap # _____
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____
1/4 1/4 SW or Gov't Lot #	Section 22	Township 20 N
		Range 17 E
Well Street Address 221 Washington Street		Well ZIP Code 54952-
Well City, Village or Town Menasha		Lot # _____
Subdivision Name _____		_____

2. Facility / Owner Information

Facility Name Sheleski Property
Facility ID (FID or PWS) _____
License/Permit/Monitoring # _____
Original Well Owner Richard Sheleski
Present Well Owner Richard Sheleski
Mailing Address of Present Owner 247 Highway H
City of Present Owner Leasburg
State MO
ZIP Code 54313-

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) 4/6/2002
<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:

☒ Unconsolidated Formation ☐ Bedrock

Total Well Depth From Ground Surface (ft.) 13	Casing Diameter (in.) 2
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 3

Was well annular space grouted? ☐ Yes ☒ No ☐ Unknown

If yes, to what depth (feet)? _____	Depth to Water (feet) 8.75
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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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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

Material	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	13	20.8

6. Comments

Monitoring Well MW-3

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	DNR Use Only	
Street or Route 709 Gillette St., Ste. #3	Telephone Number (608) 781-8879	Comments _____	Date Received _____	Noted By _____
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 6/26/220

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

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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

County WINNEBAGO	WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____
1/4 SW 1/4 NE or Gov't Lot #	Section 22	Township 20 N
Well Street Address 221 Washington Street		Range 17 E
Well City, Village or Town Menasha		Well ZIP Code 54952-
Subdivision Name		Lot # _____

2. Facility / Owner Information

Facility Name Sheleski Property
Facility ID (FID or PWS) _____
License/Permit/Monitoring # _____
Original Well Owner Richard Sheleski
Present Well Owner Richard Sheleski
Mailing Address of Present Owner 247 Highway H
City of Present Owner Leasburg
State MO
ZIP Code 54313-

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) 4/6/2002
<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.) 13	Casing Diameter (in.) 2
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 3
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? _____	Depth to Water (feet) 7.85

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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input 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

Material	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	13	20.8

6. Comments

Monitoring Well MW-4

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	DNR Use Only	
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-8879	Date Received _____	Noted By _____
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Kaylin Felix</i>	
			Date Signed 6/26/220	

Well / Drillhole / Borehole Filling & Sealing

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Route to:

☐ Drinking Water

☐ Watershed/Wastewater

☒ Remediation/Redevelopment

☐ Waste Management

☐ Other: _____

1. Well Location Information

County WINNEBAGO	WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____
1/4 1/4 SW or Gov't Lot #	Section 22	Township 20 N
		Range 17 E
Well Street Address 221 Washington Street		Well ZIP Code 54952-
Well City, Village or Town Menasha		Lot # _____
Subdivision Name _____		_____

2. Facility / Owner Information

Facility Name Sheleski Property
Facility ID (FID or PWS) _____
License/Permit/Monitoring # _____
Original Well Owner Richard Sheleski
Present Well Owner Richard Sheleski
Mailing Address of Present Owner 247 Highway H
City of Present Owner Leasburg
State MO
ZIP Code 54313-

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) 4/6/2002
<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:

☒ Unconsolidated Formation

☐ Bedrock

Total Well Depth From Ground Surface (ft.)
12

Casing Diameter (in.)
2

Lower Drillhole Diameter (in.)
8.25

Casing Depth (ft.)
2

Was well annular space grouted? ☐ Yes ☒ No ☐ Unknown

If yes, to what depth (feet)?

Depth to Water (feet)

3.72

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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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

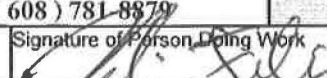
5. Material Used To Fill Well / Drillhole

Material	From (ft.)	To (ft.)	lbs
Bentonite Chips	Surface	12	19.2

6. Comments

Monitoring Well MW-5

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	DNR Use Only	
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-8879	Date Received _____	Noted By _____
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 6/26/220

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☐ Verification Only of Fill and Seal

Route to:

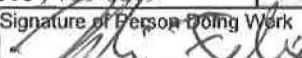
☐ Drinking Water

☐ Watershed/Wastewater

☒ Remediation/Redevelopment

☐ Waste Management

☐ Other:

