

**From:** Bruce D. Meissner <bmeissner@releeinc.com>  
**Sent:** Thursday, August 12, 2021 11:16 AM  
**To:** McKnight, Kevin - DNR  
**Subject:** Panzen Transfer  
**Attachments:** Panzen Transfer Co. (former) Well Abandonment Forms.pdf

Hi Kevin

My guys were able to locate all 11 wells at the Panzen Transfer site and abandon them. I've attached the abandonment forms.

Let me know if you'd like a hard copy mailed.

Take care,

Bruce



**Bruce D. Meissner, P.G., V.P.**  
Environmental Compliance Manager  
Robert E. Lee & Associates, Inc.

1250 Centennial Centre Boulevard, Hobart WI 54155  
O: 920-662-9641 F: 920-662-9141 M: 920-606-9048  
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MW-1

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: \_\_\_\_\_

|   |  |  |  |   |  |  |  |
|---|--|--|--|---|--|--|--|
| <b>1. Well Location Information</b>   |  |  |  | <b>2. Facility / Owner Information</b>  |  |  |  |
| County<br><b>WINNEBAGO</b>  |  | WI Unique Well # of Removed Well<br>_____ MW1 _____        |  | Facility Name<br><b>Panzen Transfer Co (Former)</b>   |  | Facility ID (FID or PWS)<br><b>0371120368</b>  |  |
| Latitude / Longitude (Degrees and Minutes)<br>_____ 'N<br>_____ 'W  |  |  |  | Method Code (see instructions)  |  |  |  |
| 1/4 NW    1/4 SE  |  | Section<br><b>36</b>                                       |  | Township<br><b>18 N</b>   |  | Range<br><b>14</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W              |  |
| Well Street Address<br><b>2655 STH 116</b>  |  |  |  | Original Well Owner   |  |  |  |
| Well City, Village or Town<br><b>Town of Rushford</b>   |  |  |  | Well ZIP Code<br><b>54980-</b>  |  |  |  |
| Subdivision Name  |  |  |  | Lot #   |  | City of Present Owner    State    ZIP Code   |  |
| Reason For Removal From Service<br>Site Closure   |  |  |  | WI Unique Well # of Replacement Well  |  |  |  |
| <b>3. Well / Drillhole / Borehole Information</b>   |  |  |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>  |  |  |  |
| <input checked="" type="checkbox"/> Monitoring Well   |  | Original Construction Date (mm/dd/yyyy)                    |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Water Well   |  | If a Well Construction Report is available, please attach. |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Borehole / Drillhole   |  |  |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Construction Type:  |  |  |  | Casing left in place?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug      |  |  |  | Was casing cut off below surface?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Other (specify): _____   |  |  |  | Did sealing material rise to surface?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Formation Type:   |  |  |  | Did material settle after 24 hours?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock                             |  |  |  | If yes, was hole retopped?  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |  |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>   |  | Casing Diameter (in.)<br><b>2.38</b>                       |  | If bentonite chips were used, were they hydrated with water from a known safe source?                                   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Lower Drillhole Diameter (in.)<br><b>8</b>  |  | Casing Depth (ft.)   |  | Required Method of Placing Sealing Material   |  |  |  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |  | Depth to Water (feet)<br><b>6.48</b>                       |  | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped                          |  |  |  |
| If yes, to what depth (feet)?   |  |  |  | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____ |  |  |  |
|   |  |  |  | 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 checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry                 |  |  |  |

| 5. Material Used To Fill Well / Drillhole |  |  |  | From (ft.) | To (ft.) | Cubic Feet |
|---|--|--|--|------------|----------|------------|
| Topsoil                                   |  |  |  | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        |  |  |  | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            |  |  |  | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-1

|   |  |                       |  |                                |  |
|---|--|-----------------------|--|--------------------------------|--|
| <b>7. Supervision of Work</b>   |  |                       |  | <b>DNR Use Only</b>            |  |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |  | License #             |  | Date Received                  |  |
|   |  |                       |  | <b>8/10/2021</b>               |  |
| Date of Filling & Sealing (mm/dd/yyyy)  |  | Telephone Number      |  | Noted By                       |  |
| <b>8/10/2021</b>  |  | <b>(920) 662-9641</b> |  |                                |  |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |  |                       |  | Comments                       |  |
| City<br><b>Hobart</b>   |  |                       |  | Signature of Person Doing Work |  |
| State<br><b>WI</b>  |  |                       |  | Date Signed<br><b>8-11-21</b>  |  |
| ZIP Code<br><b>54155-</b>   |  |                       |  |                                |  |

MW-2

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

Verification Only of Fill and Seal

Route to:

