

Letter of Transmittal

Submitted to:

Carrie Stoltz

WI Dept. of Natural Resources
107 Sutliff Avenue
Rhinelander WI 54501

Date:

1/21/2020

Attached

Job:

Nep's Bar

Under Separate Cover

Contents:

Well Abandonment Forms
BRRTS #: 03-04-000980

Remarks:

Attached are the well abandonment forms for the above site as requested in your "Remaining Actions Needed...." letter dated 12/20/19. The wells have been properly abandoned and no investigative waste remains on-site. Following your review of these forms, please send the "Final Closure" letter to our client and copy METCO.

If you have any questions please call or email.

Signed: Jason Powell

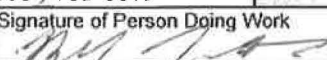
cc: Thomas Sutarik - Client

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

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

Verification Only of Fill and Seal

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

1. Well Location Information				2. Facility / Owner Information			
County BAYFIELD		WI Unique Well # of Removed Well WA107		Hicap #		Facility Name Nep's Bar	
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N 91 ° 4.58 ' W		Method Code (see instructions)		Facility ID (FID or PWS) 804035210		License/Permit/Monitoring #	
¼ / ¼ NE ¼ NE or Gov't Lot #		Section 11	Township 47 N	Range 6	Original Well Owner Thomas Sutarik		
Well Street Address 23885 County Highway G		Well City, Village or Town Pilsen		Well ZIP Code 54806-		Present Well Owner Thomas Sutarik	
Subdivision Name		Lot #		City of Present Owner Ashland		State WI	ZIP Code 54806-
Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well		4. Pump, Liner, Screen, Casing & Sealing Material			
3. Well / Drillhole / Borehole Information				Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 1/26/2018		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		If a Well Construction Report is available, please attach.		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Total Well Depth From Ground Surface (ft.) 20		Casing Diameter (in.) 2		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 10		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
If yes, to what depth (feet)? 6		Depth to Water (feet) 2.89		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
				If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
5. Material Used To Fill Well / Drillhole				Required Method of Placing Sealing Material			
Bentonite Chips				<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
				<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>			
				Sealing Materials			
				<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)			
				<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "			
				<input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips			
				For Monitoring Wells and Monitoring Well Boreholes Only:			
				<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout			
				<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry			
				From (ft.)	To (ft.)	Lbs	
				Surface	20	32	
6. Comments							
Monitoring Well MW-1R							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO		License #		Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020		Date Received	
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879		Signature of Person Doing Work 		Noted By	
City La Crosse		State WI		ZIP Code 54603-		Date Signed 1/15/2020	

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


<input type="checkbox"/> Verification Only of Fill and Seal	Route to:		
	<input type="checkbox"/> Drinking Water	<input type="checkbox"/> Watershed/Wastewater	<input checked="" type="checkbox"/> Remediation/Redevelopment
	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

1. Well Location Information				2. Facility / Owner Information			
County BAYFIELD		WI Unique Well # of Removed Well VN068	Hicap #	Facility Name Nep's Bar		Facility ID (FID or PWS) 804035210	
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N		Method Code (see instructions)		License/Permit/Monitoring #			
91 ° 4.58 ' W				Original Well Owner Thomas Sutarik			
1/4 NE	1/4 NE	Section 11	Township 47 N	Range 6	Present Well Owner Thomas Sutarik		
or Gov't Lot #						Mailing Address of Present Owner 25850 County Highway G	
Well Street Address 23885 County Highway G				City of Present Owner Ashland			
Well City, Village or Town Pilsen				Well ZIP Code 54806-		State WI	ZIP Code 54806-
Subdivision Name				Lot #			

Reason For Removal From Service Sampling Complete	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material					
3. Well / Drillhole / Borehole Information		Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A		
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 9/26/2013	Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A		
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Screen removed?	<input 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		
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)	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): _____	<input type="checkbox"/> Dug	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 checked="" 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.) 20	Casing Diameter (in.) 2	Required Method of Placing Sealing Material					
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 5	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped					
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 9.03	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): Gravity					
If yes, to what depth (feet)? 3		Sealing Materials					
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)					
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "					
		<input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips					
		For Monitoring Wells and Monitoring Well Boreholes Only:					
		<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout					
		<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry					

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs
Bentonite Chips	Surface	20	32

6. Comments
Monitoring Well MW-2

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By	
Street or Route 709 Gillette St., Ste 3	Telephone Number (608) 781-8879	Comments			
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 1/15/2020	

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Verification Only of Fill and Seal

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

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

County: **BAYFIELD** WI Unique Well # of Removed Well: **VN069** Hicap #

Latitude / Longitude (Degrees and Minutes):
46 ° **34.4** ' N
91 ° **4.58** ' W

Method Code (see instructions)

1/4 NE 1/4 NE Section: **11** Township: **47 N** Range: **6** E W

Well Street Address: **23885 County Highway G**

Well City, Village or Town: **Pilsen** Well ZIP Code: **54806-**

Subdivision Name: _____ Lot #: _____

Facility Name: **Nep's Bar**

Facility ID (FID or PWS): **804035210**

License/Permit/Monitoring #

Original Well Owner: **Thomas Sutarik**

Present Well Owner: **Thomas Sutarik**

Mailing Address of Present Owner: **25850 County Highway G**

City of Present Owner: **Ashland** State: **WI** ZIP Code: **54806-**

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

3. Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy): **9/26/2013**
 Water Well
 Borehole / Drillhole If a Well Construction Report is available, please attach.

