

DRAFT

**FIRE TRAINING BURN PIT 1
AIR SPARGING / SOIL VAPOR EXTRACTION (AS/SVE) SYSTEM
ABANDONMENT REPORT
FORT MCCOY, WI**

January 16, 2008

Prepared for:

**United States Army Environmental Command
1 Rock Island Arsenal
Bldg 90, 3rd Fl, Room 30A
Attn: IMAE-CDN (Rich Mendoza)
Rock Island, IL 61299**



Prepared by:

KEMRON
ENVIRONMENTAL SERVICES

3155 Blackhawk Drive
Building 379, Suite 17
Fort Sheridan, IL 60037-1289

TABLE OF CONTENTS

1.0 INTRODUCTION	1
2.0 BACKGROUND INFORMATION	1
3.0 PRE-CONSTRUCTION ACTIVITIES	2
4.0 CONSTRUCTION ACTIVITIES	2
5.0 HEALTH AND SAFETY	3
6.0 PHOTOGRAPHIC DOCUMENTATION	3
7.0 CONCLUSIONS AND RECOMMENDATIONS	4
8.0 REFERENCES	5

LIST OF FIGURES

Figure 1	General Site Map
Figure 2	Former AS/SVE System

APPENDICES

Appendix A	USEPA and WDNR correspondence regarding AS/SVE System Abandonment
Appendix B	Right of Entry Permit
Appendix C	Well Abandonment Logs
Appendix D	Air Monitoring Log
Appendix E	Photographic Record

1.0 INTRODUCTION

KEMRON is pleased to submit this Air Sparging / Soil Vapor Extraction (AS/SVE) System Abandonment Report for the former Fire Training Burn Pit 1 (FTBP1) at Fort McCoy, WI. The report has been prepared by KEMRON Environmental Services, Inc. (KEMRON) under the Guaranteed Fixed Priced Remediation (GFPR) Contract, W911SO-04-F0017 with the U.S. Army Environmental Command (USAEC). The abandonment procedures were identified in a letter of understanding to Mr. Bob Egan (USEPA) and Ms. Mae Willkom (WDNR). The letter dated December 12, 2006, reiterated verbal agreements to changes in the Groundwater Monitoring Plan and abandonment plans for the AS/SVE system at FTBP1. Mr. Egan and Ms. Willkom gave their concurrence to the referenced letter in May of 2007 via e-mail correspondence. The letter and e-mail correspondence are included in Appendix A. Additional details regarding the history at FTBP1 are included in the Fort McCoy Groundwater SAP and historic documents located in the Administrative Record (AR) at Fort McCoy.

2.0 BACKGROUND INFORMATION

The Solid Waste Management Unit (SWMU) designated as FTBP1 is located southwest of Closed Sanitary Landfill 5 and west of Landfill 7 within the Equipment Concentration Site (ECS) vehicle parking area at Fort McCoy. The Hazardous Waste Operating License number for FTBP1 is W13 210 020 563 and is permitted under RCRA and HSWA specified in the Hazardous Waste Management Permit Modification effective October 01, 2001. The pit was formerly used to burn fuel for firefighter training until 1983. These activities have contaminated the groundwater below and downgradient from the pit with volatile organic compounds (VOCs).

An AS/SVE pilot study was conducted as a result of the May 1987 U.S. Army Environmental Hygiene Agency (USAEHA) investigation of the FTBP1 site that found soil contamination at the site. Contamination from volatile solvents, petroleum compounds and metals were found in the soil and groundwater. Following the pilot study, levels rebounded to pretreatment levels. The pilot study was abandoned and the AS/SVE system was left in place. Results indicated that ozone injection was ineffective.

A bioremediation treatment project to accomplish anaerobic microbial degradation of chlorinated compounds at the site was initiated in September 2001 and was completed by summer 2004.

Additional soil sampling was necessary at the SWMU to provide: 1) confirmation of the completion of remediation (implemented by K. Singh and Associates under separate contract) in the designated treatment area through confirmatory soil samples, and 2) to provide horizontal and vertical delineation of soil contaminants outside the treatment area, specifically at the western side of the treatment area. A confirmatory sample investigation was performed by KEMRON at FTBP1 in July 2005 and consisted of the completion of several soil borings and associated environmental sampling in areas defined in past remedial work. The soil borings allowed for further characterization of the shallow subsurface geologic conditions at this location. The results from the remedial investigation indicated the site had been satisfactorily remediated with the exception of one grid area (Cell 5). The USEPA had determined that PCE was present at levels that pose unacceptable risks at the referenced grid area.

In July 2006, KEMRON conducted a remedial action to remove soil exceeding the RCRA cleanup objectives at cell 5. The soil removal was successful and the subsequent sampling showed no exceedances at the cleanup goals in samples collected in the floor and in the sidewalls of the excavation. The excavation was backfilled with clean sand and the entire

treated area was capped by placing a 2-foot (minimum) layer of crushed stone over the area, graded and returned to its former use as a vehicle storage area. A concurrence letter from the USEPA dated September 25, 2006 was issued to the Army stating that the Remedial Action Completion Report was approved and that the completion of construction activities at FTBP1 also completed all planned construction activities for Corrective Action at Fort McCoy. A Construction Complete determination was entered into the USEPA Corrective Action database using the referenced letter as the basis for the determination (Appendix A).

Portions of the FTBP1 and the surrounding area currently require long-term groundwater monitoring for four VOCs analyzed under the 8260 method in 11 monitoring wells. The four constituents include tetrachloroethene (PCE), trichloroethene (TCE), dichloroethene (DCE) and vinyl chloride (VC).

3.0 PRE-CONSTRUCTION ACTIVITIES

KEMRON selected Badger State Drilling Inc. to perform the AS/SVE abandonment at the FTBP1 site. Prior to mobilization, a letter request was submitted to ECS for access to the site (Appendix B); Digger's hotline was contacted for utility clearance; and the Fort McCoy Final Health and Safety Plan was updated to include the AS/SVE task analysis, Form L - Task Analysis and Certification (Fort McCoy Final HASP 4.0, 2006). Construction vehicles were registered at the visitor center at the installation's main gate.

4.0 CONSTRUCTION ACTIVITIES

KEMRON and its subcontractor mobilized to the site and work commenced on 10/15/2007. The work was completed on 10/16/2007 at which time equipment and personnel were demobilized. The following narrative describes the work in chronological order.

The work area was located directly west and hydrologically downgradient of the FTBP1 cap. There were a total of twelve 4-inch diameter flush mount SVE wells, eight 2-inch diameter flush mount AS wells, two 2-inch diameter temporary vacuum probes and four former conduit pipes located along the south side of the concrete pad (two 2-inch diameter and two 4-inch diameter steel pipes). See Figure 2.

Badger Drilling mobilized a D-120 drill rig which had a Waukesha SP-50 hose pump mounted on the rig along with 500 gallons of potable water. Two additional water tanks were mobilized to the site consisting of one 1000-gallon tank and one 375-gallon tank of potable water.

Well abandonment was conducted in accordance with WDNR Code NR 141.25. Prior to abandonment of the AS/SVE system, all wells were located, uncapped (SVE wells only) and valves opened. The top of the 4-inch diameter SVE wells were broken off and abandoned with 3/8-inch bentonite chips. See Appendix C for well abandonment logs. The 2-inch AS wells were not easily accessible due to their depth below the surface within the vault and the steel connections to the lateral piping system near the top of the 2-inch pipe. In order to visually ensure grout would be flowing into the 2-inch wells, the sampling ports were opened. This allowed grout to flow when pressure was applied (See photograph 6 in Appendix E).

The grout plant consisted of the Waukesha SP-50 hose pump mounted on the rig along with a 200-gallon metal tub and two hoses. In addition, adapters were assembled to hook into the former treaded pipes located along the south edge of the concrete pad. These pipes connected the entire AS/SVE system. The adapters converted the 4 and 2- inch diameter threaded pipes

into a 1-inch diameter quick connect cam that fit onto the grouting hose to allow grout to be pumped into the system under pressure.

