

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County WOOD	WI Unique Well # of Removed Well	Hicap #	Facility Name Former Tusch Motors	
Latitude / Longitude (see instructions)	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)	
N W			License/Permit/Monitoring # MW-1	
1/4 NW 1/4 NW	Section 9	Township 23 N	Range 6	Original Well Owner
or Gov't Lot #				Present Well Owner Jim Simonis
Well Street Address 1655 Main Street			Mailing Address of Present Owner P.O. Box 56	
Well City, Village or Town Rudolph			Well ZIP Code	
Subdivision Name			City of Present Owner Rudolph	State WI
			ZIP Code 54475	

Reason for Removal from Service: **Site closure** WI Unique Well # of Replacement Well

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

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 4/15/02	<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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A Liner(s) removed?	
<input type="checkbox"/> Borehole / Drillhole		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Liner(s) perforated?	
Construction Type:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Screen removed?	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place?	
Formation Type:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface?	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface?	
Total Well Depth From Ground Surface (ft.) 30.02	Casing Diameter (in.) 2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours?	
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 30.02	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped?	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	<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?	
If yes, to what depth (feet)?		Required Method of Placing Sealing Material	
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain):	
		Sealing Materials	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <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.)	No. Yards, Sacks, Sealant or Volume (each one)	Mix Ratio or Mud Weight
Bentonite Chips		Surface	30.02	48	

6. Comments

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

Name of Person or Firm Doing Filling & Sealing Geiss Soil + Samples LLC	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd	Telephone Number (715) 539-3928	Comments		
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466528 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756842 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-01
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. _____ Long. _____ or	Wis. Unique Well No. _____ DNR Well Number _____
Facility ID	St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed 04/15/2002
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Todd Schmalfeldt
Distance from Waste/Source 80 ft.	Enf. Stds. Apply <input checked="" type="checkbox"/> Location of Well Relative to Waste/Source u <input checked="" type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Gov. Lot Number _____

<p>A. Protective pipe, top elevation _____ ft. Site</p> <p>B. Well casing, top elevation <u>1142.98</u> ft. Site</p> <p>C. Land surface elevation <u>1143.2</u> ft. Site</p> <p>D. Surface seal, bottom <u>1142.2</u> ft. Site or <u>1.0</u> ft.</p> <div style="border: 1px solid black; padding: 5px;"> <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 checked="" type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/></p> <p>13. Sieve analysis attached? <input type="checkbox"/> Yes <input 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 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): _____</p> </div> <p>E. Bentonite seal, top <u>1142.2</u> ft. Site or <u>1.0</u> ft.</p> <p>F. Fine sand, top <u>1131.2</u> ft. Site or <u>12.0</u> ft.</p> <p>G. Filter pack, top <u>1130.2</u> ft. Site or <u>13.0</u> ft.</p> <p>H. Screen joint, top <u>1128.2</u> ft. Site or <u>15.0</u> ft.</p> <p>I. Well bottom <u>1113.2</u> ft. Site or <u>30.0</u> ft.</p> <p>J. Filter pack, bottom <u>1112.7</u> ft. Site or <u>30.5</u> ft.</p> <p>K. Borehole, bottom <u>1112.7</u> ft. Site or <u>30.5</u> ft.</p> <p>L. Borehole, diameter <u>8.0</u> in.</p> <p>M. O.D. well casing <u>2.37</u> in.</p> <p>N. I.D. well casing <u>2.00</u> in.</p>		<p>1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Protective cover pipe: a. Inside diameter: <u>9.0</u> in. b. Length: <u>1.0</u> 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 bentonite and filter pack Other <input checked="" type="checkbox"/></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. <u>4.5</u> Ft³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <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 type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/></p> <p>7. Fine sand material: Manufacturer, product name & mesh size a. <u>Badger #7</u> b. Volume added <u>0.5</u> ft³</p> <p>8. Filter pack material: Manufacturer, product name & mesh size a. <u>American Materials #30</u> b. Volume added <u>5.5</u> 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>PVC</u> a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/> b. Manufacturer <u>Boart Longyear</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>15.0</u> ft.</p> <p>11. Backfill material (below filter pack): filter pack None <input type="checkbox"/> 14 Other <input checked="" 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 _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
 201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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, 285, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 285, 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 DNR Bureau:
 Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

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

County WOOD	WI Unique Well # of Removed Well	Hicap #	Facility Name Former Tosch Motors
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 NW 1/4 NW or Gov't Lot #	Section 9	Township 23 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 1655 Main Street	Original Well Owner	Present Well Owner Jim Simonis	
Well City, Village or Town Rudolph	Well ZIP Code	Mailing Address of Present Owner P.O. Box 56	
Subdivision Name	Lot #	City of Present Owner Rudolph	State WI ZIP Code 54475

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

Reason for Removal from Service Site closure	WI Unique Well # of Replacement Well	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <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): _____	If a Well Construction Report is available, please attach.	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Total Well Depth From Ground Surface (ft.) 19.46	Casing Diameter (in.) 2
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 19.46	Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <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)	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.)	No. Yards, Sacks, Sacks or Volume (circle one)	Mix Ratio or Mud Weight
Bentonite Chips	Surface	19.46	31	

6. Comments

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

Name of Person or Firm Doing Filling & Sealing Gess Soil Samples LLC	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd	Telephone Number (715) 539-3928	Comments		
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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 chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County WOOD		WI Unique Well # of Removed Well		Hicap #		Facility Name Former Tosch Motors			
Latitude / Longitude (see instructions)		Format Code		Method Code		Facility ID (FID or PWS)			
N <input type="checkbox"/> DD		<input type="checkbox"/> GPS008		<input type="checkbox"/> SCR002		License/Permit/Monitoring # MW-2BR			
W <input type="checkbox"/> DDM		<input type="checkbox"/> OTH001							
1/4 NW 1/4 NW		Section 9		Township 23 N		Range 6		<input checked="" type="checkbox"/> E	
or Gov't Lot #								<input type="checkbox"/> W	
Well Street Address 1655 Main Street						Original Well Owner			
Well City, Village or Town Rudolph						Present Well Owner Jim Simonis			
Subdivision Name						Mailing Address of Present Owner P.O. Box 56			
Lot #						City of Present Owner Rudolph		State WI	
								ZIP Code 54475	

Reason for Removal from Service: **Site closure**

WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)

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.): **49.33** Casing Diameter (in.): **2**

Lower Drillhole Diameter (in.): **8.25** Casing Depth (ft.): **49.33**

Was well annular space grouted? Yes No Unknown

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

Required Method of Placing Sealing Material

Conductor Pipe-Gravity Conductor Pipe-Pumped

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

Sealing Materials

Neat Cement Grout Concrete

Sand-Cement (Concrete) Grout 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.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Bentonite Chips		Surface	49.33	79	