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

Waste Management       Other: \_\_\_\_\_

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

|   |        |  |                                      |   |   |
|---|--------|--|--------------------------------------|---|---|
| County<br><b>WINNEBAGO</b>                            |        | WI Unique Well # of Removed Well<br>____ MW2__ | Hicap #                              |   | Facility Name<br><b>Panzen Transfer Co (Former)</b> |
| Latitude / Longitude (Degrees and Minutes)            |        |  | Method Code (see instructions)       |   | Facility ID (FID or PWS)<br><b>0371120368</b>       |
| ____ ° ____ ' N                                       |        |  | ____                                 |   | License/Permit/Monitoring #                         |
| ____ ° ____ ' W                                       |        |  | ____                                 |   | Original Well Owner                                 |
| 1/4 NW  | 1/4 SE | Section<br><b>36</b>                           | Township<br><b>18 N</b>              | Range<br><b>14</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W | Present Well Owner                                  |
| Well Street Address<br><b>2655 STH 116</b>            |        |  |                                      |   |   |
| Well City, Village or Town<br><b>Town of Rushford</b> |        |  | Well ZIP Code<br><b>54980-</b>       |   |   |
| Subdivision Name                                      |        |  | Lot #                                |   | Mailing Address of Present Owner                    |
| Reason For Removal From Service                       |        |  | WI Unique Well # of Replacement Well |   |   |
| Site Closure  |        |  | ____                                 |   |   |

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

|   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> Monitoring Well   | Original Construction Date (mm/dd/yyyy)                    | Pump and piping removed?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input type="checkbox"/> Water Well   | If a Well Construction Report is available, please attach. | Liner(s) removed?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input type="checkbox"/> Borehole / Drillhole   |  | Screen removed?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Construction Type:  |  | Casing left in place?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
| <input checked="" type="checkbox"/> Drilled   | <input type="checkbox"/> Driven (Sandpoint)                | <input type="checkbox"/> Dug  | Was casing cut off below surface?  |
| <input type="checkbox"/> Other (specify): _____   |  | Did sealing material rise to surface?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Formation Type:   |  | Did material settle after 24 hours?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
| <input checked="" type="checkbox"/> Unconsolidated Formation  | <input type="checkbox"/> Bedrock                           | If yes, was hole relapped?  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>   | Casing Diameter (in.)<br><b>2.38</b>                       | If bentonite chips were used, were they hydrated with water from a known safe source?                                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Lower Drillhole Diameter (in.)<br><b>8</b>  | Casing Depth (ft.)   | Required Method of Placing Sealing Material   |  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | Depth to Water (feet)                                      | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped                          |  |
| If yes, to what depth (feet)?   |  | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____ |  |
| 5. Material Used To Fill Well / Drillhole   |  | Sealing Materials   |  |
| Topsoil   | From (ft.) To (ft.) Cubic Feet                             | <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)                  |  |
| Granular Bentonite  | Surface 0.5 0.01   | <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "                |  |
| 3/8" Hole Plug  | 0.5 1.5 0.02   | <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips  |  |
|   | 1.5 13.5 0.26  | For Monitoring Wells and Monitoring Well Boreholes Only:  |  |
| 6. Comments   |  | <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout                   |  |
| MW-2  |  | <input checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry                 |  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-2

|   |                    |  |                                |                               |
|---|--------------------|--|--------------------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |                    |  | <b>DNR Use Only</b>            |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> | License #          | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                  | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |                    | Telephone Number<br><b>(920) 662-9641</b>                  | Comments                       |                               |
| City<br><b>Hobart</b>   | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work | Date Signed<br><b>8-11-21</b> |

MW-3

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Verification Only of Fill and Seal

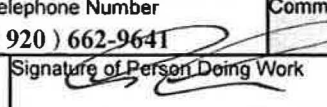
Route to:  
 Drinking Water     Watershed/Wastewater     Remediation/Redevelopment  
 Waste Management     Other: \_\_\_\_\_

|  |        |  |                         |   |   |   |          |
|--|--------|--|-------------------------|---|---|---|----------|
| <b>1. Well Location Information</b>        |        |  |                         | <b>2. Facility / Owner Information</b>                |   |   |          |
| County<br><b>WINNEBAGO</b>                 |        | WI Unique Well # of Removed Well<br><b>MW3</b> |                         | Hicap #   |   | Facility Name<br><b>Panzen Transfer Co (Former)</b> |          |
| Latitude / Longitude (Degrees and Minutes) |        | Method Code (see instructions)                 |                         | Facility ID (FID or PWS)<br><b>0371120368</b>         |   | License/Permit/Monitoring #                         |          |
| _____ 'N                                   |        | _____  |                         | Original Well Owner                                   |   | _____   |          |
| _____ 'W                                   |        | _____  |                         | Present Well Owner                                    |   | _____   |          |
| 1/4 NW                                     | 1/4 SE | Section<br><b>36</b>                           | Township<br><b>18 N</b> | Range<br><b>14</b>                                    | <input checked="" type="checkbox"/> E<br><input type="checkbox"/> W | Mailing Address of Present Owner                    |          |
| or Gov't Lot #                             |        | Well Street Address<br><b>2655 STH 116</b>     |                         | Well City, Village or Town<br><b>Town of Rushford</b> |   | Well ZIP Code<br><b>54980-</b>                      |          |
| Subdivision Name                           |        | Lot #  |                         | City of Present Owner                                 |   | State   | ZIP Code |