Grout consisted of approximately 180 pounds of Aquagel Premium/Nontreated bentonite mixed with approximately 150 gallons of water. This ratio exceeded the manufacturer's minimum ratio of 70-95 pounds per 100 gallons of water to achieve the desired thicker mixture. Grout was pumped into the system under approximately 10 to 15 psi of pressure. The SVE well valves were closed off at each individual location when the laterals filled up with grout and started to overtop the well. The AS well valve was shut off when the grout started to spurt out of the sampling valves and/or seep into the vault itself.

During the grout injection into the former AS/SVE system, grout seeped up from the ground near AS-W3, AS-E3 and SVE-E6 which was a direct result of the system being completely filled with grout bentonite under pressure causing the surplus grout to seep out into the surrounding sand fill. The SVE-E6 well, formerly located under the FTBP1 cap could not be located and was most likely abandoned in September 2001 during the anaerobic soil treatment phase which involved mixing the soil in the FTBP1 remediation area. The surface seepage near the former location of SVE-E6 confirmed that the lateral line leading to the FTBP1 treated area was filled with grout.

Two 2-inch diameter temporary vacuum probes were abandoned in accordance with WDNR Code NR 141.25. The wells were filled with bentonite grout and cut off below the surface. The remainder of the hole was then backfilled with native soil. Temporary vacuum probe TVP3, formerly located inside the FTBP1 could not be located. It was most likely abandoned during the September 2001 remediation of the area along with SVE-E6. Abandonment logs for the AS/SVE wells, 2-inch and 4-inch lateral pipes and temporary vacuum probes can be found in Appendix C.

A total of approximately 900 gallons of bentonite grout was pumped into the AS/SVE system. All vaults were backfilled with River City Ready Mix concrete trucked in on-site. The concrete specification was 3000 psi strength. The concrete filled the entire vault until it was flush with the surface. A trowel was then used to make a smooth surface.

All debris including metal lids, pipe and miscellaneous debris was hauled off site by the subcontractor for recycling or disposal. The former concrete pad was left in place as agreed.

5.0 HEALTH AND SAFETY

The KEMRON Health and Safety Plan (HASP) was followed for work performed at FTBP1. The HASP was modified to reflect the tasks of the remediation. KEMRON also held a Health and Safety kickoff meeting and subsequent daily health and safety meetings to address the health and safety concerns and the daily scope of work. In addition, real time air monitoring using a PID meter showed no exceedances of VOCs in the exclusion zone. Refer to Appendix D for the air sampling log sheet.

6.0 PHOTOGRAPHIC DOCUMENTATION

KEMRON personnel provided full time construction oversight services and documented all work activities with numerous photographs and log entries. Tim Duda, Project Geologist, provided oversight of the AS/SVE system and well abandonment. The photographs are presented in Appendix E.

7.0 CONCLUSIONS AND RECOMMENDATIONS

KEMRON has completed the AS/SVE system abandonment at FTBP1 in accordance with agreed procedures. The former AS/SVE system including AS/SVE wells and temporary vacuum probes were filled with bentonite grout and/or bentonite chips in accordance with WDNR Code NR 141.25. All vaults were filled with a concrete mix flush with the existing pad. The working area was cleaned and hosed down at completion of services. This work concludes AS/SVE abandonment activities at the FTBP1.

The existing groundwater monitoring wells at FTBP1 will continue to be sampled on a semi-annual basis until such time that the groundwater data supports cessation of groundwater monitoring. Once USEPA approves the cessation of groundwater monitoring at the site, all groundwater monitoring wells at the site will be abandoned.

8.0 REFERENCES

KEMRON Environmental Services, Inc., 2006. Fort McCoy Final Health and Safety Plan for Fire Training Burn Pit #1 Version 4.0.

KEMRON Environmental Services, Inc., 2005. Fort McCoy Soil Sampling and Analysis Plan for Fire Training Burn Pit #1.

KEMRON Environmental Services, Inc., 2005. Fort McCoy Final and Draft Final Sampling and Analysis Plan Rev 3.0.

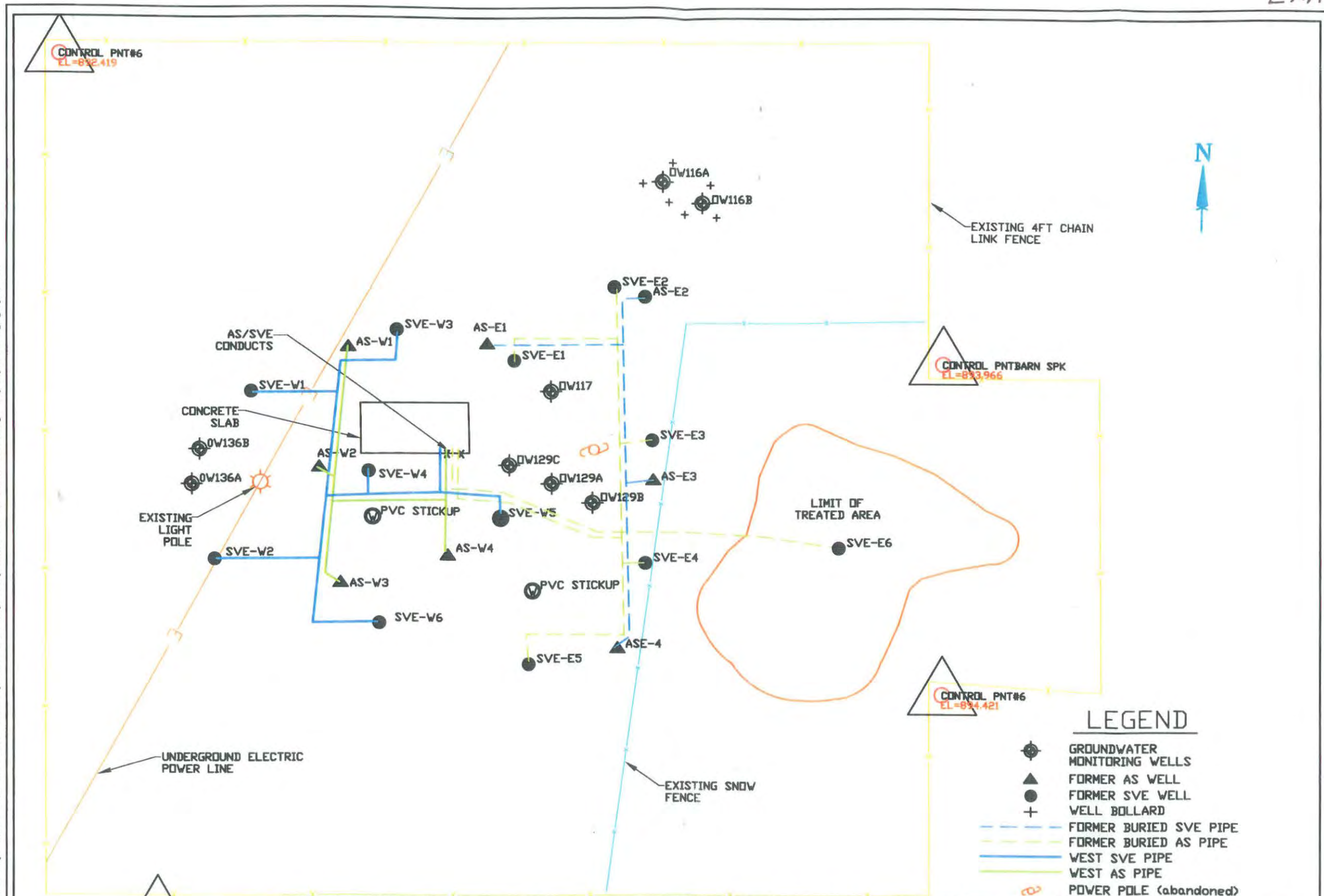
KEMRON Environmental Services, Inc., 2005. Fort McCoy Quality Assurance Project Plan.

Earth Tech, 2000. Contract Documents for In-Situ Soil Remediation for Former Fire Training Burn Pit 1.