6. Comments

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

Name of Person or Firm Doing Filling & Sealing Gess Soil Samples LLC		License #		Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17		Date Received		Noted By	
Street or Route W4490 Pope Rd				Telephone Number (715) 539-3928		Comments			
City Merrill		State WI		ZIP Code 54452		Signature of Person Doing Work Darrin Prentice		Date Signed 11/21/17	

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County WOOD		WI Unique Well # of Removed Well	Hicap #	Facility Name Former Tosch Motors	
Latitude / Longitude (see instructions) N <input type="checkbox"/> DD <input type="checkbox"/> GPS008 W <input type="checkbox"/> DDM <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Format Code	Method Code	Facility ID (FID or PWS)	
1/4 NW 1/4 NW		Section 9	Township 23 N	Range 6	License/Permit/Monitoring # MW-3
or Gov't Lot #		Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W		Original Well Owner	
Well Street Address 1655 Main Street			Present Well Owner Jim Simonis		
Well City, Village or Town Rudolph			Mailing Address of Present Owner P.O. Box 56		
Subdivision Name			Lot #	City of Present Owner Rudolph	State WI
				ZIP Code 54475	

Reason for Removal from Service: **Site closure** WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 4/16/02	4. Pump, Liner, Screen, Casing & Sealing Material	
<input type="checkbox"/> Water Well	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	
<input type="checkbox"/> Borehole / Drillhole		Liner(s) removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type:		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Dug	Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<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.) 19.68	Casing Diameter (in.) 2	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 19.68	If yes, was hole retapped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet)	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	
If yes, to what depth (feet)?		Required Method of Placing Sealing Material	
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
		Sealing Materials	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <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.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Bentonite Chips	Surface	19.68	32	

6. Comments

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

Name of Person or Firm Doing Filling & Sealing Gess Soil Samples LLC	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd	Telephone Number (715) 539-3928	Comments		
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466411.8 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756957.2 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-03
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. / DNR Well Number
Facility ID	Lat. _____ " Long. _____ " or	Date Well Installed 04/16/2002
Type of Well	St. Plane _____ 0 ft. N. _____ 0 ft. E. S / C / N	Well Installed By: (Person's Name and Firm) Todd Schmalfeldt
Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Boart
Distance from Waste/Source 70 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input checked="" type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	
Enf. Stds. Apply <input checked="" type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation _____ ft. Site

B. Well casing, top elevation 1138.91 ft. Site

C. Land surface elevation 1139.3 ft. Site

D. Surface seal, bottom 1138.3 ft. Site or 1.0 ft.

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock

13. Sieve analysis attached? Yes No

14. Drilling method used: Rotary 5 0
 Hollow Stem Auger 4 1
 Other

15. Drilling fluid used: Water 0 2 Air 0 1
 Drilling Mud 0 3 None 9 9

16. Drilling additives used? Yes No
 Describe _____

17. Source of water (attach analysis, if required): _____

E. Bentonite seal, top 1138.3 ft. Site or 1.0 ft.

F. Fine sand, top _____ ft. Site or _____ ft.

G. Filter pack, top 1135.3 ft. Site or 4.0 ft.

H. Screen joint, top 1134.3 ft. Site or 5.0 ft.

I. Well bottom 1119.3 ft. Site or 20.0 ft.

J. Filter pack, bottom 1119.3 ft. Site or 20.0 ft.

K. Borehole, bottom 1119.3 ft. Site or 20.0 ft.

L. Borehole, diameter 8.0 in.

M. O.D. well casing 2.37 in.

N. I.D. well casing 2.00 in.

1. Cap and lock? Yes No

2. Protective cover pipe:
 a. Inside diameter: 9.0 in.
 b. Length: 1.0 ft.
 c. Material: Steel 0 4
 Other

d. Additional protection? Yes No
 If yes, describe: _____

3. Surface seal:
 Bentonite 3 0
 Concrete 0 1
 Other

4. Material between well casing and protective pipe:
 Bentonite 3 0
 bentonite and filter pack Other

5. Annular space seal:
 a. Granular/Chipped Bentonite 3 3
 b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 3 5
 c. _____ Lbs/gal mud weight . . . Bentonite slurry 3 1
 d. _____ % Bentonite . . . Bentonite-cement grout 5 0
 e. 0.9 Ft³ volume added for any of the above
 f. How installed: Tremie 0 1
 Tremie pumped 0 2
 Gravity 0 8

6. Bentonite seal:
 a. Bentonite granules 3 3
 b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 3 2
 c. _____ Other

7. Fine sand material: Manufacturer, product name & mesh size
 a. _____
 b. Volume added _____ ft³

8. Filter pack material: Manufacturer, product name & mesh size
 a. American Materials #30
 b. Volume added 5.5 ft³

9. Well casing: Flush threaded PVC schedule 40 2 3
 Flush threaded PVC schedule 80 2 4
 Other

10. Screen material: PVC
 a. Screen Type: Factory cut 1 1
 Continuous slot 0 1
 Other

b. Manufacturer Boart Longyear
 c. Slot size: 0.010 in.
 d. Slotted length: 15.0 ft.

11. Backfill material (below filter pack): None 1 4
 Other

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

Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
 201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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.

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Verification Only of Fill and Seal

Route to DNR Bureau:

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

1. Well Location Information

County: WOOD WI Unique Well # of Removed Well: _____ Hicap #: _____
 Latitude / Longitude (see instructions): _____ N Format Code: DD Method Code: GPS008
 _____ W DDM SCR002
 _____ OTH001
 1/4 NW 1/4 NW Section: 9 Township: 23 N Range: 6 E W
 or Gov't Lot #: _____
 Well Street Address: 1655 Main Street
 Well City, Village or Town: Rudolph Well ZIP Code: _____
 Subdivision Name: _____ Lot #: _____

2. Facility / Owner Information

Facility Name: Former Tosch Motors
 Facility ID (FID or PWS): MW-4
 License/Permit/Monitoring #: _____
 Original Well Owner: _____
 Present Well Owner: Jim Simonis
 Mailing Address of Present Owner: P.O. Box 56
 City of Present Owner: Rudolph State: WI ZIP Code: 54475

3. Filled & Sealed Well / Drillhole / Borehole Information

Reason for Removal from Service: Site closure WI Unique Well # of Replacement Well: _____
 Monitoring Well Original Construction Date (mm/dd/yyyy): 4/17/02
 Water Well If a Well Construction Report is available, please attach.
 Borehole / Drillhole
 Construction Type:
 Drilled Driven (Sandpoint) Dug
 Other (specify): _____