|  |  |  |  |   |  |   |  |   |
|--|--|--|--|---|--|---|--|---|
| Reason For Removal From Service<br>Site Closure              |  | WI Unique Well # of Replacement Well                       |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>                          |  |   |  |   |
| <input checked="" type="checkbox"/> Monitoring Well          |  | Original Construction Date (mm/dd/yyyy)                    |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes                     | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| <input type="checkbox"/> Water Well                          |  | If a Well Construction Report is available, please attach. |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes                     | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| <input type="checkbox"/> Borehole / Drillhole                |  | Construction Type:   |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes                     | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| <input checked="" type="checkbox"/> Drilled                  |  | <input type="checkbox"/> Driven (Sandpoint)                |  | Casing left in place?   |  | <input type="checkbox"/> Yes                                | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A            |
| <input type="checkbox"/> Other (specify): _____              |  | Formation Type:  |  | Was casing cut off below surface?   |  | <input type="checkbox"/> Yes                                | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A            |
| <input checked="" type="checkbox"/> Unconsolidated Formation |  | <input type="checkbox"/> Bedrock                           |  | Did sealing material rise to surface?   |  | <input checked="" type="checkbox"/> Yes                     | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>    |  | Casing Diameter (in.)<br><b>2.38</b>                       |  | Did material settle after 24 hours?   |  | <input type="checkbox"/> Yes                                | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A            |
| Lower Drillhole Diameter (in.)<br><b>8</b>                   |  | Casing Depth (ft.)   |  | If yes, was hole relapped?  |  | <input type="checkbox"/> Yes                                | <input type="checkbox"/> No            | <input checked="" type="checkbox"/> N/A |
| Was well annular space grouted?                              |  | [ ] Yes  |  | If bentonite chips were used, were they hydrated with water from a known safe source? |  | <input checked="" type="checkbox"/> Yes                     | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| If yes, to what depth (feet)?                                |  | Depth to Water (feet)<br><b>5.73</b>                       |  | 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"/> 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 checked="" type="checkbox"/> Granular Bentonite                                |  | <input type="checkbox"/> Bentonite - Sand Slurry            |  |   |

| 5. Material Used To Fill Well / Drillhole |         |      | From (ft.) | To (ft.) | Cubic Feet |
|---|---------|------|------------|----------|------------|
| Topsoil                                   | Surface | 0.5  | 0.01       |          |            |
| Granular Bentonite                        | 0.5     | 1.5  | 0.02       |          |            |
| 3/8" Hole Plug                            | 1.5     | 13.5 | 0.26       |          |            |

**6. Comments**  
MW-3

|   |                    |   |  |                     |                               |
|---|--------------------|---|--|---------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |                    |   |  | <b>DNR Use Only</b> |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |                    | License #                                 | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b>   | Date Received       | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |                    | Telephone Number<br><b>(920) 662-9641</b> |  | Comments            |                               |
| City<br><b>Hobart</b>   | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                 | Signature of Person Doing Work<br> |                     | Date Signed<br><b>8-11-21</b> |

MW-4

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Verification Only of Fill and Seal

Route to:

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

Waste Management       Other: \_\_\_\_\_

|  |  |  |  |   |  |   |  |
|--|--|--|--|---|--|---|--|
| <b>1. Well Location Information</b>  |  |  |  | <b>2. Facility / Owner Information</b>        |  |   |  |
| County<br><b>WINNEBAGO</b>   |  | WI Unique Well # of Removed Well<br><b>MW4</b> |  | Hicap #                                       |  | Facility Name<br><b>Panzen Transfer Co (Former)</b> |  |
| Latitude / Longitude (Degrees and Minutes)   |  |  |  | Facility ID (FID or PWS)<br><b>0371120368</b> |  |   |  |
| Method Code (see instructions)   |  |  |  | License/Permit/Monitoring #                   |  |   |  |
| 1/4 NW    1/4 SE    Section    Township    Range <input checked="" type="checkbox"/> E<br>or Gov't Lot #                      36                      18    N    14 <input type="checkbox"/> W |  |  |  | Original Well Owner                           |  |   |  |
| Well Street Address<br><b>2655 STH 116</b>   |  |  |  | Present Well Owner                            |  |   |  |
| Well City, Village or Town<br><b>Town of Rushford</b>  |  |  |  | Mailing Address of Present Owner              |  |   |  |
| Subdivision Name   |  |  |  | City of Present Owner                         |  | State    ZIP Code                                   |  |
| Reason For Removal From Service  |  |  |  | WI Unique Well # of Replacement Well          |  |   |  |
| Site Closure   |  |  |  |   |  |   |  |

|   |  |   |  |   |  |  |  |
|---|--|---|--|---|--|--|--|
| <b>3. Well / Drillhole / Borehole Information</b>   |  |   |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>  |  |  |  |
| <input checked="" type="checkbox"/> Monitoring Well   |  | Original Construction Date (mm/dd/yyyy)                     |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Water Well   |  | If a Well Construction Report is available, please attach.  |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Borehole / Drillhole   |  |   |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Construction Type:  |  |   |  | Casing left in place?   |  |  |  |
| <input checked="" type="checkbox"/> Drilled   |  | <input type="checkbox"/> Driven (Sandpoint)                 |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A                        |  | Was casing cut off below surface?  |  |
| <input type="checkbox"/> Other (specify): _____   |  |   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A                        |  | Did sealing material rise to surface?  |  |
| Formation Type:   |  |   |  | Did material settle after 24 hours?   |  |  |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation  |  | <input type="checkbox"/> Bedrock                            |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A                        |  | If yes, was hole retopped?   |  |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>   |  | Casing Diameter (in.)<br><b>2.38</b>                        |  | <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?            |  |
| Lower Drillhole Diameter (in.)<br><b>8</b>  |  | Casing Depth (ft.)  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A                        |  | Required Method of Placing Sealing Material  |  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |  |   |  | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped                          |  |  |  |
| If yes, to what depth (feet)?   |  | Depth to Water (feet)<br><b>4.34</b>                        |  | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____ |  |  |  |
| Sealing Materials   |  |   |  | For Monitoring Wells and Monitoring Well Boreholes Only:  |  |  |  |
| <input type="checkbox"/> Neat Cement Grout  |  | <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) |  | <input checked="" type="checkbox"/> Bentonite Chips   |  | <input type="checkbox"/> Bentonite - Cement Grout  |  |
| <input type="checkbox"/> Sand-Cement (Concrete) Grout   |  | <input type="checkbox"/> Bentonite-Sand Slurry " "          |  | <input checked="" type="checkbox"/> Granular Bentonite  |  | <input type="checkbox"/> Bentonite - Sand Slurry   |  |
| <input type="checkbox"/> Concrete   |  | <input type="checkbox"/> Bentonite Chips                    |  |   |  |  |  |