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
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

Formation Type:

Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.): **20** Casing Diameter (in.): **2**

Lower Drillhole Diameter (in.): **8.25** Casing Depth (ft.): **5**

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? **3** Depth to Water (feet): **5.72**

Required Method of Placing Sealing Material

Conductor Pipe-Gravity Conductor Pipe-Pumped
 Screened & Poured (Bentonite Chips) Other (Explain): **Gravity**

Sealing Materials

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

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips Bentonite - Cement Grout
 Granular Bentonite Bentonite - Sand Slurry

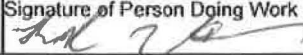
5. Material Used To Fill Well / Drillhole

	From (ft.)	To (ft.)	Lbs
Bentonite Chips	Surface	20	32

6. Comments

Monitoring Well MW-3

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

Name of Person or Firm Doing Filling & Sealing: Rob Wilmoth - METCO	License #: _____	Date of Filling & Sealing (mm/dd/yyyy): 1/14/2020	Date Received: _____	Noted By: _____
Street or Route: 709 Gillette St., Ste #3	Telephone Number: (608) 781-8879	Comments: _____		
City: La Crosse	State: WI	ZIP Code: 54603-	Signature of Person Doing Work: 	Date Signed: 1/15/2020

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Verification Only of Fill and Seal

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

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

County BAYFIELD	WI Unique Well # of Removed Well VN070	Hicap #	Facility Name Ncp's Bar
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N 91 ° 4.58 ' W		Method Code (see instructions)	Facility ID (FID or PWS) 804035210
1/4 1/4 NE or Gov't Lot #	Section 11	Township 47 N	Range 6
Well Street Address 23885 County Highway G		Original Well Owner Thomas Sutarik	
Well City, Village or Town Pilsen		Present Well Owner Thomas Sutarik	
Subdivision Name		Mailing Address of Present Owner 25850 County Highway G	
Well ZIP Code 54806-		City of Present Owner Ashland	State WI
Lot #		ZIP Code 54806-	

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

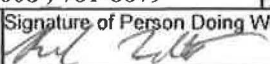
WI Unique Well # of Replacement Well: _____

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

<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 9/26/2013	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input 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): _____		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): Gravity
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips
Total Well Depth From Ground Surface (ft.) 20		Casing Diameter (in.) 2
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 5
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		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
If yes, to what depth (feet)? 3		Depth to Water (feet) 3.17

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs	
Bentonite Chips	Surface	20	32	

6. Comments
Monitoring Well MW-4

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 1/15/2020

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<input type="checkbox"/> Verification Only of Fill and Seal	Route to:	<input type="checkbox"/> Drinking Water	<input type="checkbox"/> Watershed/Wastewater	<input checked="" type="checkbox"/> Remediation/Redevelopment
		<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

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

County BAYFIELD	WI Unique Well # of Removed Well _____ VN071_	Hicap #	Facility Name Nep's Bar												
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N		Facility ID (FID or PWS) 804035210													
91 ° 4.58 ' W		License/Permit/Monitoring #													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1/4 1/4 NE</td> <td>1/4 NE</td> <td>Section</td> <td>Township</td> <td>Range</td> <td><input type="checkbox"/> E</td> </tr> <tr> <td>or Gov't Lot #</td> <td></td> <td>11</td> <td>47 N</td> <td>6</td> <td><input checked="" type="checkbox"/> W</td> </tr> </table>	1/4 1/4 NE	1/4 NE	Section	Township	Range	<input type="checkbox"/> E	or Gov't Lot #		11	47 N	6	<input checked="" type="checkbox"/> W	Original Well Owner Thomas Sutarik		Present Well Owner Thomas Sutarik
1/4 1/4 NE	1/4 NE	Section	Township	Range	<input type="checkbox"/> E										
or Gov't Lot #		11	47 N	6	<input checked="" type="checkbox"/> W										
Well Street Address 23885 County Highway G		Mailing Address of Present Owner 25850 County Highway G													
Well City, Village or Town Pilsen		Well ZIP Code 54806-													
Subdivision Name		City of Present Owner Ashland													
		State WI													
		ZIP Code 54806-													

Reason For Removal From Service Sampling Complete	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material	
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<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) 9/26/2013	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 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 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): _____		<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 checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>
Total Well Depth From Ground Surface (ft.) 20	Casing Diameter (in.) 2
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 5
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)? 3	Depth to Water (feet) 2.32

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs
Bentonite Chips	Surface	20	32