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

Pump and piping removed? Yes No N/A
 Liner(s) removed? Yes No N/A
 Liner(s) perforated? 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): _____
 Sealing Materials:
 Neat Cement Grout Concrete
 Sand-Cement (Concrete) Grout 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: Bentonite Chips
 From (ft.): Surface To (ft.): 25.29 No. Yards, Sacks Sealant or Volume (circle one): 41 Mix Ratio or Mud Weight: _____

6. Comments

7. Supervision of Work

Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <u>Gess Soil + Samples LLC</u>	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) <u>11/21/17</u>	Date Received _____	Noted By _____	
Street or Route <u>W4490 Pope Rd</u>	Telephone Number <u>(715) 539-3928</u>	Comments _____		_____	
City <u>Merrill</u>	State <u>WI</u>	ZIP Code <u>54452</u>	Signature of Person Doing Work <u>Darrin Prentice</u>	Date Signed <u>11/21/17</u>	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466336.5 ft. <input checked="" type="checkbox"/> N. 1756921 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name MW-04
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. / DNR Well Number
Facility ID	Lat. _____ " Long. _____ " or	Date Well Installed 04/17/2002
Type of Well	St. Plane _____ 0 ft. N. _____ 0 ft. E. S / C / N	Well Installed By: (Person's Name and Firm) Todd Schmalfeldt
Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Boart
Distance from Waste/Source 80 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input checked="" type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	
Enf. Stds. Apply <input checked="" type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <u>1140.59</u> ft. Site	2. Protective cover pipe: a. Inside diameter: <u>4.0</u> in. b. Length: <u>5.0</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 0.4 Other <input type="checkbox"/>
C. Land surface elevation <u>1137.6</u> ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom _____ ft. Site or _____ ft.	3. Surface seal: Bentonite <input type="checkbox"/> 3.0 Concrete <input type="checkbox"/> 0.1 Other <input type="checkbox"/>
<div style="border: 1px solid black; padding: 5px;"> <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 checked="" type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/></p> <p>13. Sieve analysis attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>14. Drilling method used: Rotary <input type="checkbox"/> 5.0 Hollow Stem Auger <input checked="" type="checkbox"/> 4.1 Other <input type="checkbox"/></p> <p>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 type="checkbox"/> 9.9</p> <p>16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____</p> <p>17. Source of water (attach analysis, if required): _____</p> </div>	
E. Bentonite seal, top <u>1136.6</u> ft. Site or <u>1.0</u> ft.	4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 3.0 filter pack Other <input checked="" type="checkbox"/>
F. Fine sand, top <u>1132.6</u> ft. Site or <u>5.0</u> ft.	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. <u>2.7</u> 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
G. Filter pack, top <u>1131.6</u> ft. Site or <u>6.0</u> ft.	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 3.3 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 3.2 c. _____ Other <input type="checkbox"/>
H. Screen joint, top <u>1130.6</u> ft. Site or <u>7.0</u> ft.	7. Fine sand material: Manufacturer, product name & mesh size a. <u>Badger #7</u> b. Volume added <u>0.5</u> ft ³
I. Well bottom <u>1115.6</u> ft. Site or <u>22.0</u> ft.	8. Filter pack material: Manufacturer, product name & mesh size a. <u>American Materials #30</u> b. Volume added <u>5.5</u> ft ³
J. Filter pack, bottom <u>1115.6</u> ft. Site or <u>22.0</u> ft.	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"/>
K. Borehole, bottom <u>1111.6</u> ft. Site or <u>26.0</u> ft.	10. Screen material: PVC a. Screen Type: Factory cut <input checked="" type="checkbox"/> 1.1 Continuous slot <input type="checkbox"/> 0.1 Other <input type="checkbox"/>
L. Borehole, diameter <u>8.0</u> in.	b. Manufacturer <u>Boart Longyear</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>15.0</u> ft.
M. O.D. well casing <u>2.37</u> in.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 1.4 Other <input type="checkbox"/>
N. I.D. well casing <u>2.00</u> in.	

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

Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County WOOD		WI Unique Well # of Removed Well		Hicap #		Facility Name Former Tosch Motors	
Latitude / Longitude (see instructions)		Format Code		Method Code		Facility ID (FID or PWS)	
N <input type="checkbox"/> DD		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008		License/Permit/Monitoring # MW-5	
W <input type="checkbox"/> DDM		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002			
		<input type="checkbox"/> OTH001					
1/4 1/4 NW 1/4 NW		Section 9		Township 23 N		Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
or Gov'l Lot #						Original Well Owner	
Well Street Address 1655 Main Street				Present Well Owner Jim Simonis			
Well City, Village or Town Rudolph				Mailing Address of Present Owner P.O. Box 56			
Subdivision Name				City of Present Owner Rudolph		State WI	
				Lot #		ZIP Code 54475	

Reason for Removal from Service: **Site closure**

WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material	
<input checked="" type="checkbox"/> Monitoring Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		Liner(s) removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Original Construction Date (mm/dd/yyyy) 04/17/02		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If a Well Construction Report is available, please attach.		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type:		Was casing cut off below surface? <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		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify): _____		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		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	
Total Well Depth From Ground Surface (ft.) 19.75		Required Method of Placing Sealing Material:	
Casing Diameter (in.) 2		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
Lower Drillhole Diameter (in.) 8.25		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
Casing Depth (ft.) 21		Sealing Materials:	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
If yes, to what depth (feet)?		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips	
Depth to Water (feet)		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.)	No. Yards, Sacks, Sealant or Volume (or do one)	Mix Ratio or Mud Weight
Surface	21	34	

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Gess Soil + Samples LLC		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd			Telephone Number (715) 539-3928	Comments	
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466389.5 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756858.8 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-05
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. <input type="checkbox"/> DNR Well Number <input type="checkbox"/>
Facility ID	Lat. _____ ' _____ " Long. _____ ' _____ " or	Date Well Installed 04/17/2002
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Todd Schmalfeldt
Distance from Waste/Source 60 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input checked="" type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Gov. Lot Number _____
Enf. Stds. Apply <input checked="" type="checkbox"/>		Boart