SEC Donohue, November 1994, RCRA Facility Investigation, Final Report and Addendum (1995)

FIGURES

M:\SE-ATLANTA PROJECTS\0 USARC-001-001 FORT McCODY\U0027 AA 001\1-06\ BURN PIT 1, EXIST. COND.dwg 01/26/2006 kggrigoryan CH



CONTROL PNT#6
EL=892.419

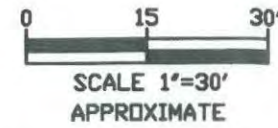
CONTROL PNT#6
EL=893.966

CONTROL PNT#6
EL=894.421

CONTROL PNT#6
EL=893.983

LEGEND

- GROUNDWATER MONITORING WELLS
- FORMER AS WELL
- FORMER SVE WELL
- WELL BOLLARD
- FORMER BURIED SVE PIPE
- FORMER BURIED AS PIPE
- WEST SVE PIPE
- WEST AS PIPE
- POWER POLE (abandoned)

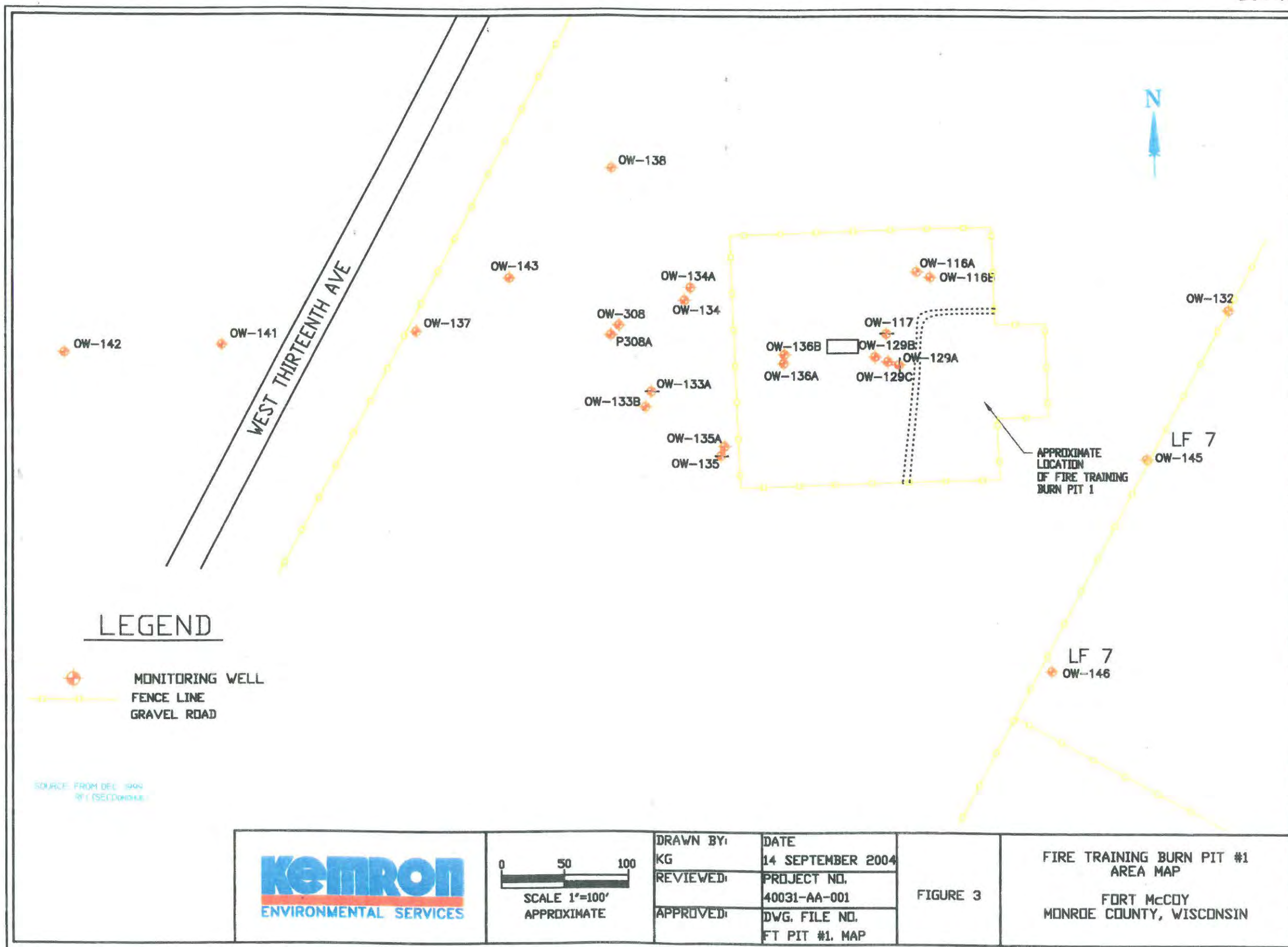


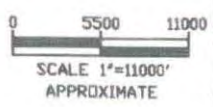
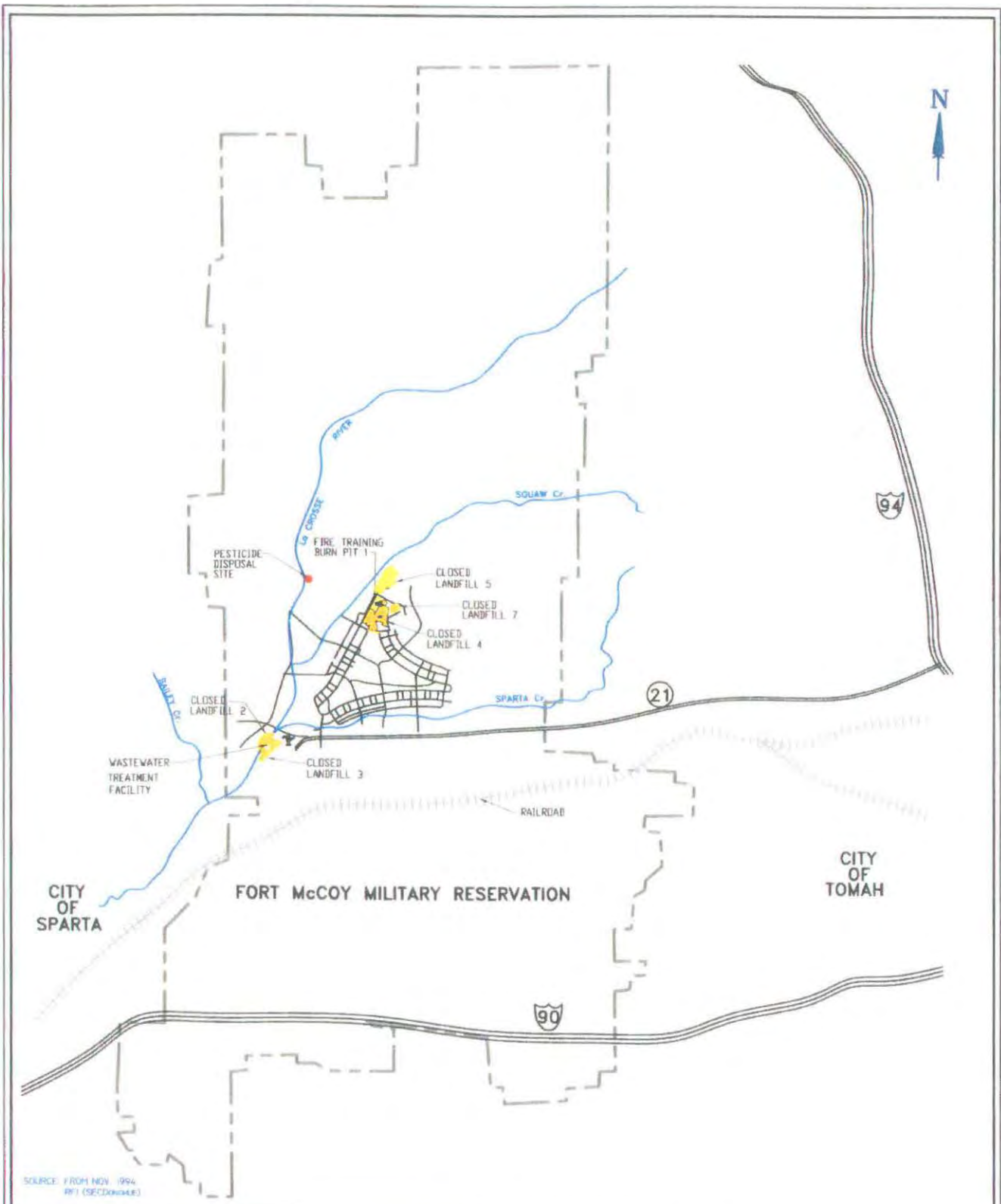
DRAWN BY:	KG	DATE:	25 JANUARY 2006
REVIEWED:	R	PROJECT NO.:	U0027-AA-003
APPROVED:	2	DWG. FILE NO.:	EXIST. CONDITIONS

