

**From:** Andy Delforge <adelforge@reiengineering.com>  
**Sent:** Friday, August 30, 2024 11:02 AM  
**To:** Schultz, Josie M - DNR; Ken Juza  
**Subject:** V&L Stripping MW Abandonment  
**Attachments:** V&L-MW Abd.pdf


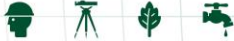
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Hi Josie -attached are the abandonment forms for V&L Stripping. The SVE piping was grouted with bentonite slurry. Let me know if you have any questions or want to discuss.

Thank you,



Andrew R. Delforge, P.G. – Senior Hydrogeologist

 <p><b>REI</b> CIVIL &amp; ENVIRONMENTAL ENGINEERING, SURVEYING</p> <p>4080 N. 20th Avenue Wausau, WI 54401</p> <p><a href="http://REIengineering.com">REIengineering.com</a></p>	<p><b>Andrew R. Delforge, P.G.</b> Senior Hydrogeologist <a href="mailto:Adelforge@REIengineering.com">Adelforge@REIengineering.com</a></p>
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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW100</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>564 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>8/26/98</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13.5</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3.5</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.94</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

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
3/8" Holeplug Bentonite	Surface	13.5	0.3 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

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**Route to DNR Bureau:**

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

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

County <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW200</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>564 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>8/26/98</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13.5</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3.5</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>8.09</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13.5	0.3 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Kal Disner</i>	Date Signed <b>8/3/24</b>

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**Route to DNR Bureau:**

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

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

County <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW300</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>564 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>8/26/98</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13.5</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3.5</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>8.24</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13.5	0.3 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

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**Route to DNR Bureau:**

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

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

County <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW600r</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>564 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/28/19</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>12.32</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2.32</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.13</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

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
3/8" Holeplug Bentonite	Surface	12.32	0.27 ft3	

**6. Comments**

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

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Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Kal Osawa</i>	Date Signed <b>8/3/24</b>

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

**Verification Only of Fill and Seal**

**1. Well Location Information**

County <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW800</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>564 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

**2. Facility / Owner Information**

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/28/19</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>11.93</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>1.93</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.74</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
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): _____	

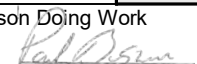
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Concrete		
<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Bentonite Chips		
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input checked="" type="checkbox"/> Bentonite 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
3/8" Holeplug Bentonite	Surface	11.93	0.26 ft3	

**6. Comments**

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	DNR Use Only	
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>		Date Received	Noted By
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work 	Date Signed <b>8/3/24</b>	

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW1000</b>	
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	
¼ / ¼ or Gov't Lot #	¼	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>869 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Randy Fameree</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>4/24/97</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>12.61</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2.61</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.94</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	12.61	0.27 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW1500</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>				
Subdivision Name			Well ZIP Code <b>54303</b>	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/28/19</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>12.54</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2.54</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.61</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	12.54	0.27ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/30/24</b>



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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW2000r</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>856 Mather St.</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>2/5/20</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>12.51</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2.51</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.19</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

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
3/8" Holeplug Bentonite	Surface	12.51	0.27 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW2100</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>Unaddressed City Right of Way Adjacent to 865 Mather St</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>11/15/02</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13.5</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3.5</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>7.43</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

**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
<i>For Monitoring Wells and Monitoring Well Boreholes Only:</i>	
<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
3/8" Holeplug Bentonite	Surface	13.5	0.29 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>MW3200</b>	
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	
¼ / ¼ or Gov't Lot #	¼	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>3/20/03</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13.5</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3.5</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>5.43</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13.5	0.29 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>PZ1700</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>				
Subdivision Name			Well ZIP Code <b>54303</b>	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>11/15/02</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>29</b>	Casing Diameter (in.) <b>2</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>24</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>6.91</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

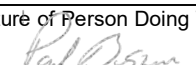
Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)	<input type="checkbox"/> Other (Explain): _____

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
3/8" Holeplug Bentonite	Surface	29	0.63 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work 	Date Signed <b>8/3/24</b>

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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>SVE1</b>	
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	
1/4 / 1/4 or Gov't Lot #	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>				
Well ZIP Code <b>54303</b>				
Subdivision Name				
Lot #				
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>2004</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13</b>	Casing Diameter (in.) <b>4</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>Dry</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13	1.13 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>SVE2</b>
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
1/4 / 1/4 or Gov't Lot #	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>			
Well City, Village or Town <b>Green Bay</b>		Well ZIP Code <b>54303</b>	
Subdivision Name		Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____	

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>2004</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13</b>	Casing Diameter (in.) <b>4</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>Dry</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13	1.13 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Kal Osawa</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>SVE3</b>
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
1/4 / 1/4 or Gov't Lot #	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>			
Well City, Village or Town <b>Green Bay</b>		Well ZIP Code <b>54303</b>	
Subdivision Name		Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____	

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>2007</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13</b>	Casing Diameter (in.) <b>4</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>Dry</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13	1.13 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

**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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>SVE4</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>2007</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>13</b>	Casing Diameter (in.) <b>4</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>3</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>Dry</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			

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
3/8" Holeplug Bentonite	Surface	13	1.13 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>



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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>TW900</b>	
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	
1/4 / 1/4 or Gov't Lot #	1/4	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/10/02</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (specify): <u>Hand Auger</u>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>9</b>	Casing Diameter (in.) <b>1</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>Dry</b>

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
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
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
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 type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout	
<input checked="" 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
Granular Bentonite	Surface	9	0.05 ft3	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed <b>8/3/24</b>

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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 <b>Brown</b>		WI Unique Well # of Removed Well _____	Hicap # <b>TW1400</b>	
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	
¼ / ¼ or Gov't Lot #	¼	Section	Township <b>N</b>	Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address <b>864 Mather Street</b>				
Well City, Village or Town <b>Green Bay</b>			Well ZIP Code <b>54303</b>	
Subdivision Name			Lot #	
Reason for Removal from Service <b>Site Closure</b>		WI Unique Well # of Replacement Well _____		

Facility Name <b>V&amp;L Stripping</b>		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner <b>Ken Juza</b>		
Present Well Owner <b>Ken Juza</b>		
Mailing Address of Present Owner <b>1478 Norfield Road</b>		
City of Present Owner <b>Suamico</b>	State <b>WI</b>	ZIP Code <b>54173</b>

**3. Filled & Sealed Well / Drillhole / Borehole Information**

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <b>10/10/02</b>
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input checked="" type="checkbox"/> Other (specify): <u>Geoprobe</u>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) <b>12</b>	Casing Diameter (in.) <b>1</b>
Lower Drillhole Diameter (in.)	Casing Depth (ft.) <b>2</b>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) <b>8.31</b>

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

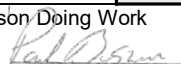
Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
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 type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout	
<input checked="" 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
Granular Bentonite	Surface	12	0.07 ft <sup>3</sup>	

**6. Comments**

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

Name of Person or Firm Doing Filling & Sealing <b>Paul Bushar - REI</b>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <b>8/29/24</b>	Date Received	Noted By
Street or Route <b>4080 North 20th Ave</b>		Telephone Number <b>( 715 ) 675-9784</b>	Comments	
City <b>Wausau</b>	State <b>WI</b>	ZIP Code <b>54401</b>	Signature of Person Doing Work 	Date Signed <b>8/3/24</b>