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <u>1139.51</u> ft. Site	2. Protective cover pipe: a. Inside diameter: _____ in. <u>9.0</u> b. Length: _____ ft. <u>1.0</u> c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation <u>1139.9</u> ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom <u>1138.9</u> ft. Site or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
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 checked="" 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"/> 30 Other <input checked="" type="checkbox"/> <u>bentonite and filter pack</u>
13. Sieve analysis attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	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. <u>0.9</u> Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ 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>American Materials #30</u> b. Volume added <u>5.5</u> ft ³
Describe _____	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"/>
17. Source of water (attach analysis, if required): _____	10. Screen material: <u>PVC</u> a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
E. Bentonite seal, top <u>1138.9</u> ft. Site or <u>1.0</u> ft.	b. Manufacturer <u>Boart Longyear</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>15.0</u> ft.
F. Fine sand, top _____ ft. Site or _____ ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 14 Other <input checked="" type="checkbox"/> <u>filter pack</u>
G. Filter pack, top <u>1135.9</u> ft. Site or <u>4.0</u> ft.	
H. Screen joint, top <u>1134.9</u> ft. Site or <u>5.0</u> ft.	
I. Well bottom <u>1118.9</u> ft. Site or <u>21.0</u> ft.	
J. Filter pack, bottom <u>1118.9</u> ft. Site or <u>21.0</u> ft.	
K. Borehole, bottom <u>1118.9</u> ft. Site or <u>21.0</u> ft.	
L. Borehole, diameter <u>8.0</u> in.	
M. O.D. well casing <u>2.37</u> in.	
N. I.D. well casing <u>2.00</u> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature _____ Firm **MSA Professional Services, Inc.** Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County WOOD		WI Unique Well # of Removed Well		Hicap #		Facility Name Former Tosch Motors	
Latitude / Longitude (see instructions)		Format Code		Method Code		Facility ID (FID or PWS)	
N <input type="checkbox"/> DD <input type="checkbox"/> GPS008		W <input type="checkbox"/> DDM <input type="checkbox"/> SCR002		<input type="checkbox"/> OTH001		License/Permit/Monitoring # MW-7A	
1/4 NW 1/4 NW		Section 9		Township 23 N		Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
or Gov'l Lot #		Range 6		Original Well Owner		Present Well Owner Jim Simonis	
Well Street Address 1655 Main Street				Mailing Address of Present Owner P.O. Box 56			
Well City, Village or Town Rudolph				Well ZIP Code			
Subdivision Name				City of Present Owner Rudolph		State WI	
Lot #				ZIP Code 54475			

Reason for Removal from Service: **Site closure**

WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material	
<input checked="" type="checkbox"/> Monitoring Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		Liner(s) removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole		Liner(s) perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Original Construction Date (mm/dd/yyyy) 8/29/02		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If a Well Construction Report is available, please attach.		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type:		Was casing cut off below surface? <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		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify): _____		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		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	
Total Well Depth From Ground Surface (ft.) 15.5		Required Method of Placing Sealing Material	
Casing Diameter (in.) 2		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
Lower Drillhole Diameter (in.) 8.25		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
Casing Depth (ft.) 13.5		Sealing Materials	
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
If yes, to what depth (feet)?		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips	
Depth to Water (feet)		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.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	15.5	25	

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Gess Soil + Samples LLC		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd		Telephone Number (715) 539-3928		Comments	
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Toseh Motors)	Local Grid Location of Well 1466257.6 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1757075.2 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-07A
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. _____ " Long. _____ " or	Wis. Unique Well No. _____ DNR Well Number _____
Facility ID	St. Plane _____ 0 ft. N. _____ 0 ft. E. S/C/N	Date Well Installed 08/29/2002
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Randy Radke
Distance from Waste/Source 265 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input checked="" type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Boart

- A. Protective pipe, top elevation _____ ft. Site
- B. Well casing, top elevation _____ 1135.46 ft. Site
- C. Land surface elevation _____ 1132.7 ft. Site
- D. Surface seal, bottom _____ 1131.7 ft. Site or _____ 1.0 ft.

12. USCS classification of soil near screen:
 GP GM GC GW SW SP
 SM SC ML MH CL CH
 Bedrock

13. Sieve analysis attached? Yes No

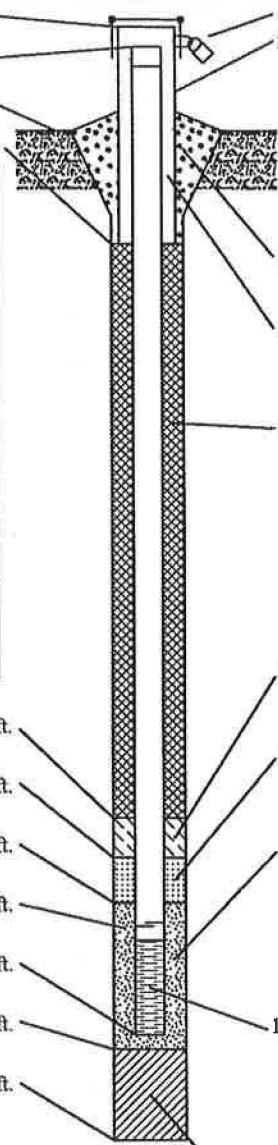
14. Drilling method used: Rotary 5 0
 Hollow Stem Auger 4 1
 _____ Other

15. Drilling fluid used: Water 0 2 Air 0 1
 Drilling Mud 0 3 None 9 9

16. Drilling additives used? Yes No

Describe _____

17. Source of water (attach analysis, if required):



- 1. Cap and lock? Yes No
- 2. Protective cover pipe:
 - a. Inside diameter: _____ 4.0 in.
 - b. Length: _____ 5.0 ft.
 - c. Material: Steel 0 4
Other
 - d. Additional protection? Yes No
If yes, describe: _____
- 3. Surface seal: Bentonite 3 0
Concrete 0 1
Other
- 4. Material between well casing and protective pipe: Bentonite 3 0
filter pack Other
- 5. Annular space seal: a. Granular/Chipped Bentonite 3 3
b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 3 5
c. _____ Lbs/gal mud weight . . . Bentonite slurry 3 1
d. _____ % Bentonite . . . Bentonite-cement grout 5 0
e. _____ Ft³ volume added for any of the above
f. How installed: Tremie 0 1
Tremie pumped 0 2
Gravity 0 8
- 6. Bentonite seal: a. Bentonite granules 3 3
b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 3 2
c. _____ Other
- 7. Fine sand material: Manufacturer, product name & mesh size
a. _____
b. Volume added _____ ft³
- 8. Filter pack material: Manufacturer, product name & mesh size
a. _____ American Materials #30
b. Volume added _____ 4 ft³
- 9. Well casing: Flush threaded PVC schedule 40 2 3
Flush threaded PVC schedule 80 2 4
Other
- 10. Screen material: _____ PVC
a. Screen Type: Factory cut 1 1
Continuous slot 0 1
Other
b. Manufacturer _____ Boart Longyear
c. Slot size: _____ 0.010 in.
d. Slotted length: _____ 10.0 ft.
- 11. Backfill material (below filter pack): None 1 4
filter pack Other

- E. Bentonite seal, top _____ 1131.7 ft. Site or _____ 1.0 ft.
- F. Fine sand, top _____ ft. Site or _____ ft.
- G. Filter pack, top _____ 1130.2 ft. Site or _____ 2.5 ft.
- H. Screen joint, top _____ 1129.7 ft. Site or _____ 3.0 ft.
- I. Well bottom _____ 1119.7 ft. Site or _____ 13.0 ft.
- J. Filter pack, bottom _____ 1118.7 ft. Site or _____ 14.0 ft.
- K. Borehole, bottom _____ 1118.7 ft. Site or _____ 14.0 ft.
- L. Borehole, diameter _____ 8.0 in.
- M. O.D. well casing _____ 2.37 in.
- N. I.D. well casing _____ 2.00 in.