| 5. Material Used To Fill Well / Drillhole |          |            |      |
|---|----------|------------|------|
| From (ft.)                                | To (ft.) | Cubic Feet |      |
| Topsoil                                   | Surface  | 0.5        | 0.01 |
| Granular Bentonite                        | 0.5      | 1.5        | 0.02 |
| 3/8" Hole Plug                            | 1.5      | 13.5       | 0.26 |

**6. Comments**  
MW-4

|   |  |                           |  |   |  |
|---|--|---------------------------|--|---|--|
| <b>7. Supervision of Work</b>   |  |                           |  | <b>DNR Use Only</b>                       |  |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |  | License #                 |  | Date Received                             |  |
| Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b>                                    |  | Date Received             |  | Noted By                                  |  |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |  |                           |  | Telephone Number<br><b>(920) 662-9641</b> |  |
| City<br><b>Hobart</b>   |  |                           |  | Comments                                  |  |
| State<br><b>WI</b>  |  | ZIP Code<br><b>54155-</b> |  | Signature of Person Doing Work            |  |
|   |  |                           |  | Date Signed<br><b>8-11-21</b>             |  |

MW-5

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: \_\_\_\_\_

|  |  |  |  |   |  |   |  |
|--|--|--|--|---|--|---|--|
| <b>1. Well Location Information</b>                                |  |  |  | <b>2. Facility / Owner Information</b>              |  |   |  |
| County<br><b>WINNEBAGO</b>   |  | WI Unique Well # of Removed Well<br><b>MW5</b> |  | Facility Name<br><b>Panzen Transfer Co (Former)</b> |  | Facility ID (FID or PWS)<br><b>0371120368</b>                                       |  |
| Latitude / Longitude (Degrees and Minutes)<br>_____ 'N<br>_____ 'W |  | Method Code (see instructions)<br>_____        |  | License/Permit/Monitoring #<br>_____                |  | Original Well Owner<br>_____  |  |
| 1/4 NW or Gov't Lot #  |  | Section<br><b>36</b>                           |  | Township<br><b>18 N</b>                             |  | Range<br><b>14</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W |  |
| Well Street Address<br><b>2655 STH 116</b>                         |  |  |  | Present Well Owner<br>_____                         |  |   |  |
| Well City, Village or Town<br><b>Town of Rushford</b>              |  |  |  | Mailing Address of Present Owner<br>_____           |  |   |  |
| Subdivision Name   |  |  |  | Well ZIP Code<br><b>54980-</b>                      |  | City of Present Owner   |  |
| Reason For Removal From Service<br>Site Closure                    |  |  |  | WI Unique Well # of Replacement Well<br>_____       |  | State   |  |
| Subdivision Name   |  |  |  | Lot #   |  | ZIP Code  |  |

|   |  |  |  |   |  |  |  |
|---|--|--|--|---|--|--|--|
| <b>3. Well / Drillhole / Borehole Information</b>   |  |  |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>  |  |  |  |
| <input checked="" type="checkbox"/> Monitoring Well   |  | Original Construction Date (mm/dd/yyyy)<br>_____           |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Water Well   |  | If a Well Construction Report is available, please attach. |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Borehole / Drillhole   |  | Construction Type:   |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Drilled   |  | <input type="checkbox"/> Driven (Sandpoint)                |  | Casing left in place?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Other (specify): _____   |  | <input type="checkbox"/> Dug                               |  | Was casing cut off below surface?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Formation Type:   |  |  |  | Required Method of Placing Sealing Material   |  |  |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation  |  | <input type="checkbox"/> Bedrock                           |  | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped                          |  |  |  |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>   |  | Casing Diameter (in.)<br><b>2.38</b>                       |  | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____ |  |  |  |
| Lower Drillhole Diameter (in.)<br><b>8</b>  |  | Casing Depth (ft.)   |  | Sealing Materials   |  |  |  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |  | Depth to Water (feet)<br><b>6.50</b>                       |  | <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)                  |  |  |  |
| If yes, to what depth (feet)?   |  | Depth to Water (feet)                                      |  | <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 checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry                 |  |  |  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-5

|   |  |                    |  |                                    |                               |
|---|--|--------------------|--|------------------------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |  |                    |  | <b>DNR Use Only</b>                |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |  | License #          | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                      | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |  |                    | Telephone Number<br><b>(920) 662-9641</b>                  | Comments                           |                               |
| City<br><b>Hobart</b>   |  | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work<br> | Date Signed<br><b>8-11-21</b> |