1. Well Location Information				2. Facility / Owner Information			
County WINNEBAGO		WI Unique Well # of Removed Well WB623		Hicap #		Facility Name Sheleski Property	
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W				Facility ID (FID or PWS)			
Method Code (see instructions)				License/Permit/Monitoring #			
1/4 SW 1/4 NE		Section 22	Township 20 N	Range 17	<input checked="" type="checkbox"/> E <input type="checkbox"/> W		
Original Well Owner Richard Sheleski				Present Well Owner Richard Sheleski			
Well Street Address 221 Washington Street				Mailing Address of Present Owner 247 Highway H			
Well City, Village or Town Menasha				City of Present Owner Leasburg		State MO	ZIP Code 54313
Subdivision Name				Lot #			
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) 2/10/2020		Pump and piping 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.		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Borehole / Drillhole				Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Construction Type:				Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Drilled		<input type="checkbox"/> Driven (Sandpoint)		<input type="checkbox"/> Dug		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify):				<input type="checkbox"/> Other (specify):		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:		<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
Total Well Depth From Ground Surface (ft.) 13		Casing Diameter (in.) 2		<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input checked="" type="checkbox"/> Other (Explain): Gravity	
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 3		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	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		Depth to Water (feet) 4.98		For Monitoring Wells and Monitoring Well Boreholes Only:			
If yes, to what depth (feet)?				<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				6. Comments			
Bentonite Chips				Monitoring Well MW-6			
From (ft.) To (ft.) lbs							
Surface 13 20.8							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	Date Received		Noted By	
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-8879		Comments			
City La Crosse	State WI	ZIP Code 54603	Signature of Person Doing Work 		Date Signed 6/26/220		

Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

Facility/Project Name <u>Sheleski Property</u>	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name <u>MW-6</u>
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. " Long. " or " "	Wis. Unique Well No. <u>W18623</u> DNR Well ID No.
Facility ID	St. Plane ft. N. ft. E. S/C/N	Date Well Installed <u>02/10/2020</u> m m d d y y y y
Type of Well Well Code <u>11, MW</u>	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <u>Joe Black</u> <u>PSI Intertek</u>
Distance from Waste/Source ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: _____ 8 in. b. Length: _____ 1 ft. c. Material: Steel <input checked="" type="checkbox"/> 0.4 Other <input type="checkbox"/>
C. Land surface elevation _____ ft. MSL	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom _____ ft. MSL or _____ 1 ft.	3. Surface seal: Bentonite <input type="checkbox"/> 3.0 Concrete <input checked="" type="checkbox"/> 0.1 Other <input type="checkbox"/>
12. USCS classification of soil near screen: OP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 3.0 Other <input checked="" type="checkbox"/> <u>#40 Sand</u>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input checked="" type="checkbox"/> 3.3 b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 3.5 c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 3.1 d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 5.0 e. _____ Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 0.1 Tremie pumped <input type="checkbox"/> 0.2 Gravity <input checked="" type="checkbox"/> 0.8
14. Drilling method used: Rotary <input type="checkbox"/> 5.0 Hollow Stem Auger <input checked="" type="checkbox"/> 4.1 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 3.3 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 3.2 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 0.2 Air <input type="checkbox"/> 0.1 Drilling Mud <input type="checkbox"/> 0.3 None <input checked="" type="checkbox"/> 9.9	7. Fine sand material: Manufacturer, product name & mesh size a. <u>Red Flint #40-55</u> b. Volume added _____ 2 ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Filter pack material: Manufacturer, product name & mesh size a. <u>Red Flint #40 well slot</u> b. Volume added _____ 3.4 ft ³
Describe _____	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 2.3 Flush threaded PVC schedule 80 <input type="checkbox"/> 2.4 Other <input type="checkbox"/>
17. Source of water (attach analysis, if required): <u>NA</u>	10. Screen material: <u>same</u> a. Screen type: Factory cut <input checked="" type="checkbox"/> 1.1 Continuous slot <input type="checkbox"/> 0.1 Other <input type="checkbox"/>
E. Bentonite seal, top _____ ft. MSL or _____ 1 ft.	b. Manufacturer <u>EMI</u> c. Slot size: _____ 0.010 in. d. Slotted length: _____ ft.
F. Fine sand, top _____ ft. MSL or _____ 2 ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 1.4 Other <input checked="" type="checkbox"/> <u>#40 well slot</u>
G. Filter pack, top _____ ft. MSL or _____ 2.5 ft.	
H. Screen joint, top _____ ft. MSL or _____ 3 ft.	
I. Well bottom _____ ft. MSL or _____ 13 ft.	
J. Filter pack, bottom _____ ft. MSL or _____ 14 ft.	
K. Borehole, bottom _____ ft. MSL or _____ 14 ft.	
L. Borehole, diameter _____ 8 in.	
M. O.D. well casing _____ 2.4 in.	
N. I.D. well casing _____ 2.1 in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature Joe A. Black Firm PSI Intertek

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

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

County WINNEBAGO	WI Unique Well # of Removed Well _____ WB624 _____	Hicap # _____
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____
1/4 SW 1/4 NE or Gov't Lot #	Section 22	Township 20 N
		Range <input checked="" type="checkbox"/> E 17 <input type="checkbox"/> W
Well Street Address 221 Washington Street		
Well City, Village or Town Menasha		Well ZIP Code 54952-
Subdivision Name _____		Lot # _____

2. Facility / Owner Information

Facility Name Sheleski Property
Facility ID (FID or PWS) _____
License/Permit/Monitoring # _____
Original Well Owner Richard Sheleski
Present Well Owner Richard Sheleski
Mailing Address of Present Owner 247 Highway H
City of Present Owner Leasburg
State MO
ZIP Code 54313-

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) 2/10/2020
<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:

☒ Unconsolidated Formation

☐ Bedrock

Total Well Depth From Ground Surface (ft.) **13**

Casing Diameter (in.) **2**

Lower Drillhole Diameter (in.) **8.25**

Casing Depth (ft.) **3**

Was well annular space grouted? ☐ Yes ☒ No ☐ Unknown

If yes, to what depth (feet)?