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

Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
 201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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.

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County WOOD	WI Unique Well # of Removed Well	Hicap #	Facility Name Former Tosch Motors
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS)
1/4 NW 1/4 NW or Gov'l Lot #	Section 9	Township 23 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 1655 Main Street	Original Well Owner		
Well City, Village or Town Rudolph	Present Well Owner Jim Simonis		
Subdivision Name	Well ZIP Code	Mailing Address of Present Owner P.O. Box 56	
	Lot #	City of Present Owner Rudolph	State WI
		ZIP Code 54475	

Reason for Removal from Service: **Site closure**

WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)
8/29/02

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.): **40.11** Casing Diameter (in.): **2**

Lower Drillhole Diameter (in.): **8.25** Casing Depth (ft.): **40.11**

Was well annular space grouted? Yes No Unknown

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

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

Pump and piping removed? Yes No N/A

Liner(s) removed? Yes No N/A

Liner(s) perforated? 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): _____

Sealing Materials

Neat Cement Grout Concrete

Sand-Cement (Concrete) Grout 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.)	No. Yards, Sacks, Sealant or Volume (for one)	Mix Ratio or Mud Weight
Bentonite Chips		Surface	40.11	65	

6. Comments

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing Geiss Soil + Samples LLC	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	DNR Use Only	
Street or Route W4490 Pope Rd	Telephone Number (715) 539-3928	Date Received	Noted By	
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466261.5 ft. <input checked="" type="checkbox"/> N. 1757075.2 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name MW-07B
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. _____ " Long. _____ " or	Wis. Unique Well No. _____ DNR Well Number _____
Facility ID	St. Plane _____ 0 ft. N, _____ 0 ft. E. S/C/N	Date Well Installed 08/29/2002
Type of Well Well Code 72/dp	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9, T. 23 N, R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Randy Radke
Distance from Waste/ Source 260 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input checked="" type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Boart

A. Protective pipe, top elevation _____ ft. Site
B. Well casing, top elevation 1135.41 ft. Site
C. Land surface elevation 1132.7 ft. Site
D. Surface seal, bottom 1131.7 ft. Site or 1.0 ft.

12. USCS classification of soil near screen:
GP GM GC GW SW SP
SM SC ML MH CL CH
Bedrock

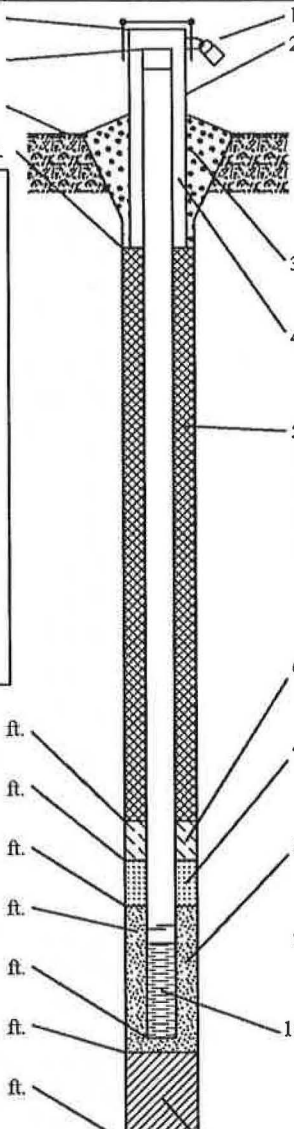
13. Sieve analysis attached? Yes No

14. Drilling method used: Rotary 50
Hollow Stem Auger 41
Other

15. Drilling fluid used: Water 02 Air 01
Drilling Mud 03 None 99

16. Drilling additives used? Yes No
Describe _____

17. Source of water (attach analysis, if required):



1. Cap and lock? Yes No
2. Protective cover pipe:
a. Inside diameter: 4.0 in.
b. Length: 7.0 ft.
c. Material: Steel 04
Other
- d. Additional protection? Yes No
If yes, describe: _____
3. Surface seal: Bentonite 30
Concrete 01
Other
4. Material between well casing and protective pipe:
Bentonite 30
filter pack Other
5. Annular space seal: a. Granular/Chipped Bentonite 33
b. _____ Lbs/gal mud weight ... Bentonite-sand slurry 35
c. _____ Lbs/gal mud weight ... Bentonite slurry 31
d. _____ % Bentonite ... Bentonite-cement grout 50
e. 10.8 Ft³ volume added for any of the above
f. How installed: Tremie 01
Tremie pumped 02
Gravity 08
6. Bentonite seal: a. Bentonite granules 33
b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 32
c. _____ Other
7. Fine sand material: Manufacturer, product name & mesh size
a. _____
b. Volume added _____ ft³
8. Filter pack material: Manufacturer, product name & mesh size
a. American Materials #30
b. Volume added 2 ft³
9. Well casing: Flush threaded PVC schedule 40 23
Flush threaded PVC schedule 80 24
Other
10. Screen material: PVC
a. Screen Type: Factory cut 11
Continuous slot 01
Other
- b. Manufacturer Boart Longyear
c. Slot size: 0.010 in.
d. Slotted length: 5.0 ft.
11. Backfill material (below filter pack): None 14
filter pack Other

E. Bentonite seal, top 1131.7 ft. Site or 1.0 ft.
F. Fine sand, top _____ ft. Site or _____ ft.
G. Filter pack, top 1102.2 ft. Site or 30.5 ft.
H. Screen joint, top 1100.2 ft. Site or 32.5 ft.
I. Well bottom 1095.2 ft. Site or 37.5 ft.
J. Filter pack, bottom 1094.7 ft. Site or 38.0 ft.
K. Borehole, bottom 1094.7 ft. Site or 38.0 ft.
L. Borehole, diameter 8.0 in.
M. O.D. well casing 2.37 in.
N. I.D. well casing 2.00 in.