MW-6

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<br><b>WINNEBAGO</b>                            | WI Unique Well # of Removed Well<br><b>MW6</b> | Hicap #                 | Facility Name<br><b>Panzen Transfer Co (Former)</b> |
| Latitude / Longitude (Degrees and Minutes)            | Method Code (see instructions)                 |                         | Facility ID (FID or PWS)<br><b>0371120368</b>       |
| 1/4 NW    1/4 SE                                      | Section<br><b>36</b>                           | Township<br><b>18 N</b> | Range<br><b>14 E</b>                                |
| or Gov't Lot #  |  |                         |   |
| Well Street Address<br><b>2655 STH 116</b>            | Well ZIP Code<br><b>54980-</b>                 |                         |   |
| Well City, Village or Town<br><b>Town of Rushford</b> | City of Present Owner                          |                         |   |
| Subdivision Name                                      | Lot #  | State                   | ZIP Code  |

Reason For Removal From Service:  Site Closure

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)                    | Pump and piping removed?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input type="checkbox"/> Water Well  | If a Well Construction Report is available, please attach. | Liner(s) removed?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
| <input type="checkbox"/> Borehole / Drillhole  |  | Screen removed?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
| Construction Type:   |  | Casing left in place?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug |  | Was casing cut off below surface?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input type="checkbox"/> Other (specify): _____  |  | Did sealing material rise to surface?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
|  |  | Did material settle after 24 hours?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
|  |  | If yes, was hole retopped?  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
|  |  | If bentonite chips were used, were they hydrated with water from a known safe source? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |

|  |   |   |  |
|--|---|---|--|
| Formation Type:                            | <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock | Required Method of Placing Sealing Material                             | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped         |
| Total Well Depth From Ground Surface (ft.) | <b>13.5</b>   | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) | <input type="checkbox"/> Other (Explain): _____  |
| Casing Diameter (in.)                      | <b>2.38</b>   | Sealing Materials   | <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) |
| Lower Drillhole Diameter (in.)             | <b>8</b>  | <input type="checkbox"/> Sand-Cement (Concrete) Grout                   | <input type="checkbox"/> Bentonite-Sand Slurry " "   |
| Casing Depth (ft.)                         |   | <input type="checkbox"/> Concrete                                       | <input type="checkbox"/> Bentonite Chips   |
| Was well annular space grouted?            | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown     | For Monitoring Wells and Monitoring Well Boreholes Only:                |  |
| If yes, to what depth (feet)?              | Depth to Water (feet)<br><b>9.52</b>  | <input checked="" 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.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-6

|   |   |  |                                    |                               |
|---|---|--|------------------------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |   |  | <b>DNR Use Only</b>                |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> | License #                                 | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                      | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   | Telephone Number<br><b>(920) 562-9641</b> | Comments   |                                    |                               |
| City<br><b>Hobart</b>   | State<br><b>WI</b>                        | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work<br> | Date Signed<br><b>8-11-21</b> |

MW-7

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:               |   |

|   |        |  |                         |   |                                       |   |  |
|---|--------|--|-------------------------|---|---------------------------------------|---|--|
| <b>1. Well Location Information</b>                   |        |  |                         | <b>2. Facility / Owner Information</b>              |                                       |   |  |
| County<br><b>WINNEBAGO</b>                            |        | WI Unique Well # of Removed Well<br><b>MW7</b> |                         | Facility Name<br><b>Panzen Transfer Co (Former)</b> |                                       | Facility ID (FID or PWS)<br><b>0371120368</b> |  |
| Latitude / Longitude (Degrees and Minutes)            |        | Method Code (see instructions)                 |                         | License/Permit/Monitoring #                         |                                       | Original Well Owner                           |  |
| _____ 'N  |        | _____  |                         | _____   |                                       | Present Well Owner                            |  |
| _____ 'W  |        | _____  |                         | _____   |                                       | Mailing Address of Present Owner              |  |
| 1/4 NW  | 1/4 SE | Section<br><b>36</b>                           | Township<br><b>18 N</b> | Range<br><b>14</b>                                  | <input checked="" type="checkbox"/> E | City of Present Owner                         |  |
| or Gov't Lot #  |        |  |                         | <input type="checkbox"/> W                          |                                       | State   |  |
| Well Street Address<br><b>2655 STH 116</b>            |        |  |                         | ZIP Code  |                                       |   |  |
| Well City, Village or Town<br><b>Town of Rushford</b> |        |  |                         | Lot #   |                                       |   |  |
| Subdivision Name                                      |        |  |                         | City of Present Owner                               |                                       |   |  |