Depth to Water (feet)

2.79

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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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	13	20.8

6. Comments

Monitoring Well MW-7

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	DNR Use Only	
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-8879	Date Received _____	Noted By _____
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	
			Date Signed 6/26/220	

Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

Facility/Project Name <u>Sheleski Property</u>		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.		Well Name <u>MW-7</u>	
Facility License, Permit or Monitoring No.		Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		Wis. Unique Well No. <u>WB 629</u> DNR Well ID No.	
Facility ID		Lat. " Long. " or		Date Well Installed <u>02/10/2020</u> m m d d y y y y	
Type of Well		St. Plane ft. N. ft. E. S/CN		Well Installed By: Name (first, last) and Firm <u>Joe Black</u> <u>PSI - Intertek</u>	
Well Code <u>1</u>		Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N, R. <input type="checkbox"/> E <input type="checkbox"/> W			
Distance from Waste/Source ft.		Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		Gov. Lot Number	
Enf. Stds. Apply <input type="checkbox"/>					

<p>A. Protective pipe, top elevation _____ ft. MSL</p> <p>B. Well casing, top elevation _____ ft. MSL</p> <p>C. Land surface elevation _____ ft. MSL</p> <p>D. Surface seal, bottom _____ ft. MSL or _____ ft.</p> <p>12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/></p> <p>13. Sieve analysis performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/></p> <p>15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99</p> <p>16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Describe _____</p> <p>17. Source of water (attach analysis, if required): <u>NA</u></p>		<p>1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Protective cover pipe: a. Inside diameter: _____ in. b. Length: _____ ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/></p> <p>d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____</p> <p>3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/></p> <p>4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30 Other <input checked="" type="checkbox"/> <u>#40 Sand</u></p> <p>5. Annular space seal: a. Granular/Chipped Bentonite <input checked="" type="checkbox"/> 33 b. _____ Lbs/gal mud weight... Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight... Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite... Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft³ volume added for any of the above</p> <p>f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravimetric <input checked="" type="checkbox"/> 08</p> <p>6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input checked="" type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input checked="" type="checkbox"/> 32 c. _____ Other <input type="checkbox"/></p> <p>7. Fine sand material: Manufacturer, product name & mesh size a. <u>Red Flint #45-55</u> b. Volume added _____ ft³</p> <p>8. Filter pack material: Manufacturer, product name & mesh size a. <u>Red Flint #40 well slot</u> b. Volume added _____ ft³</p> <p>9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/></p> <p>10. Screen material: <u>Same</u> a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/></p> <p>b. Manufacturer <u>EMI</u> c. Slot size: _____ 0.010 in. d. Slotted length: _____ ft.</p> <p>11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/></p>
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I hereby certify that the information on this form is true and correct to the best of my knowledge.

Signature Joe A. Black Firm PSI - Intertek

Well / Drillhole / Borehole Filling & Sealing

Form 3300-005 (R 4/08)

Page 1 of 2

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

County WINNEBAGO	WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (Degrees and Minutes) 44 ° 11.67 ' N 88 ° 27.23 ' W		Method Code (see instructions) _____
1/4 SW 1/4 NE or Gov't Lot #	Section 22	Township 20 N
		Range 17 E
		<input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 221 Washington Street		
Well City, Village or Town Menasha		Well ZIP Code 54952-
Subdivision Name		Lot # _____

2. Facility / Owner Information

Facility Name Sheleski Property
Facility ID (FID or PWS) _____
License/Permit/Monitoring # _____
Original Well Owner Wayne's Towing & Service Inc
Present Well Owner Richard Sheleski
Mailing Address of Present Owner 247 Highway H
City of Present Owner Leasburg
State MO
ZIP Code 54313-

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) 11/14/1997
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	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:

☒ Unconsolidated Formation

☐ Bedrock

Total Well Depth From Ground Surface (ft.)
11

Casing Diameter (in.)
2

Lower Drillhole Diameter (in.)
8.25

Casing Depth (ft.)
3

Was well annular space grouted? ☐ Yes ☒ No ☐ Unknown

If yes, to what depth (feet)?

Depth to Water (feet)
6.6

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 checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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	11	17.6

6. Comments

Monitoring Well MW-9. Well was silted into 11 feet bgs.

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Kaylin Felix - METCO	License # _____	Date of Filling & Sealing (mm/dd/yyyy) 6/25/2020	DNR Use Only	
Street or Route 709 Gillette St., Ste. #3		Telephone Number (608) 781-8879	Date Received	Noted By
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Kaylin Felix</i>	
			Date Signed 6/26/220	