

Letter of Transmittal

Submitted to:

Grant Neitzel

WDNR - Southeast Region RR Program
1701 N. 4Th Street
SuperiorWI5 4880

Date:

4/14/2020

Attached

Job:

Steve's Corner Bar

Under Separate Cover

Contents:

Well Abandonment Forms for the Steve's Corner Bar site located at 200 N. Main Street in Butternut, WI.
BRRTS #: 03-02-199424

Remarks:

Attached are the well abandonment forms for the above site as requested in your email correspondence dated 4/8/20. 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 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: Steve Rusnak - 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 ASHLAND	WI Unique Well # of Removed Well WA142	Hicap #		Facility Name Steve's Corner Bar			
Latitude / Longitude (Degrees and Minutes) 46 ° 0.88 ' N 90 ° 29.55 ' W		Method Code (see instructions)		Facility ID (FID or PWS)			
License/Permit/Monitoring #		Original Well Owner Steve Rusnak		Present Well Owner Steve Rusnak			
1/4 NE or Gov't Lot #	1/4 SE	Section 21	Township 41 N	Range 1	<input type="checkbox"/> E <input checked="" type="checkbox"/> W		Mailing Address of Present Owner P.O. Box 191
Well Street Address 200 Main Street				City of Present Owner Butternut			
Well City, Village or Town Butternut				Well ZIP Code 54514-		State WI	
Subdivision Name				Lot #		ZIP Code 54514-	

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 <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 7/2/2018 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
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Liner(s) removed?	<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		Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 15	Casing Diameter (in.) 2	Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 5	Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, to what depth (feet)? 3	Depth to Water (feet) 4.82	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
		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
5. Material Used To Fill Well / Drillhole		Required Method of Placing Sealing Material			
Bentonite Chips		<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			

From (ft.)	To (ft.)	lbs
Surface	15	24

6. Comments
Monitoring Well MW-1

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 4/13/2020	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 <i>Rob Wilmoth</i>		Date Signed 4/13/2020

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.

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 ASHLAND		WI Unique Well # of Removed Well WA143		Hicap #		Facility Name Steve's Corner Bar	
Latitude / Longitude (Degrees and Minutes) 46 ° 0.88 ' N 90 ° 29.55 ' W				Facility ID (FID or PWS)			
Method Code (see instructions)				License/Permit/Monitoring #			
1/4 NE or Gov't Lot #		Section 21	Township 41 N	Range 1	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Original Well Owner Steve Rusnak	
Well Street Address 200 Main Street				Present Well Owner Steve Rusnak			
Well City, Village or Town Butternut				Mailing Address of Present Owner P.O. Box 191			
Subdivision Name				Well ZIP Code 54514-		City of Present Owner Butternut	
Reason For Removal From Service Sampling Complete				WI Unique Well # of Replacement Well		State WI	
Well ZIP Code 54514-				Lot #		ZIP Code 54514-	

3. Well / Drillhole / Borehole Information				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) 7/2/2018		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			
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____				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	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				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	
Total Well Depth From Ground Surface (ft.) 14		Casing Diameter (in.) 2		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			
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 4		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)? 2.5		Depth to Water (feet) 4.26		<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					

5. Material Used To Fill Well / Drillhole			
Bentonite Chips		From (ft.) Surface	To (ft.) 14
		lbs 22.4	
6. Comments Monitoring Well MW-2			

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 4/13/2020	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 <i>Rob Wilmoth</i>	
				Date Signed 4/13/2020	

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.

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 ASHLAND		WI Unique Well # of Removed Well WA144	Hicap #	Facility Name Steve's Corner Bar			
Latitude / Longitude (Degrees and Minutes) 46 ° 0.88 ' N 90 ° 29.55 ' W		Method Code (see instructions)		Facility ID (FID or PWS)			
¼ ¼ NE ¼ SE		Section 21	Township 41 N	Range 1	License/Permit/Monitoring #		
or Gov't Lot #				<input type="checkbox"/> E	Original Well Owner Steve Rusnak		
				<input checked="" type="checkbox"/> W	Present Well Owner Steve Rusnak		
Well Street Address 200 Main Street				Mailing Address of Present Owner P.O. Box 191			
Well City, Village or Town Butternut			Well ZIP Code 54514-		City of Present Owner Butternut		
Subdivision Name			Lot #		State WI	ZIP Code 54514-	

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) 7/2/2018	
<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		
If yes, to what depth (feet)? 2.2	Depth to Water (feet) 2.98	

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 relotted? Yes No N/A

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

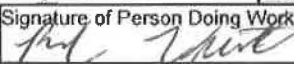
Required Method of Placing Sealing Material
 Conductor Pipe-Gravity Conductor Pipe-Pumped
 Screened & Poured (Bentonite Chips) Other (Explain): **Gravity**

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	13	20.8

6. Comments
Monitoring Well MW-3

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 4/13/2020	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 4/13/2020	

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.

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 ASHLAND		WI Unique Well # of Removed Well WA145		Hicap #		Facility Name Steve's Corner Bar	
Latitude / Longitude (Degrees and Minutes) 46 ° 0.88 ' N		Method Code (see instructions)		Facility ID (FID or PWS)		License/Permit/Monitoring #	
90 ° 29.55 ' W				Original Well Owner Steve Rusnak		Present Well Owner Steve Rusnak	
1/4 NE 1/4 SE		Section 21	Township 41 N	Range 1	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Mailing Address of Present Owner P.O. Box 191	
or Gov't Lot #		Well Street Address 200 Main Street		Well City, Village or Town Butternut		Well ZIP Code 54514-	
Subdivision Name		Well Street Address		City of Present Owner Butternut		State WI	ZIP Code 54514-
Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well		City of Present Owner		State	ZIP Code

3. Well / Drillhole / Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 7/2/2018		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)		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"/> Dug		Did sealing material rise to surface?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type:		<input type="checkbox"/> Bedrock		Did material settle after 24 hours?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Unconsolidated Formation				If yes, was hole relogged?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) 14		Casing Diameter (in.) 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
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 4		Required Method of Placing Sealing Material			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		If yes, to what depth (feet)? 2.5		Depth to Water (feet) 3.9		<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	14		22.4	

6. Comments
Monitoring Well MW-4

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 4/13/2020	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 <i>Rob Wilmoth</i>	Date Signed 4/13/2020	