|  |  |   |  |   |  |  |  |
|--|--|---|--|---|--|--|--|
| Reason For Removal From Service<br>Site Closure              |  | WI Unique Well # of Replacement Well  |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>  |  |  |  |
| <input checked="" type="checkbox"/> Monitoring Well          |  | Original Construction Date (mm/dd/yyyy)   |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Water Well                          |  | If a Well Construction Report is available, please attach.                                |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Borehole / Drillhole                |  |   |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Construction Type:   |  |   |  | Casing left in place?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Drilled                  |  | <input type="checkbox"/> Driven (Sandpoint)   |  | <input type="checkbox"/> Dug  |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Other (specify):                    |  |   |  | Was casing cut off below surface?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Formation Type:  |  |   |  | Did sealing material rise to surface?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation |  | <input type="checkbox"/> Bedrock  |  | Did material settle after 24 hours?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>    |  | Casing Diameter (in.)<br><b>2.38</b>  |  | If yes, was hole retopped?  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |  |
| Lower Drillhole Diameter (in.)<br><b>8</b>                   |  | Casing Depth (ft.)  |  | If bentonite chips were used, were they hydrated with water from a known safe source?                             |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Was well annular space grouted?                              |  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |  | Required Method of Placing Sealing Material   |  |  |  |
| If yes, to what depth (feet)?<br><b>2</b>                    |  | Depth to Water (feet)<br><b>10.01</b>   |  | <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"/> 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 checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry           |  |  |  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-7

|   |  |                    |  |                                |                               |
|---|--|--------------------|--|--------------------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |  |                    |  | <b>DNR Use Only</b>            |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |  | License #          | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                  | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |  |                    | Telephone Number<br><b>(920) 662-9641</b>                  | Comments                       |                               |
| City<br><b>Hobart</b>   |  | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work | Date Signed<br><b>8-11-21</b> |



MW-8R

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<br><b>WINNEBAGO</b>                            | WI Unique Well # of Removed Well<br><b>MW8</b> | Hicap #                 | Facility Name<br><b>Panzen Transfer Co (Former)</b>                                   |
| Latitude / Longitude (Degrees and Minutes)            | Method Code (see instructions)                 |                         | Facility ID (FID or PWS)<br><b>0371120368</b>   |
| 1/4 NW    1/4 SE                                      | Section<br><b>36</b>                           | Township<br><b>18 N</b> | Range<br><b>14 E</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W |
| Well Street Address<br><b>2655 STH 116</b>            | Well ZIP Code<br><b>54980-</b>                 |                         |   |
| Well City, Village or Town<br><b>Town of Rushford</b> | City of Present Owner                          |                         |   |
| Subdivision Name                                      | Lot #  | State                   | ZIP Code  |

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

|  |  |  |
|--|--|--|
| Reason For Removal From Service<br>Site Closure  | WI Unique Well # of Replacement Well                       | Pump and piping removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  |
| <input checked="" type="checkbox"/> Monitoring Well  | Original Construction Date (mm/dd/yyyy)                    | Liner(s) removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Water Well  | If a Well Construction Report is available, please attach. | Screen removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Borehole / Drillhole  |  | Casing left in place? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| Construction Type:<br><input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug |  | Was casing cut off below surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Other (specify): _____  |  | Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| Formation Type:<br><input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock                           |  | Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>  | Casing Diameter (in.)<br><b>2.38</b>                       | If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  |
| Lower Drillhole Diameter (in.)<br><b>8</b>   | Casing Depth (ft.)   | If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown                  | Depth to Water (feet)<br><b>7.42</b>                       | 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"/> 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 checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-8R (MW-8 replacement)

|   |   |  |                                |                               |
|---|---|--|--------------------------------|-------------------------------|
| <b>7. Supervision of Work</b>   |   |  | <b>DNR Use Only</b>            |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> | License #                                   | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                  | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   | Telephone Number<br><b>( 920 ) 662-9641</b> | Comments   |                                |                               |
| City<br><b>Hobart</b>   | State<br><b>WI</b>                          | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work | Date Signed<br><b>8-11-21</b> |

MW-9

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

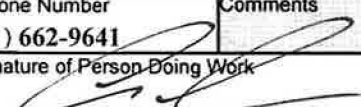
Route to:  
 Drinking Water     Watershed/Wastewater     Remediation/Redevelopment  
 Waste Management     Other: \_\_\_\_\_

|  |  |  |  |   |  |   |  |
|--|--|--|--|---|--|---|--|
| <b>1. Well Location Information</b>                                |  |  |  | <b>2. Facility / Owner Information</b>            |  |   |  |
| County<br><b>WINNEBAGO</b>   |  | WI Unique Well # of Removed Well<br><b>MW9</b> |  | Hicap #   |  | Facility Name<br><b>Panzen Transfer Co (Former)</b>                                 |  |
| Latitude / Longitude (Degrees and Minutes)<br>_____ 'N<br>_____ 'W |  |  |  | Facility ID (FID or PWS)<br><b>0371120368</b>     |  |   |  |
| Method Code (see instructions)                                     |  |  |  | License/Permit/Monitoring #                       |  |   |  |
| 1/4 NW    1/4 SE   |  | Section<br><b>36</b>                           |  | Township<br><b>18 N</b>                           |  | Range<br><b>14</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W |  |
| Well Street Address<br><b>2655 STH 116</b>                         |  |  |  | Original Well Owner                               |  |   |  |
| Well City, Village or Town<br><b>Town of Rushford</b>              |  |  |  | Present Well Owner                                |  |   |  |
| Subdivision Name   |  |  |  | Mailing Address of Present Owner                  |  |   |  |
| Reason For Removal From Service<br>Site Closure                    |  |  |  | City of Present Owner    State    ZIP Code        |  |   |  |
| WI Unique Well # of Replacement Well                               |  |  |  | 4. Pump, Liner, Screen, Casing & Sealing Material |  |   |  |