FIGURE 3

EXISTING CONDITIONS
FIRE TRAINING
BURN PIT #1
FORT McCODY WISCONSIN

SOURCE: MSA PROFESSIONAL SERVICE, 7-7-2005



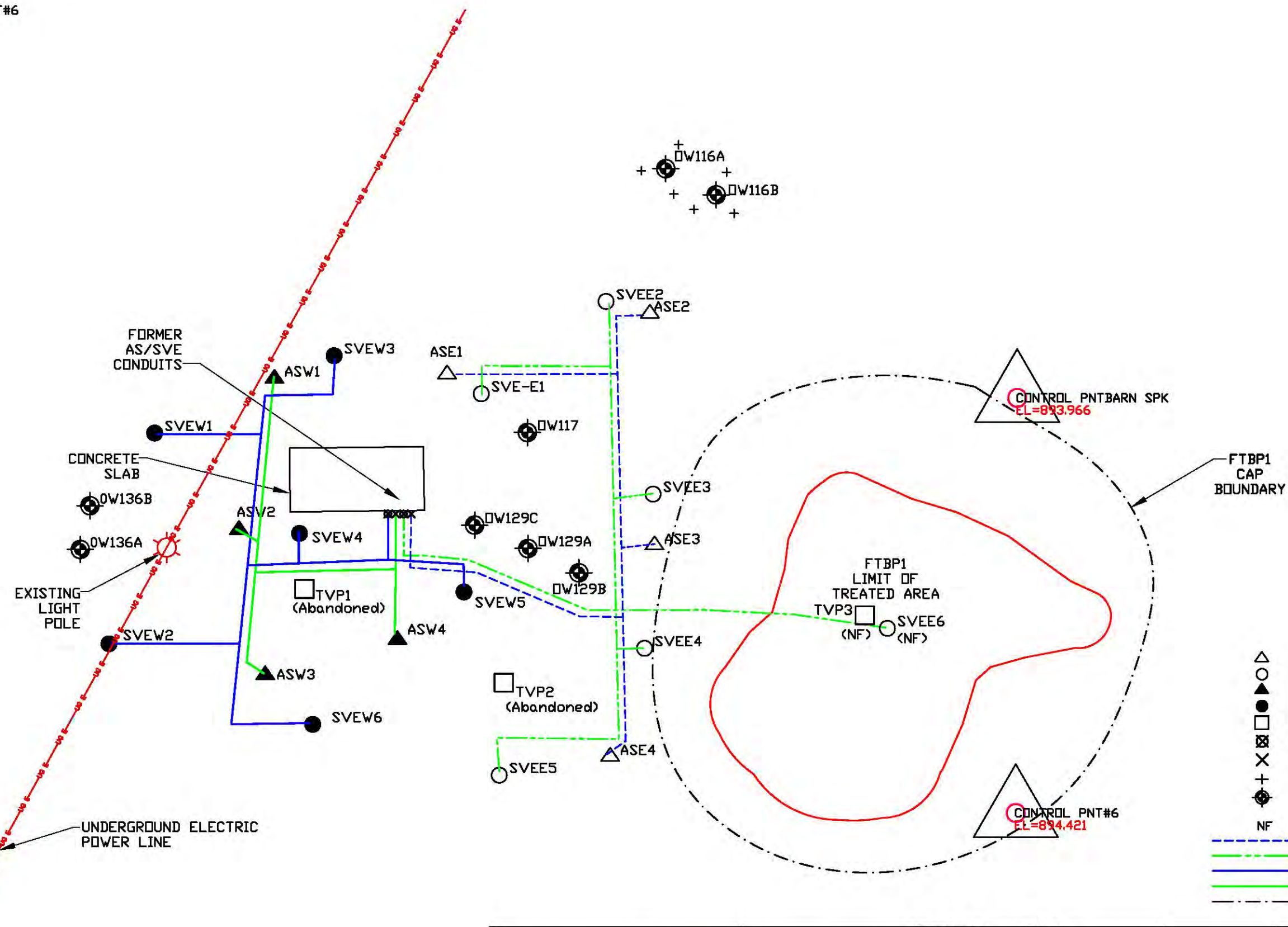


DRAWN BY:	KG	DATE:	10 SEPTEMBER 2004
REVIEWED:		PROJECT NO.:	40031-AA-001
APPROVED:		DWG. FILE NO.:	SWMU LOC. MAP

FIGURE 1

GENERAL SITE
 FORT McCOY
 MONROE COUNTY, WISCONSIN

CONTROL PNT#6
EL=892.419



LEGEND

- △ FORMER EAST AS WELL (abandoned)
- FORMER EAST SVE WELL (abandoned)
- ▲ FORMER WEST AS WELL (abandoned)
- FORMER WEST SVE WELL (abandoned)
- TEMPORARY VACUUM PROBE (abandoned)
- ⊗ CONDUIT (4") SVE
- ⊗ CONDUIT (2") AS
- + WELL BOLLARD
- ⊕ GROUNDWATER MONITORING WELLS
- NF NOT FOUND
- FORMER EAST AS PIPE (abandoned)
- FORMER EAST SVE PIPE (abandoned)
- FORMER WEST SVE PIPE (abandoned)
- FORMER WEST AS PIPE (abandoned)
- - - FTBP1 CAP

M:\0 USARIC-001-001 FORT MCCOY & MARION\0027 AB DOA\ FORMER AS, SVE, SYSTEM M.dwg 10/24/2007 kprigoyen.ch

SOURCE: MSA PROFESSIONAL SERVICE, 7-7-2005

	<p>SCALE 1"=20' (approximate)</p>	DRAWN BY: KG	DATE 24 OCTOBER 2007	FIGURE 2	FORMER AIR SPARGING/SOIL VAPOR EXTRACTION (AS/SVE) SYSTEM FIRE TRAINING BURN PIT #1 FORT MCCOY WISCONSIN
	APPROVED: LGE	PROJECT NO. U0027-AB-004	DWG. FILE NO. FORMER AS/SVE		



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

DW-8J

September 25, 2006

Mr. Alan Balliett
Directorate of Support Services
ATTN: AFRC-FM-SSP-E(Balliett)
Department of the Army
Headquarters Fort McCoy
2171 S. 8th Ave.
Fort McCoy, WI 54656-5136

Dear Mr. Balliett,

Review has been completed for the Remedial Action Completion Report for Fire Training Burn Pit #1 (FTBP1), dated August 11, 2006. This report documents construction and sampling activities at FTBP1. This remedial action was undertaken to remove soil exceeding the cleanup goals in one grid area for this unit. The report states that the soil removal was successful and that subsequent sampling showed no exceedances of the cleanup goal in samples collected from the floor and in the sidewalls of the excavation.

The Remedial Action Completion Report is approved. Completion of construction activities at FTBP1 also completes all planned construction activities for Corrective Action at Fort McCoy. A Construction Complete determination will be entered in to the U.S. EPA Corrective Action database using this letter as the basis for the determination. This is considered to be an important milestone in the path to completion of Corrective Action at a RCRA facility.

If you have any questions regarding this approval, please contact me at (312) 886-6212.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert J. Egan", with a long horizontal line extending to the left.

Robert J. Egan
Corrective Action Project Manager
Waste Management Branch

cc: Mae Willkom, WDNR West Central Region, Eau Claire



**DEPARTMENT OF THE ARMY
US ARMY INSTALLATION MANAGEMENT COMMAND
HEADQUARTERS, UNITED STATES ARMY GARRISON, FORT MCCOY
2171 SOUTH 8TH AVENUE
FORT MCCOY, WI 54656-5136**

December 12, 2006

Mr. Bob Egan
USEPA - Region 5
Attn: DW-8J
77 W. Jackson Blvd.
Chicago, IL 60604

Ms. Mae Willkom
Wisconsin Department of Natural Resources
P.O. Box 4001
Eau Claire, WI 54702-4001

**Re: Fire Training Burn Pit #1
Request to Abandon AS/VES System and Revise
The Groundwater Monitoring Plan
Fort McCoy, WI**

Dear Mr. Egan and Ms. Willkom:

This letter requests USEPA and WDNR to allow certain changes to be made to the existing groundwater monitoring program at the former Fire Training Burn Pit #1 (FTBP1). The requested changes include abandonment of the former AS/VES System and a reduction of the number of monitoring wells and parameters of the wells that will remain in the sampling program. This letter describes the procedures for abandonment and provides a schedule for proposed field activities.