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

Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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 chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County WOOD		WI Unique Well # of Removed Well		Hicsp #		Facility Name Former Tusch Motors	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 NW 1/4 NW or Gov't Lot #		Section 9		Township 23 N		Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address 1655 Main Street				Original Well Owner			
Well City, Village or Town Rudolph				Present Well Owner Jim Simonis			
Subdivision Name				Well ZIP Code		Mailing Address of Present Owner P.O. Box 56	
Lot #				City of Present Owner Rudolph		State ZIP Code WI 54475	

Reason for Removal from Service: **Site closure** WI Unique Well # of Replacement Well _____

3. Filled & Sealed Well / Drillhole / Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 8/29/02		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 checked="" 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) perforated? <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	
<input type="checkbox"/> Borehole / Drillhole				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	
Construction Type:				Did sealing material rise to surface? <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				Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
<input type="checkbox"/> Other (specify): _____				If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type:				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			
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Required Method of Placing Sealing Material			
Total Well Depth From Ground Surface (ft.) 13.24		Casing Diameter (in.) 2		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 13.24		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown				Sealing Materials			
If yes, to what depth (feet)?				<input type="checkbox"/> Neal Cement Grout <input type="checkbox"/> Concrete			
Depth to Water (feet)				<input type="checkbox"/> Sand-Cement (Concrete) Grout <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.)	No. Yards, Sacks Sealant or Volume (rounds one)	Mix Ratio or Mod Weight
Surface	13.24	21	

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Geiss Soil + Samples LLC		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd		Telephone Number (715) 539-3928		Comments	
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466450.1 ft. <input checked="" type="checkbox"/> N. 1757024.2 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name MW-08A
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. / DNR Well Number
Facility ID	Lat. _____ " Long. _____ " or	Date Well Installed 08/29/2002
Type of Well Well Code 71/dw	St. Plane _____ 0 ft. N. _____ 0 ft. E. S/C/N	Well Installed By: (Person's Name and Firm) Randy Radke
Distance from Waste/ Source 140 ft.	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N, R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Boart
Enf. Stds. Apply <input checked="" type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input checked="" type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Gov. Lot Number

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation 1140.70 ft. Site	2. Protective cover pipe: a. Inside diameter: 9.0 in. b. Length: 1.0 ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation 1140.9 ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom 1139.9 ft. Site or 1.0 ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
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 checked="" 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"/> 30 Other <input checked="" type="checkbox"/> bentonite and filter pack
13. Sieve analysis attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	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. 0.9 Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. American Materials #30 b. Volume added 2.5 ft ³
17. Source of water (attach analysis, if required):	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"/>
E. Bentonite seal, top 1139.9 ft. Site or 1.0 ft.	10. Screen material: PVC a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. Site or _____ ft.	b. Manufacturer Boart Longyear c. Slot size: 0.010 in. d. Slotted length: 10.0 ft.
G. Filter pack, top 1137.9 ft. Site or 3.0 ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
H. Screen joint, top 1137.4 ft. Site or 3.5 ft.	
I. Well bottom 1127.4 ft. Site or 13.5 ft.	
J. Filter pack, bottom 1126.9 ft. Site or 14.0 ft.	
K. Borehole, bottom 1126.9 ft. Site or 14.0 ft.	
L. Borehole, diameter 8.0 in.	
M. O.D. well casing 2.37 in.	
N. I.D. well casing 2.00 in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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.

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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 chs. NR 141 and 812, 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 DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County WOOD		WI Unique Well # of Removed Well		Hicap #		Facility Name Former Tosch Motors	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS)	
1/4 or Gov't Lot # 1/4 NW 1/4 NW		Section 9		Township 23 N		License/Permit/Monitoring # MW-8B	
Well Street Address 1655 Main Street		Range 6		<input checked="" type="checkbox"/> E <input type="checkbox"/> W		Original Well Owner	
Well City, Village or Town Rudolph		Well ZIP Code		Present Well Owner Jim Simonis		Mailing Address of Present Owner P.O. Box 56	
Subdivision Name		Lot #		City of Present Owner Rudolph		State WI	
Reason for Removal from Service Site closure		WI Unique Well # of Replacement Well		ZIP Code 54475			

3. Filled & Sealed Well / Drillhole / Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy)		Pump and piping removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input 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 type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole				Liner(s) perforated?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type:				Screen removed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Drilled		<input type="checkbox"/> Driven (Sandpoint)		Casing left in place?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Other (specify): _____		<input type="checkbox"/> Dug		Was casing cut off below surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:				Did sealing material rise to surface?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Bedrock		Did material settle after 24 hours?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) 50		Casing Diameter (in.) 2		If yes, was hole retopped?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)		If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				Required Method of Placing Sealing Material			
If yes, to what depth (feet)?		Depth to Water (feet)		<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
				<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
5. Material Used to Fill Well / Drillhole				Sealing Materials			
From (ft.)		To (ft.)		No. Yards, Sacks Sealant or Volume (circle one)		Mix Ratio or Mud Weight	
Bentonite grout - quantity unknown		Surface		50		bentonite grout	

6. Comments

This well was accidentally filled w. grout during adjacent horizontal drilling to install water system. AE

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) unknown	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City		State	ZIP Code	Signature of Person Doing Work	
				Date Signed	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466445.3 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1757023.9 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-08B
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. _____ " Long. _____ " or	Wis. Unique Well No. _____ DNR Well Number _____
Facility ID	St. Plane _____ 0 ft. N. _____ 0 ft. E. S/C/N	Date Well Installed 02/19/2003
Type of Well	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9, T. 23 N, R. 6 <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Jim B
Distance from Waste/Source 140 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input checked="" type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Gov. Lot Number _____
Well Code 72/dp		Boart

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation 1140.27 ft. Site	2. Protective cover pipe: a. Inside diameter: _____ 9.0 in. b. Length: _____ 1.0 ft. c. Material: Steel <input checked="" type="checkbox"/> 0.4 Other <input type="checkbox"/>
C. Land surface elevation 1140.8 ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom 1139.8 ft. Site or 1.0 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: 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 checked="" 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 bentonite and filter pack Other <input checked="" type="checkbox"/>
13. Sieve analysis attached? <input type="checkbox"/> Yes <input 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. 10.8 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 checked="" type="checkbox"/> 5.0 Hollow Stem Auger <input 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 type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input 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 type="checkbox"/> 9.9	7. Fine sand material: Manufacturer, product name & mesh size a. _____ Badger #7 b. Volume added _____ 0.5 ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. _____ American Materials #30 b. Volume added _____ 1.5 ft ³
17. Source of water (attach analysis, if required): _____	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"/>
E. Bentonite seal, top 1139.8 ft. Site or 1.0 ft.	10. Screen material: PVC a. Screen Type: Factory cut <input checked="" type="checkbox"/> 1.1 Continuous slot <input type="checkbox"/> 0.1 Other <input type="checkbox"/>
F. Fine sand, top 1099.8 ft. Site or 41.0 ft.	b. Manufacturer _____ Boart Longyear c. Slot size: _____ 0.010 in. d. Slotted length: _____ 5.0 ft.
G. Filter pack, top 1097.8 ft. Site or 43.0 ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 1.4 filter pack Other <input checked="" type="checkbox"/>
H. Screen joint, top 1095.8 ft. Site or 45.0 ft.	
I. Well bottom 1090.8 ft. Site or 50.0 ft.	
J. Filter pack, bottom 1088.8 ft. Site or 52.0 ft.	
K. Borehole, bottom 1088.8 ft. Site or 52.0 ft.	
L. Borehole, diameter 8.0 in.	
M. O.D. well casing 2.37 in.	
N. I.D. well casing 2.00 in.	