|   |  |  |  |
|---|--|--|--|
| <b>3. Well / Drillhole / Borehole Information</b>   |  | Pump and piping removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  |  |
| Original Construction Date (mm/dd/yyyy)   |  | Liner(s) removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| <input checked="" type="checkbox"/> Monitoring Well<br><input type="checkbox"/> Water Well<br><input type="checkbox"/> Borehole / Drillhole                             |  | Screen removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| If a Well Construction Report is available, please attach.  |  | Casing left in place? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| Construction Type:  |  | Was casing cut off below surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug<br><input type="checkbox"/> Other (specify): _____ |  | Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| Formation Type:   |  | Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock   |  | If yes, was hole relapped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  |  |
| Total Well Depth From Ground Surface (ft.)<br><b>13.5</b>   |  | If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |  |
| Casing Diameter (in.)<br><b>2.38</b>  |  | Required Method of Placing Sealing Material  |  |
| Lower Drillhole Diameter (in.)<br><b>8</b>  |  | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped<br><input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____  |  |
| Casing Depth (ft.)  |  | Sealing Materials  |  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown   |  | <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)<br><input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "<br><input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips |  |
| If yes, to what depth (feet)?   |  | For Monitoring Wells and Monitoring Well Boreholes Only:   |  |
| Depth to Water (feet)<br><b>5.33</b>  |  | <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout<br><input checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry   |  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 13.5     | 0.26       |

**6. Comments**  
MW-9

|   |  |                    |  |  |                               |
|---|--|--------------------|--|--|-------------------------------|
| <b>7. Supervision of Work</b>   |  |                    |  | <b>DNR Use Only</b>  |                               |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |  | License #          | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received  | Noted By                      |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |  |                    | Telephone Number<br><b>(920) 662-9641</b>                  | Comments   |                               |
| City<br><b>Hobart</b>   |  | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work<br> | Date Signed<br><b>8-11-21</b> |

PZ-IR

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<br><b>WINNEBAGO</b>                            | WI Unique Well # of Removed Well<br><b>PZIR</b> | Hicap #                          | Facility Name<br><b>Panzen Transfer Co (Former)</b>                                    |
| Latitude / Longitude (Degrees and Minutes)            |   | Method Code (see instructions)   | Facility ID (FID or PWS)<br><b>0371120368</b>  |
| -----'N   |   |                                  | License/Permit/Monitoring #  |
| -----'W   |   |                                  |  |
| 1/4 NW    1/4 SE                                      | Section<br><b>36</b>                            | Township<br><b>18 N</b>          | Range <input checked="" type="checkbox"/> E<br><input type="checkbox"/> W<br><b>14</b> |
| Well Street Address<br><b>2655 STH 116</b>            |   | Original Well Owner              |  |
| Well City, Village or Town<br><b>Town of Rushford</b> |   | Present Well Owner               |  |
| Well ZIP Code<br><b>54980-</b>                        |   | Mailing Address of Present Owner |  |
| Subdivision Name                                      |   | City of Present Owner            | State    ZIP Code  |

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

|   |  |  |
|---|--|--|
| Reason For Removal From Service<br>Site Closure   | WI Unique Well # of Replacement Well                       | Pump and piping removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  |
| <b>3. Well / Drillhole / Borehole Information</b>   |  | Liner(s) removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input checked="" type="checkbox"/> Monitoring Well   | Original Construction Date (mm/dd/yyyy)                    | Screen removed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Water Well   | If a Well Construction Report is available, please attach. | Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Borehole / Drillhole   |  | Was casing cut off below surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| Construction Type:  |  | Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input checked="" type="checkbox"/> Drilled   | <input type="checkbox"/> Driven (Sandpoint)                | Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A   |
| <input type="checkbox"/> Other (specify): _____   | <input type="checkbox"/> Dug                               | If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A  |
| Formation Type:   |  | If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <input checked="" type="checkbox"/> Unconsolidated Formation  | <input type="checkbox"/> Bedrock                           | Required Method of Placing Sealing Material  |
| Total Well Depth From Ground Surface (ft.)<br><b>26</b>   | Casing Diameter (in.)<br><b>2.38</b>                       | <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped   |
| Lower Drillhole Diameter (in.)<br><b>8</b>  | Casing Depth (ft.)   | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____  |
| Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | Depth to Water (feet)<br><b>12.57</b>                      | Sealing Materials  |
| If yes, to what depth (feet)?   |  | <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 checked="" type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry  |

| 5. Material Used To Fill Well / Drillhole | From (ft.) | To (ft.) | Cubic Feet |
|---|------------|----------|------------|
| Topsoil                                   | Surface    | 0.5      | 0.01       |
| Granular Bentonite                        | 0.5        | 1.5      | 0.02       |
| 3/8" Hole Plug                            | 1.5        | 26       | 0.54       |

**6. Comments**  
PZ-IR

|   |                    |  |                                |                                 |
|---|--------------------|--|--------------------------------|---------------------------------|
| <b>7. Supervision of Work</b>   |                    |  | <b>DNR Use Only</b>            |                                 |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> | License #          | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b> | Date Received                  | Noted By                        |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |                    | Telephone Number<br><b>(920) 662-9641</b>                  | Comments                       |                                 |
| City<br><b>Hobart</b>   | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                                  | Signature of Person Doing Work | Date Signed<br><b>8/11/2021</b> |