6. Comments
Monitoring Well MW-5

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By	
Street or Route 709 Gillette St., Ste #3			Telephone Number (608) 781-8879		Comments
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 		Date Signed 1/15/2020

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Verification Only of Fill and Seal

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

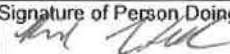
1. Well Location Information				2. Facility / Owner Information			
County BAYFIELD		WI Unique Well # of Removed Well _____ VP370_		Hicap #		Facility Name Nep's Bar	
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N 91 ° 4.58 ' W		Method Code (see instructions)		Facility ID (FID or PWS) 804035210		License/Permit/Monitoring #	
¼ / ¼ NE ¼ NE or Gov't Lot #		Section 11	Township 47 N	Range 6	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Original Well Owner Thomas Sutarik	
Well Street Address 23885 County Highway G				Present Well Owner Thomas Sutarik			
Well City, Village or Town Pilsen				Mailing Address of Present Owner 25850 County Highway G			
Subdivision Name				Well ZIP Code 54806-		City of Present Owner State ZIP Code Ashland WI 54806-	

Reason For Removal From Service Sampling Complete		WI Unique Well # of Replacement Well	
3. Well / Drillhole / Borehole Information			
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) 4/13/2016	
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.) 20		Casing Diameter (in.) 2	
Lower Drillhole Diameter (in.) 8.25		Casing Depth (ft.) 5	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)? 3		Depth to Water (feet) 3.68	

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

5. Material Used To Fill Well / Drillhole			
From (ft.)	To (ft.)	Lbs	
Bentonite Chips	Surface	20	32

6. Comments
Monitoring Well MW-6

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO		License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879		Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 1/15/2020	

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

Verification Only of Fill and Seal

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

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

County BAYFIELD		WI Unique Well # of Removed Well _____ VP371	Hicap #	Facility Name Nep's Bar	
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N		Method Code (see instructions)		Facility ID (FID or PWS) 804035210	
91 ° 4.58 ' W				License/Permit/Monitoring #	
1/4 NE	1/4 NE	Section 11	Township 47 N	Range 6	Original Well Owner Thomas Sutarik
or Gov't Lot #				<input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W	Present Well Owner Thomas Sutarik
Well Street Address 23885 County Highway G			Mailing Address of Present Owner 25850 County Highway G		
Well City, Village or Town Pilsen			Well ZIP Code 54806-		
Subdivision Name			Lot #		City of Present Owner Ashland
					State WI
					ZIP Code 54806-

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

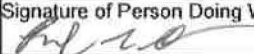
WI Unique Well # of Replacement Well: _____

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

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 4/13/2016	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input 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.	
<input type="checkbox"/> Borehole / Drillhole		
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Required Method of Placing Sealing Material: <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain): <u>Gravity</u>
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Sealing Materials: <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips
Total Well Depth From Ground Surface (ft.) 20	Casing Diameter (in.) 2	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
Lower Drillhole Diameter (in.) 8.25	Casing Depth (ft.) 5	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		
If yes, to what depth (feet)? 3	Depth to Water (feet) 10.96	

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs
Bentonite Chips	Surface	20	32

6. Comments
Monitoring Well MW-7

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3		Telephone Number (608) 781-8879	Comments	
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work 	Date Signed 1/15/2020

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Verification Only of Fill and Seal

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

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

County BAYFIELD	WI Unique Well # of Removed Well VP372	HiCap #	Facility Name Nep's Bar
Latitude / Longitude (Degrees and Minutes) 46 ° 34.4 ' N 91 ° 4.58 ' W		Method Code (see instructions)	Facility ID (FID or PWS) 804035210
1/4 NE or Gov't Lot #	Section 11	Township 47 N	Range 6
Well Street Address 23885 County Highway G		Original Well Owner Thomas Sutarik	
Well City, Village or Town Pilsen		Present Well Owner Thomas Sutarik	
Subdivision Name		Mailing Address of Present Owner 25850 County Highway G	
Well ZIP Code 54806-		City of Present Owner Ashland	State WI
Lot #		ZIP Code 54806-	

Reason For Removal From Service
Sampling Complete

WI Unique Well # of Replacement Well

3. Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)
4/13/2016

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

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.) **20** Casing Diameter (in.) **2**

Lower Drillhole Diameter (in.) **8.25** Casing Depth (ft.) **5**

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? **3** Depth to Water (feet) **10.02**

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

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

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

5. Material Used To Fill Well / Drillhole	From (ft.)	To (ft.)	Lbs
Bentonite Chips	Surface	20	32

6. Comments
Monitoring Well MW-8

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

Name of Person or Firm Doing Filling & Sealing Rob Wilmoth - METCO	License #	Date of Filling & Sealing (mm/dd/yyyy) 1/14/2020	Date Received	Noted By
Street or Route 709 Gillette St., Ste #3	Telephone Number (608) 781-8879	Comments		
City La Crosse	State WI	ZIP Code 54603-	Signature of Person Doing Work <i>Rob Wilmoth</i>	Date Signed 1/15/2020