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

Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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<input type="checkbox"/> Verification Only of Fill and Seal	Route to DNR Bureau:	
	<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: _____

1. Well Location Information			2. Facility / Owner Information		
County WOOD	WI Unique Well # of Removed Well	Hicap #	Facility Name Former Tosch Motors		
Latitude / Longitude (see instructions) N <input type="checkbox"/> DD <input type="checkbox"/> GPS008 W <input type="checkbox"/> DDM <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Format Code	Facility ID (FID or PWS)		
1/4 1/4 NW 1/4 NW	Section 9	Township 23 N	License/Permit/Monitoring # MW-9		
or Gov't Lot #	Range 6	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner		
Well Street Address 1655 Main Street			Present Well Owner Jim Simonis		
Well City, Village or Town Rudolph		Well ZIP Code	Mailing Address of Present Owner P.O. Box 56		
Subdivision Name		Lot #	City of Present Owner Rudolph		State WI ZIP Code 54475

Reason for Removal from Service: Site closure	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material	
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3. Filled & Sealed Well / Drillhole / Borehole Information			<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) 8/29/02	Liner(s) removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated?	<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 out off below surface?
<input type="checkbox"/> Other (specify): _____			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type:		Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.): 10.19		Casing Diameter (in.): 2	If yes, was hole retapped?
Lower Drillhole Diameter (in.): 8.25		Casing Depth (ft.): 10.19	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		If bentonite chips were used, were they hydrated with water from a known safe source?	
If yes, to what depth (feet)?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Depth to Water (feet)		Required Method of Placing Sealing Material	
		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
		Sealing Materials	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <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.)	No. Yards, Sacks Sealant or Volume (tons) one	Mix Ratio or Mud Weight
Bentonite Chips		Surface	10.19	16	

6. Comments					
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7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Gess Soil + Samples LLC	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By	
Street or Route W4490 Pope Rd		Telephone Number (715) 539-3928	Comments		
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466426 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756830 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-09
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. DNR Well Number
Facility ID	Lat. _____ Long. _____ or St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed 08/29/2002
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Well Installed By: (Person's Name and Firm) Randy Radke
Distance from Waste/Source 140 ft.	Location of Well Relative to Waste/Source u <input checked="" type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Boart

A. Protective pipe, top elevation _____ ft. Site
B. Well casing, top elevation 1142.18 ft. Site
C. Land surface elevation 1142.6 ft. Site
D. Surface seal, bottom 1141.6 ft. Site or 1.0 ft.

12. USCS classification of soil near screen:
GP GM GC GW SW SP
SM SC ML MH CL CH
Bedrock

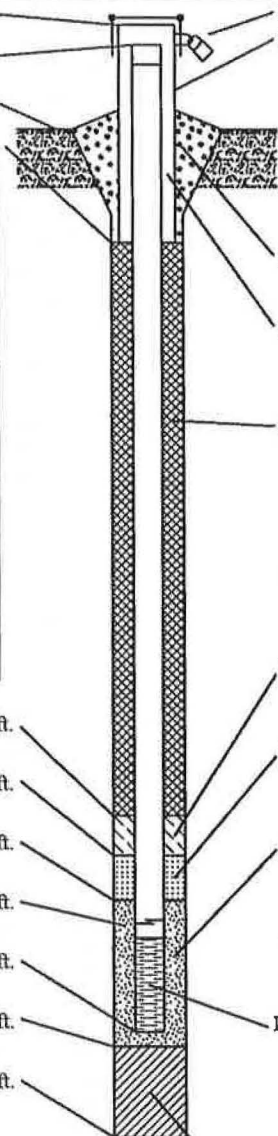
13. Sieve analysis attached? Yes No

14. Drilling method used: Rotary 5 0
Hollow Stem Auger 4 1
Other

15. Drilling fluid used: Water 0 2 Air 0 1
Drilling Mud 0 3 None 9 9

16. Drilling additives used? Yes No
Describe _____

17. Source of water (attach analysis, if required):



1. Cap and lock? Yes No

2. Protective cover pipe:
a. Inside diameter: 9.0 in.
b. Length: 1.0 ft.
c. Material: Steel 0 4
Other

d. Additional protection? Yes No
If yes, describe: _____

3. Surface seal: Bentonite 3 0
Concrete 0 1
Other

4. Material between well casing and protective pipe:
Bentonite 3 0
bentonite and filter pack Other

5. Annular space seal: a. Granular/Chipped Bentonite 3 3
b. _____ Lbs/gal mud weight . . . Bentonite-sand slurry 3 5
c. _____ Lbs/gal mud weight . . . Bentonite slurry 3 1
d. _____ % Bentonite . . . Bentonite-cement grout 5 0
e. 0.9 Ft³ volume added for any of the above
f. How installed: Tremie 0 1
Tremie pumped 0 2
Gravity 0 8

6. Bentonite seal: a. Bentonite granules 3 3
b. 1/4 in. 3/8 in. 1/2 in. Bentonite chips 3 2
c. _____ Other

7. Fine sand material: Manufacturer, product name & mesh size
a. _____
b. Volume added _____ ft³

8. Filter pack material: Manufacturer, product name & mesh size
a. American Materials #30
b. Volume added 2.5 ft³

9. Well casing: Flush threaded PVC schedule 40 2 3
Flush threaded PVC schedule 80 2 4
Other

10. Screen material: PVC
a. Screen Type: Factory cut 1 1
Continuous slot 0 1
Other

b. Manufacturer Boart Longyear
c. Slot size: 0.010 in.
d. Slotted length: 10.0 ft.

11. Backfill material (below filter pack): None 1 4
Other

E. Bentonite seal, top 1141.6 ft. Site or 1.0 ft.
F. Fine sand, top _____ ft. Site or _____ ft.
G. Filter pack, top 1138.6 ft. Site or 4.0 ft.
H. Screen joint, top 1137.6 ft. Site or 5.0 ft.
I. Well bottom 1127.6 ft. Site or 15.0 ft.
J. Filter pack, bottom 1127.6 ft. Site or 15.0 ft.
K. Borehole, bottom 1127.6 ft. Site or 15.0 ft.
L. Borehole, diameter 8.0 in.
M. O.D. well casing 2.37 in.
N. I.D. well casing 2.00 in.