AS/VES System Abandonment

As you are aware, the soil remediation activities for FTBP1 were completed on August 11, 2006. A construction certification letter with confirmatory laboratory testing data was sent to you on the same date. The roll-off boxes containing contaminated soil were removed from the site and disposed at the Cranberry Creek Landfill on September 12. Remaining activities related to the site closure include abandonment of the former AS/VES System.

The lateral extent of the former AS/VES System is shown on Exhibit 1. As discussed with you in the field on August 8, 2006, the buried pipes of the former system will be left in

place. All pipes extending above ground surface will be filled with a bentonite slurry grout mixture that can be injected under pressure. As such, the AS/VES system pipes will be abandoned in general accordance with NR 141.25 requirements. The flush mounted concrete vaults will be backfilled to grade with concrete. The cast iron lids will be salvaged for recycling. All remaining PVC pipes and metal pipes will be cut off below grade after grouting operations have been completed. The former concrete pad will be left in place.

Revisions to Groundwater Monitoring Plan

A conference call was held on September 19 between WDNR, USEPA, Fort McCoy, and Kemron. During this call, it was agreed to revise the current groundwater monitoring plan with the primary purpose of collecting additional data to demonstrate closure requirements for the site are being achieved. The revisions to the plan are described in the following paragraphs.

1. The existing groundwater monitoring well location plan is shown on Exhibit 2. As shown, there are a total of 22 existing wells and piezometers in the FTBP1 program, of which 15 are currently sampled on a semi-annual basis. Of these, 11 have been selected to remain in the sampling program. Pursuant to our conference call, the wells that will remain in the sampling plan include: OW-117, OW-133A, OW-133B, OW-134, OW-134A, OW-136B, OW-137, OW-141, OW-308, OW-308A, and OW-145. OW-145 is currently a part of adjacent Landfill 7. This well will serve as the new upgradient well and will replace the current upgradient well, OW-116A.

2. The remaining wells will be left intact and maintained with locked protective covers until the site has been approved for closure. At that time all wells will be abandoned in accordance with NR 141.25 procedures.

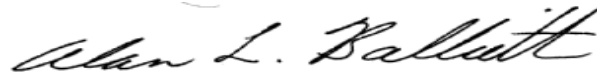
3. The parameters for laboratory testing will be reduced to select VOCs (e.g. PCE, TCE, DCE, and VC) using the 8260 Method in the 11 selected wells. The wells will be sampled for two additional rounds (winter 2006 and spring 2007) and the parameter trends will be tabulated and presented, as described in paragraph 4 below. A conference call will then be scheduled with the USEPA and WDNR to discuss the results and determine the future course of actions at the site.

4. Trends of select parameters (e.g. PCE, TCE, DCE, and VC) will be tabulated on an ongoing basis and submitted with the semi-annual laboratory test reports. The trends will be used to

measure the natural progress of the FTBP1 remediation. Once there is agreement that the data demonstrates a stable or declining trend, Fort McCoy will submit an application for closure.

Please contact me at (608) 388-4776 if you have any questions.

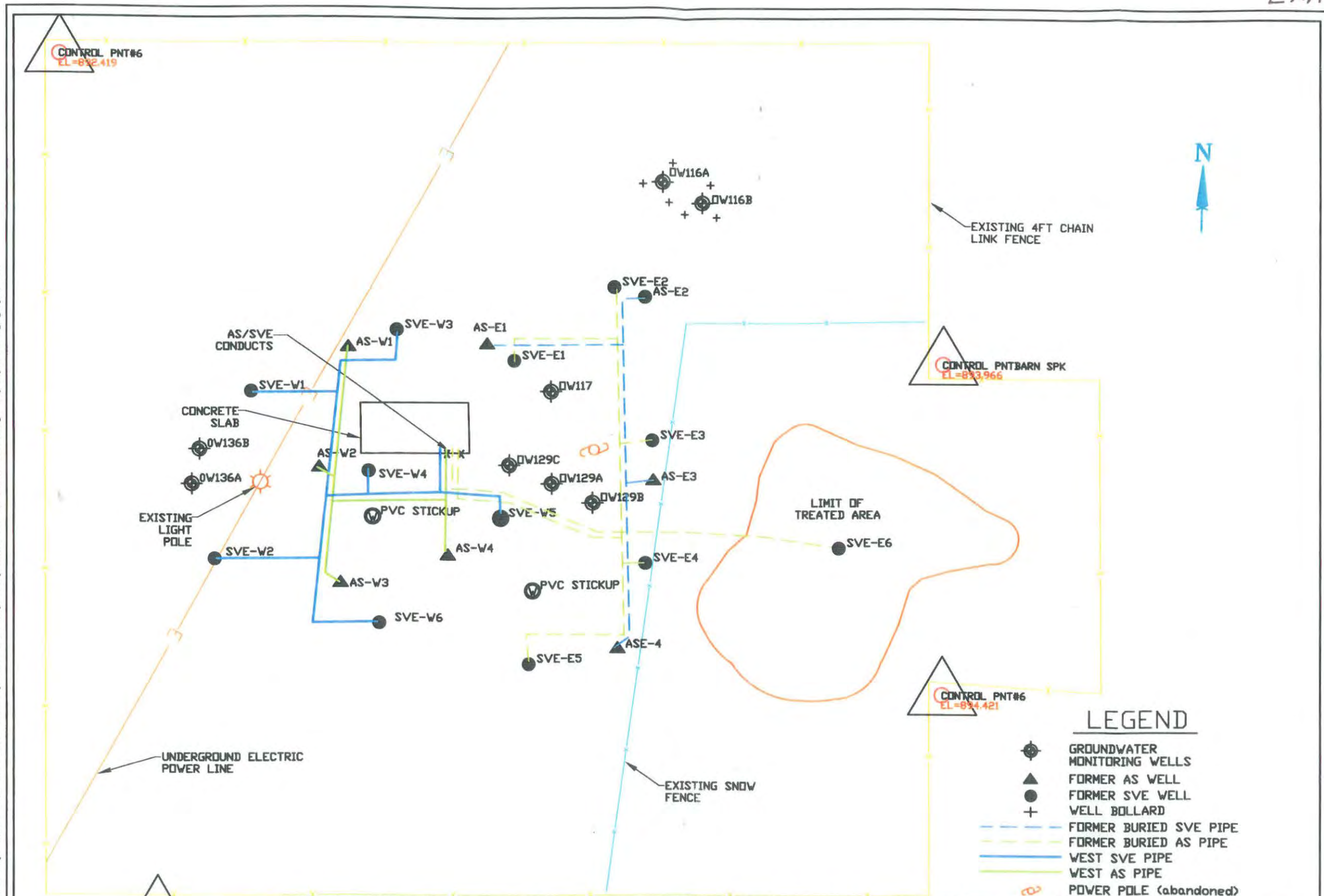
Sincerely,

A handwritten signature in cursive script that reads "Alan L. Balliett".