PZ-2

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

Verification Only of Fill and Seal

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

|  |        |  |                         |   |   |  |  |
|--|--------|--|-------------------------|---|---|--|--|
| <b>1. Well Location Information</b>        |        |  |                         | <b>2. Facility / Owner Information</b>                |   |  |  |
| County<br><b>WINNEBAGO</b>                 |        | WI Unique Well # of Removed Well<br><b>PZ2</b> |                         | Facility Name<br><b>Panzen Transfer Co (Former)</b>   |   | Facility ID (FID or PWS)<br><b>0371120368</b>  |  |
| Latitude / Longitude (Degrees and Minutes) |        | Method Code (see instructions)                 |                         | License/Permit/Monitoring #                           |   | Original Well Owner                            |  |
| _____ 'N                                   |        | _____  |                         | _____   |   | Present Well Owner                             |  |
| _____ 'W                                   |        | _____  |                         | _____   |   | Mailing Address of Present Owner               |  |
| 1/4 NW                                     | 1/4 SE | Section<br><b>36</b>                           | Township<br><b>18 N</b> | Range<br><b>14</b>                                    | <input checked="" type="checkbox"/> E<br><input type="checkbox"/> W | City of Present Owner      State      ZIP Code |  |
| or Gov't Lot #                             |        | Well Street Address<br><b>2655 STH 116</b>     |                         | Well City, Village or Town<br><b>Town of Rushford</b> |   | Well ZIP Code<br><b>54980-</b>                 |  |
| Subdivision Name                           |        | Lot #  |                         | Reason For Removal From Service                       |   | WI Unique Well # of Replacement Well           |  |
| Site Closure                               |        | _____  |                         | _____   |   | _____  |  |

|  |  |   |  |   |  |  |  |
|--|--|---|--|---|--|--|--|
| <b>3. Well / Drillhole / Borehole Information</b>            |  |   |  | <b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>                          |  |  |  |
| <input checked="" type="checkbox"/> Monitoring Well          |  | Original Construction Date (mm/dd/yyyy)   |  | Pump and piping removed?  |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Water Well                          |  | If a Well Construction Report is available, please attach.                                |  | Liner(s) removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input type="checkbox"/> Borehole / Drillhole                |  | _____   |  | Screen removed?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Construction Type:   |  | _____   |  | Casing left in place?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Drilled                  |  | <input type="checkbox"/> Driven (Sandpoint)   |  | <input type="checkbox"/> Dug  |  | Was casing cut off below surface?  |  |
| <input type="checkbox"/> Other (specify): _____              |  | _____   |  | _____   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Formation Type:  |  | _____   |  | Did sealing material rise to surface?   |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| <input checked="" type="checkbox"/> Unconsolidated Formation |  | <input type="checkbox"/> Bedrock  |  | Did material settle after 24 hours?   |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Total Well Depth From Ground Surface (ft.)                   |  | Casing Diameter (in.)   |  | If yes, was hole retopped?  |  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |  |
| <b>25</b>  |  | <b>2.38</b>   |  | If bentonite chips were used, were they hydrated with water from a known safe source? |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Lower Drillhole Diameter (in.)                               |  | Casing Depth (ft.)  |  | Required Method of Placing Sealing Material   |  | _____  |  |
| <b>8</b>   |  | _____   |  | <input type="checkbox"/> Conductor Pipe-Gravity                                       |  | <input type="checkbox"/> Conductor Pipe-Pumped   |  |
| Was well annular space grouted?                              |  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |  | <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)               |  | <input type="checkbox"/> Other (Explain): _____  |  |
| If yes, to what depth (feet)?                                |  | Depth to Water (feet)   |  | Sealing Materials   |  | _____  |  |
| _____  |  | <b>5.50</b>   |  | <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 checked="" type="checkbox"/> Granular Bentonite                                |  | <input type="checkbox"/> Bentonite - Sand Slurry   |  |

|  |                       |                 |                    |
|--|-----------------------|-----------------|--------------------|
| <b>5. Material Used To Fill Well / Drillhole</b> |                       |                 |                    |
| Topsoil  | From (ft.)<br>Surface | To (ft.)<br>0.5 | Cubic Feet<br>0.01 |
| Granular Bentonite                               | 0.5                   | 1.5             | 0.02               |
| 3/8" Hole Plug                                   | 1.5                   | 25              | 0.52               |

**6. Comments**  
PZ-2

|   |                    |   |  |                                 |          |
|---|--------------------|---|--|---------------------------------|----------|
| <b>7. Supervision of Work</b>   |                    |   |  | <b>DNR Use Only</b>             |          |
| Name of Person or Firm Doing Filling & Sealing<br><b>Robert E. Lee &amp; Associates, Inc.</b> |                    | License #                                   | Date of Filling & Sealing (mm/dd/yyyy)<br><b>8/10/2021</b>   | Date Received                   | Noted By |
| Street or Route<br><b>1250 Centennial Centre Blvd</b>   |                    | Telephone Number<br><b>( 920 ) 662-9641</b> |  | Comments                        |          |
| City<br><b>Hobart</b>   | State<br><b>WI</b> | ZIP Code<br><b>54155-</b>                   | Signature of Person Doing Work<br> | Date Signed<br><b>8/11/2021</b> |          |