I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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Verification Only of Fill and Seal

Route to DNR Bureau:

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

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

County WOOD		WI Unique Well # of Removed Well		Hicap #		Facility Name Former Tosch Motors			
Latitude / Longitude (see instructions) N <input type="checkbox"/> DD <input type="checkbox"/> GPS008 W <input type="checkbox"/> DDM <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001			Format Code		Method Code		Facility ID (FID or PWS) MW-10		
1/4 NW 1/4 NW		Section 9		Township 23 N		Range 6 <input checked="" type="checkbox"/> E <input type="checkbox"/> W		License/Permit/Monitoring #	
Well Street Address 1655 Main Street					Original Well Owner				
Well City, Village or Town Rudolph					Present Well Owner Jim Simonis				
Subdivision Name					Well ZIP Code		Mailing Address of Present Owner P.O. Box 56		
City of Present Owner Rudolph					State WI		ZIP Code 54475		

Reason for Removal from Service: **Site closure** WI Unique Well # of Replacement Well: _____

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

<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) 8/30/02		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 checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole				Liner(s) perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Construction Type:				Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug				Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<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	
Formation Type:				Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) 12.75		Casing Diameter (in.) 2		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 15		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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown				Required Method of Placing Sealing Material	
If yes, to what depth (feet)?		Depth to Water (feet)		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
				<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
				Sealing Materials	
				<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
				<input type="checkbox"/> Sand-Cement (Concrete) Grout <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.)	No. Yards, Sacks Sealed or Volume (cubic yds)	Mix Ratio or Mud Weight
Bentonite Chips		Surface	15	24	

6. Comments

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

Name of Person or Firm Doing Filling & Sealing Gess Soil + Samples LLC		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 11/21/17	Date Received	Noted By
Street or Route W4490 Pope Rd			Telephone Number (715) 539-3928	Comments	
City Merrill	State WI	ZIP Code 54452	Signature of Person Doing Work Darrin Prentice	Date Signed 11/21/17	

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466268.7 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756862.1 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-10
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. / DNR Well Number
Facility ID	Lat. _____ Long. _____ or St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed 08/30/2002
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Installed By: (Person's Name and Firm) Randy Radke
Distance from Waste/Source 170 ft.	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input checked="" type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Boart

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <u>1135.28</u> ft. Site	2. Protective cover pipe: a. Inside diameter: <u>9.0</u> in. b. Length: <u>1.0</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation <u>1135.8</u> ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom <u>1134.8</u> ft. Site or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
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 checked="" 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"/> 30 bentonite and filter pack Other <input checked="" type="checkbox"/>
13. Sieve analysis attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	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. <u>0.5</u> Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input checked="" type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. <u>American Materials #30</u> b. Volume added <u>3</u> ft ³
17. Source of water (attach analysis, if required): _____	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"/>
E. Bentonite seal, top <u>1134.8</u> ft. Site or <u>1.0</u> ft.	10. Screen material: <u>PVC</u> a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. Site or _____ ft.	b. Manufacturer <u>Boart Longyear</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>10.0</u> ft.
G. Filter pack, top <u>1133.3</u> ft. Site or <u>2.5</u> ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
H. Screen joint, top <u>1132.8</u> ft. Site or <u>3.0</u> ft.	
I. Well bottom <u>1122.8</u> ft. Site or <u>13.0</u> ft.	
J. Filter pack, bottom <u>1121.8</u> ft. Site or <u>14.0</u> ft.	
K. Borehole, bottom <u>1120.8</u> ft. Site or <u>15.0</u> ft.	
L. Borehole, diameter <u>8.0</u> in.	
M. O.D. well casing <u>2.37</u> in.	
N. I.D. well casing <u>2.00</u> in.	

I hereby certify that the information on this form is true and correct to the best of my knowledge.
Signature _____ Firm MSA Professional Services, Inc. Tel: (920)887-4242, (800)522-6330
201 Corporate Drive Beaver Dam, WI 53916 Fax: (920)887-4250

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.

Route To: Watershed/Wastewater Waste Management
Remediation/Redevelopment Other

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name Simonis Property (Former Tosch Motors)	Local Grid Location of Well 1466469 ft. <input checked="" type="checkbox"/> N. <input type="checkbox"/> S. 1756742 ft. <input checked="" type="checkbox"/> E. <input type="checkbox"/> W.	Well Name MW-11
Facility License, Permit or Monitoring No.	Local Grid Origin <input checked="" type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	Wis. Unique Well No. DNR Well Number
Facility ID	Lat. _____ Long. _____ or St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed 02/20/2003
Type of Well Well Code 71/dw	Section Location of Waste/Source NW 1/4 of NW 1/4 of Sec. 9 T. 23 N. R. 6 <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Installed By: (Person's Name and Firm) Jim B
Distance from Waste/Source 160 ft.	Location of Well Relative to Waste/Source u <input checked="" type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known	Boart

A. Protective pipe, top elevation _____ ft. Site	1. Cap and lock? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation <u>1142.99</u> ft. Site	2. Protective cover pipe: a. Inside diameter: <u>9.0</u> in. b. Length: <u>1.0</u> ft. c. Material: Steel <input checked="" type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation <u>1143.4</u> ft. Site	d. Additional protection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom <u>1142.4</u> ft. Site or <u>1.0</u> ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input checked="" type="checkbox"/> 01 Other <input type="checkbox"/>
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 checked="" 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"/> 30 bentonite and filter pack Other <input checked="" type="checkbox"/>
13. Sieve analysis attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	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. <u>.9</u> Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input checked="" type="checkbox"/> 08
14. Drilling method used: Rotary <input checked="" type="checkbox"/> 50 Hollow Stem Auger <input type="checkbox"/> 41 Other <input type="checkbox"/>	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input type="checkbox"/> 99	7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. <u>American Materials #30</u> b. Volume added <u>3.5</u> ft ³
17. Source of water (attach analysis, if required): _____	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"/>
E. Bentonite seal, top <u>1142.4</u> ft. Site or <u>1.0</u> ft.	10. Screen material: <u>PVC</u> a. Screen Type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. Site or _____ ft.	b. Manufacturer <u>Boart Longyear</u> c. Slot size: <u>0.010</u> in. d. Slotted length: <u>15.0</u> ft.
G. Filter pack, top <u>1139.4</u> ft. Site or <u>4.0</u> ft.	11. Backfill material (below filter pack): <u>filter pack then hole plug</u> None <input type="checkbox"/> 14 Other <input checked="" type="checkbox"/>
H. Screen joint, top <u>1138.4</u> ft. Site or <u>5.0</u> ft.	
I. Well bottom <u>1123.4</u> ft. Site or <u>20.0</u> ft.	
J. Filter pack, bottom <u>1121.4</u> ft. Site or <u>22.0</u> ft.	
K. Borehole, bottom <u>1117.4</u> ft. Site or <u>26.0</u> ft.	
L. Borehole, diameter <u>8.0</u> in.	
M. O.D. well casing <u>2.37</u> in.	
N. I.D. well casing <u>2.00</u> in.	

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