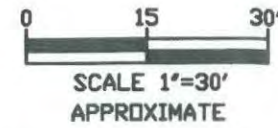
Alan L. Balliett
Chief, Environmental Branch

cc: Richard Mendoza, USAEC
Heidi Novotny, USACE
Danny Walsh, USAEC
Larry Emerson, KEMRON

M:\SE-ATLANTA PROJECTS\0 USARC-001-001 FORT McCODY\U0027 AA 001\1-06\ BURN PIT 1, EXIST. COND.dwg 01/26/2006 kggrignon CH



CONTROL PNTBARN SPK
EL=893.983

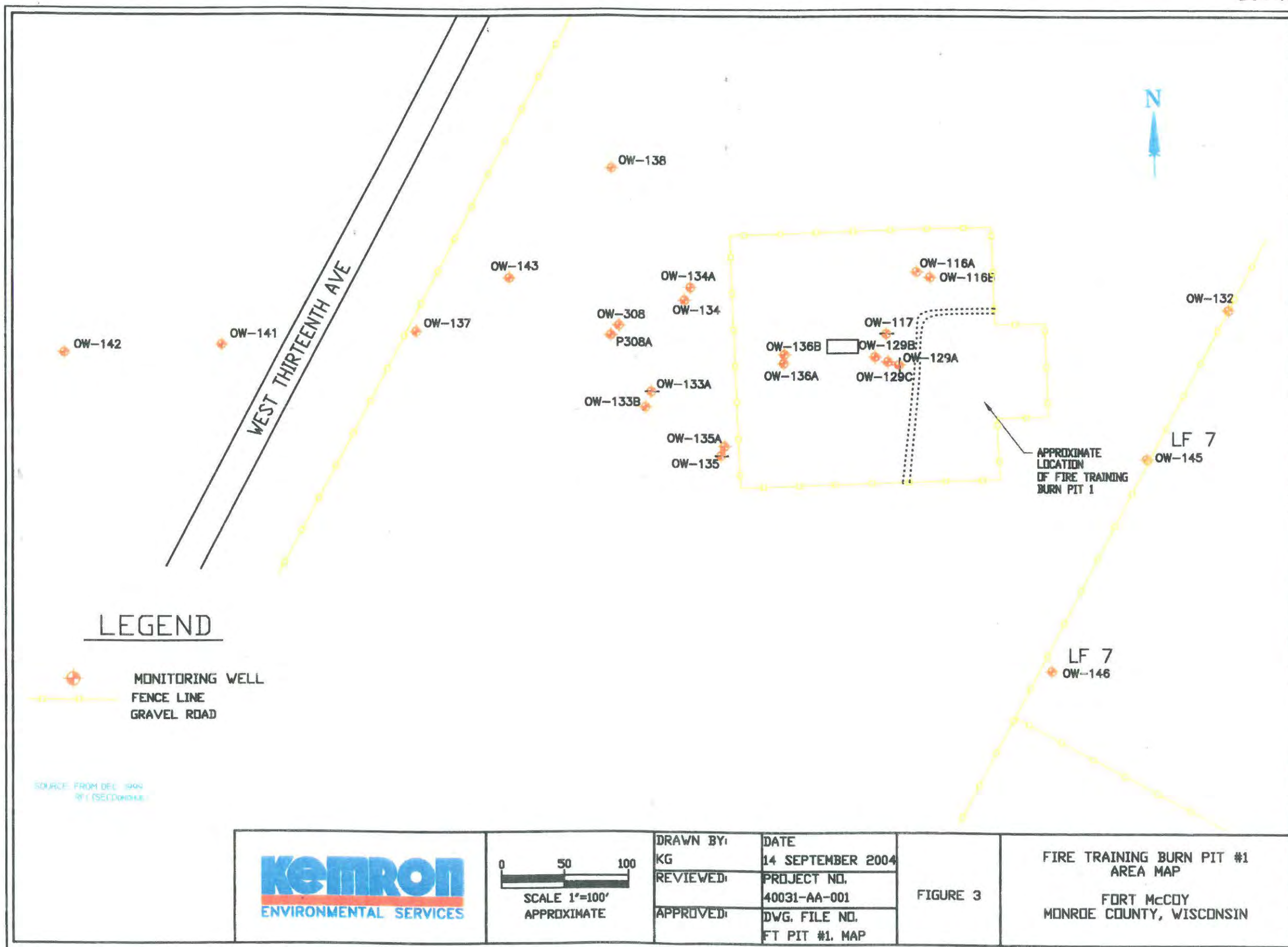


DRAWN BY:	KG	DATE:	25 JANUARY 2006
REVIEWED:	R	PROJECT NO.:	U0027-AA-003
APPROVED:	2	DWG. FILE NO.:	EXIST. CONDITIONS

FIGURE 3

EXISTING CONDITIONS
FIRE TRAINING
BURN PIT #1
FORT McCODY WISCONSIN



SOURCE: MSA PROFESSIONAL SERVICE, 7-7-2005



LEGEND

-  MONITORING WELL
-  FENCE LINE
-  GRAVEL ROAD

SOURCE: FROM DEC. 1999
RF (SECTION 1)

	 SCALE 1"=100' APPROXIMATE	DRAWN BY: KG	DATE: 14 SEPTEMBER 2004	FIGURE 3	FIRE TRAINING BURN PIT #1 AREA MAP FORT McCOY MONROE COUNTY, WISCONSIN
		REVIEWED:	PROJECT NO. 40031-AA-001		
		APPROVED:	DWG. FILE NO. FT PIT #1. MAP		

Tim Duda

From: Larry Emerson **Sent:** Wed 10/24/2007 11:09 AM
To: Tim Duda
Cc:
Subject: FW: Fire Training Burn Pit 1- Letter Request Concurrence
Attachments:

-----Original Message-----

From: Egan.Robert@epamail.epa.gov [mailto:Egan.Robert@epamail.epa.gov]
Sent: Tuesday, May 22, 2007 8:22 AM
To: Larry Emerson
Subject: Fw: Fire Training Burn Pit 1- Letter Request Concurrence

Larry,

I concur with Mae's e-mail below. You may sample groundwater according to the plan you had submitted, and abandon the AS/SVE system this summer. Please refer to the Federal permit modification for the Media Cleanup Standards which are to be met prior to completion of monitoring at FTBP1.

Please give me a call if you have any questions.

Bob Egan
 Corrective Action Project Manager
 U.S. EPA Region 5
 312.886.6212
 312.353.4788 (fax)
 ----- Forwarded by Robert Egan/R5/USEPA/US on 05/22/2007 08:18 AM -----

"Willkom, Mae -
 DNR"
 <Mae.Willkom@Wisconsin.gov>
 To
 "Larry Emerson"
 05/18/2007 10:40 AM <lemerson@kemron.com>, Robert
 Egan/R5/USEPA/US@EPA
 cc
 "Balliett, Alan L CIV USA IMCOM"
 <alan.balliett@us.army.mil>,
 "Richard Mendoza \ (External)"
 <richard.r.mendoza@us.army.mil>,
 "Heidi Novotny \ (External)"
 <heidi.l.novotny@usace.army.mil>,
 "Danny Walsh \ (External)"
 <dwalsh@eeimail.com>, "Lou
 Ehrhard" <lehrhard@kemron.com>,
 "Tracy Bergquist"
 <tbergquist@kemron.com>, "Sharon
 O'Flaherty"
 <soflaherty@kemron.com>

Subject
RE: Fire Training Burn Pit 1-
Letter Request Concurrence

Larry,

I am in substantial concurrence with this letter, except for one important clarification. The letter states, "Once there is agreement that the data demonstrates a stable or declining trend, Fort McCoy will submit an application for closure." Although a stable or declining trend is often a key factor in meeting state closure requirements, it is not the sole criterion. In this case, there are site-specific federal requirements in a 10/1/01 permit modification that will have to be met.

P Mae E. Willkom
Hydrogeologist
Remediation and Redevelopment
Wisconsin Department of Natural Resources
() phone: (715) 839-3748
() fax: (715) 839-6076
(+) e-mail: mae.willkom@wisconsin.gov

From: Larry Emerson [mailto:lemerson@kemron.com]
Sent: Thursday, May 17, 2007 11:00 AM
To: Willkom, Mae - DNR; Egan.Robert@epamail.epa.gov
Cc: Balliett, Alan L CIV USA IMCOM; Richard Mendoza (External); Heidi Novotny (External); Danny Walsh (External); Lou Ehrhard; Larry Emerson; Tracy Bergquist; Sharon O'Flaherty
Subject: Fire Training Burn Pit 1- Letter Request Concurrence

Mae/Bob:

On December 8, 2006 KEMRON prepared a letter of understanding regarding the verbally agreed to changes to the Groundwater Monitoring Plan and abandonment plans for the existing AS/VES system at the Fire Training Burn pit 1. The letter was approved by our client AEC, signed by Alan Balliett and submitted to you both, based on telephone conversations with you. KEMRON subsequently revised the SAP and implemented the changes during the latest round (December 2006) of groundwater sampling at the Fire Pit. As you will recall, the revisions included a reduced number of groundwater wells and parameters for sampling at the

Fire Pit. Additionally, the letter outlined the schedule for the AS/VES system abandonment, tentatively slated for this summer, pending your concurrence.

KEMRON has not received any documents from you regarding your concurrence with the letter, even though we had received verbal approvals on the content of the letter, and performed the revised sampling procedures, with your verbal approvals. We are therefore respectfully requesting acknowledgement that you concur with the letter. This acknowledgement is a requirement for approval of payment with our client. A simple reply to this email to all copied recipients will suffice for our records and approval process.

Thank you.

Larry Emerson, P.E.
Senior Project Manager
KEMRON Environmental Services, Inc.
Fort Sheridan, IL 60037
847.266.1350x15 (O) 847.266.3584 (F)
847.815.3768 (C)
lemerson@kemron.com
visit us at www.kemron.com

From: Gelhaus, Timothy C CTR USA IMCOM [mailto:tim.gelhaus@us.army.mil]
Sent: Fri 9/28/2007 3:52 PM
To: Al Balliett (External)
Cc: Tim Duda
Subject: FTBP1 Access (UNCLASSIFIED)

Mr. Williams,

Please allow the Army Environmental Command's contractor KEMRON to complete their contract requirements for abandonment of the SVE/Sparge piping located at the Former Fire Training Burn Pit #1. This site is under the jurisdiction of the EPA, Region V remedial division as well as the Wisconsin Department of Natural Resources Remediation and Redevelopment Division. The abandonment action is required by both agencies.

Work will start on 15 Oct 2007 through 17 Oct 2007. If you have any questions, please feel free to give me a call.

Tim Gelhaus

Environmental Manager

VT Griffin

Phone: (608) 388-4787

Mobile: (608) 487-0331

Fax: (608) 388-6235

Email: tim.gelhaus@us.army.mil

2171 South 8th Avenue

Fort McCoy, WI 54656

Classification: **UNCLASSIFIED**
Caveats: NONE

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name: SVE-W1		Gov't Lot (If applicable)	Facility ID
1/4 of 1/4 of Sec. 13 ; T. 18 N; R. 3			License/Permit/Monitoring No.
Grid Location			Street Address of Well
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			3050 WEST N STREET
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>			City, Village, or Town
Lat. " Long. "			FORT McCOY; TOWN OF LAFAYETTE
St. Plane ft. N. ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Present Well Owner
Reason For Abandonment		WI Unique Well No.	Original Owner
SITE CLOSURE		of Replacement Well	
			Street Address or Route of Owner
			City, State, Zip Code

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other (Specify)		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Formation Type:		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material	
Total Well Depth (ft.) 10.15 Casing Diameter (in.) 4		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
(From ground surface) Casing Depth (ft.)		<input type="checkbox"/> Screened & Poured (Bentonite Chlps) <input checked="" type="checkbox"/> Other (Explain) GRAVITY	
Lower Drillhole Diameter (in.) NA		Sealing Materials	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout	
If Yes, To What Depth? Feet		For monitoring wells and monitoring well boreholes only	
Depth to Water (Feet) DRY		<input checked="" type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
		<input type="checkbox"/> Concrete	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chlps	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	10.15	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<i>[Signature]</i>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

Route 10: Drinking Water Watershed/Wastewater Waste Management Remediation/Redevelopment Other

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-W2</u>		Gov't Lot (If applicable)	Facility ID
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>8</u> N.; R. <u>3</u> E.			License/Permit/Monitoring No.
Grid Location			Street Address of Well
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			<u>3050 WEST N STREET</u>
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>			City, Village, or Town
Lat. _____ Long. _____ or			<u>FORT McCOY; TOWN OF LAFAYETTE</u>
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Present Well Owner
Reason For Abandonment		WI Unique Well No. of Replacement Well	Original Owner
<u>SITE CLOSURE</u>			
			Street Address or Route of Owner
			City, State, Zip Code

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Formation Type:		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material	
Total Well Depth (ft.) <u>9.5</u> Casing Diameter (in.) <u>4</u>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
(From ground surface) Casing Depth (ft.) _____		<input type="checkbox"/> Screened & Poured (Bentonite Chps) <input type="checkbox"/> Other (Explain)	
Lower Drillhole Diameter (in.) <u>NA</u>		Sealing Materials	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Depth to Water (Feet) <u>DRY</u>		<input type="checkbox"/> Concrete	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chps	
		For monitoring wells and monitoring well boreholes only	
		<input checked="" type="checkbox"/> Bentonite Chps	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	9.5	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name	Gov't Lot (If applicable)	Facility ID	License/Permit/Monitoring No.
SVE-W3			
Grid Location	1/4 of 1/4 of Sec. 13 ; T. 18 N; R. 3	Street Address of Well	
		3050 WEST N STREET	
Local Grid Origin	(estimated:) or Well Location	City, Village, or Town	
		FORT McCOY; TOWN OF LAFAYETTE	
Lat.	Long	Present Well Owner	Original Owner
Reason For Abandonment	WI Unique Well No. of Replacement Well	Street Address or Route of Owner	
SITE CLOSURE			
City, State, Zip Code			

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date	If a Well Construction Report is available, please attach.	Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Liner(s) Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
Construction Type:		Screen Removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Formation Type:		Was Casing Cut Off Below Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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
Total Well Depth (ft.) 10.5 Casing Diameter (in.) 4		Did Material Settle After 24 Hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(From ground surface) Casing Depth (ft.)		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lower Drillhole Diameter (in.) NA		Required Method of Placing Sealing Material	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
If Yes, To What Depth? Feet		<input type="checkbox"/> Screened & Poured (Bentonite Chlps) <input type="checkbox"/> Other (Explain)	
Depth to Water (Feet) 10.2		Sealing Materials	For monitoring wells and monitoring well boreholes only
		<input type="checkbox"/> Neat Cement Grout	<input checked="" type="checkbox"/> Bentonite Chlps
		<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Granular Bentonite
		<input type="checkbox"/> Concrete	<input type="checkbox"/> Bentonite - Cement Grout
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	<input type="checkbox"/> Bentonite - Sand Slurry
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chlps	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	10.5	0.85 FT ³		dry mix

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
David Cisse		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

B3D # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT Mc COY SVE ABANDONMENT
Common Well Name <u>SVE-W4</u>		Gov't Lot (If applicable)	
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u> E		Facility ID	
Grid Location <input checked="" type="checkbox"/> W		License/Permit/Monitoring No.	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		Street Address of Well	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		3050 WEST N STREET	
Lat. _____ Long _____ or		City, Village, or Town	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> N Zone		FORT Mc COY, TOWN OF LAFAYETTE	
Reason For Abandonment		Present Well Owner	
SITE CLOSURE		Original Owner	
WI Unique Well No. of Replacement Well		Street Address or Route of Owner	
		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION	(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL
Original Construction Date _____ <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (Specify) _____ Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock Total Well Depth (ft.) <u>11.6</u> Casing Diameter (in.) <u>4</u> (From ground surface) Casing Depth (ft.) _____ Lower Drillhole Diameter (in.) <u>NA</u> Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown If Yes, To What Depth? _____ Feet Depth to Water (Feet) <u>DRY</u>	Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chps) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u> Sealing Materials For monitoring wells and monitoring well boreholes only <input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Bentonite - Sand Slurry <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Bentonite - Sand Slurry <input type="checkbox"/> Bentonite Chips

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	11.6	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<i>[Signature]</i>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-W5</u>		Gov't Lot (If applicable)	Facility ID
			License/Permit/Monitoring No.
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u> E.		Street Address of Well	
Grid Location <input checked="" type="checkbox"/> W		<u>3050 WEST N STREET</u>	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		<u>FORT McCOY; TOWN OF LAFAYETTE</u>	
Lat. _____ Long _____ or _____		Present Well Owner	Original Owner
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> N Zone		Street Address or Route of Owner	
Reason For Abandonment	WI Unique Well No.	City, State, Zip Code	
<u>SITE CLOSURE</u>	of Replacement Well _____		

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 (ft.) <u>10.2</u>	Casing Diameter (in.) <u>4</u>	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
(From ground surface)	Casing Depth (ft.) _____	Sealing Materials	
Lower Drillhole Diameter (in.) <u>NA</u>		For monitoring wells and monitoring well boreholes only	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Bentonite Chips	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite	
Depth to Water (Feet) <u>10.0</u>		<input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite Chips	

(5)	Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
	CONCRETE	Surface	1			
	3/8" BENTONITE CHIPS	1	10.2	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

B30# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-W6</u>		Gov't Lot (If applicable)	Facility ID
			License/Permit/Monitoring No.
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N; R. <u>3</u> E		Street Address of Well	
Grid Location <input checked="" type="checkbox"/> W		<u>3050 WEST N STREET</u>	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		<u>FORT McCOY; TOWN OF LAFAYETTE</u>	
Lat. _____ Long _____ or		Present Well Owner	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> N Zone		Original Owner	
Reason For Abandonment <u>SITE CLOSURE</u>		Street Address or Route of Owner	
WI Unique Well No. of Replacement Well _____		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 (ft.) <u>10-3</u> Casing Diameter (in.) <u>4</u>		<input type="checkbox"/> Screened & Poured (Bentonite Chlps) <input type="checkbox"/> Other (Explain)	
(From ground surface) Casing Depth (ft.) _____		Sealing Materials	
Lower Drillhole Diameter (in.) <u>NA</u>		<input type="checkbox"/> Neat Cement Grout	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Concrete	
Depth to Water (Feet) <u>10.15</u>		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input checked="" type="checkbox"/> Bentonite Chlps	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	10.15	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<i>[Signature]</i>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No. _____	DNR Well ID No. _____	County <u>MONROE</u>	
Common Well Name <u>SVE-E1</u>		Gov't Lot (If applicable) _____	
Grid Location ____ 1/4 of ____ 1/4 of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Facility Name <u>FORT McCOY SVE ABANDONMENT</u>	
____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		Facility ID _____	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		License/Permit/Monitoring No. _____	
Lat. _____ Long _____ or _____		Street Address of Well <u>3050 WEST N STREET</u>	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone _____		City, Village, or Town <u>FORT McCOY; TOWN OF LAFAYETTE</u>	
Reason For Abandonment <u>SITE CLOSURE</u>		Present Well Owner _____	
WI Unique Well No. _____ of Replacement Well _____		Original Owner _____	
		Street Address or Route of Owner _____	
		City, State, Zip Code _____	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION	(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL
Original Construction Date _____	Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well	Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input type="checkbox"/> Water Well	Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Borehole / Drillhole	Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Construction Type:	Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug	Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Other (Specify) _____	Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Formation Type:	If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Required Method of Placing Sealing Material
Total Well Depth (ft.) <u>10.25</u> Casing Diameter (in.) <u>4</u>	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped
(From ground surface) Casing Depth (ft.) _____	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>
Lower Drillhole Diameter (in.) <u>NA</u>	Sealing Materials
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Neat Cement Grout
If Yes, To What Depth? _____ Feet	<input type="checkbox"/> Sand-Cement (Concrete) Grout
Depth to Water (Feet) <u>10.05</u>	<input type="checkbox"/> Concrete
	<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)
	<input type="checkbox"/> Bentonite-Sand Slurry " "
	<input type="checkbox"/> Bentonite Chips
	For monitoring wells and monitoring well boreholes only
	<input checked="" type="checkbox"/> Bentonite Chips
	<input type="checkbox"/> Granular Bentonite
	<input type="checkbox"/> Bentonite - Cement Grout
	<input type="checkbox"/> Bentonite - Sand Slurry

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
<u>CONCRETE</u>	Surface	1			
<u>3/8" BENTONITE CHIPS</u>	1	10.25	<u>0.85 ft³</u>		<u>dry mix</u>

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work <u>Badger State Drilling Co., Inc.</u>		Date of Abandonment <u>10-15-07</u>
Signature of Person Doing Work <u>[Signature]</u>	Date Signed <u>10-17-07</u>	
Street or Route <u>360 Business Park Cr.</u>	Telephone Number <u>(608) 877-9770</u>	
City, State, Zip Code <u>Stoughton, WI 53589</u>		

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No. _____	DNR Well ID No. _____	County MONROE	Facility Name FORT McCOY SVE ABANDONMENT
Common Well Name SVE-E2 Gov't Lot (if applicable) _____		Facility ID _____	License/Permit/Monitoring No. _____
Grid Location ____ 1/4 of ____ 1/4 of Sec. 13 ; T. 18 N.; R. 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well 3050 WEST N STREET	
____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town FORT McCOY; TOWN OF LAFAYETTE	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		Present Well Owner _____ Original Owner _____	
Lat. _____ Long _____ or _____		Street Address or Route of Owner _____	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		City, State, Zip Code _____	
Reason For Abandonment SITE CLOSURE		WI Unique Well No. _____ of Replacement Well _____	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 (ft.) 9.9 Casing Diameter (in.) 4	(From ground surface) Casing Depth (ft.) _____	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY	
Lower Drillhole Diameter (in.) NA	Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	Sealing Materials	
If Yes, To What Depth? _____ Feet	Depth to Water (Feet) 9.55	For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input checked="" type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Bentonite Chips	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
BENTONITE SLURRY	1	9.9	6 GALS		THICK

(6) Comments: **FLUSH MOUNT WELL BOX LEFT IN-PLACE**

(7) Name of Person or Firm Doing Sealing Work Badger State Drilling Co., Inc.		Date of Abandonment 10-15-07
Signature of Person Doing Work <i>[Signature]</i>		Date Signed 10-17-07
Street or Route 360 Business Park Cr.	Telephone Number (608) 877-9770	
City, State, Zip Code Stoughton, WI 53589		

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-E3</u>		Gov't Lot (If applicable)	Facility ID
			License/Permit/Monitoring No.
Grid Location 1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N; R. <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S. ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		<u>3050 WEST N STREET</u>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		City, Village, or Town	
Lat. _____ Long _____ or _____		<u>FORT McCOY; TOWN OF LAFAYETTE</u>	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		Present Well Owner	
Reason For Abandonment <u>SITE CLOSURE</u>		Original Owner	
WI Unique Well No. of Replacement Well _____		Street Address or Route of Owner	
		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type: <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"/> Other (Specify) _____		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Formation Type: <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	
Total Well Depth (ft.) <u>10-3</u> Casing Diameter (in.) <u>4</u>		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(From ground surface) Casing Depth (ft.) _____		Required Method of Placing Sealing Material	
Lower Drillhole Diameter (in.) <u>NA</u>		<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 checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Screened & Poured (Bentonite Chlps) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
If Yes, To What Depth? _____ Feet		Sealing Materials	
Depth to Water (Feet) <u>10.1</u>		<input type="checkbox"/> Neat Cement Grout	
		For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Concrete <input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite-Sand Slurry " " <input checked="" type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite Chlps	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
BENTONITE SLURRY	1	10-3	6 GALS		THICK

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/TOWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-E4</u>		Gov't Lot (If applicable)	Facility ID
			License/Permit/Monitoring No.
Grid Location		Street Address of Well	
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N; R. <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W		<u>3050 WEST N STREET</u>	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		<u>FORT McCOY, TOWN OF LAFAYETTE</u>	
Lat. _____ Long _____ or _____		Present Well Owner	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		Original Owner	
Reason For Abandonment		Street Address or Route of Owner	
<u>SITE CLOSURE</u>			
WI Unique Well No. of Replacement Well		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Formation Type:		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material	
Total Well Depth (ft.) <u>10.45</u> Casing Diameter (in.) <u>4</u>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
(From ground surface) Casing Depth (ft.) _____		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
Lower Drillhole Diameter (in.) <u>NA</u>		Sealing Materials	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Depth to Water (Feet) <u>DRY</u>		<input type="checkbox"/> Concrete	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input checked="" type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	10.45	0.85 ft ³		DRY MIX

(6) Comments: _____

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>SVE-ES</u>		Gov't Lot (If applicable)	Facility ID
			License/Permit/Monitoring No.
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N; R. <u>3</u>			Street Address of Well
Grid Location <input type="checkbox"/> E <input checked="" type="checkbox"/> W			<u>3050 WEST N STREET</u>
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			City, Village, or Town
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>			<u>FORT McCOY; TOWN OF LAFAYETTE</u>
Lat. _____ Long _____ or _____			Present Well Owner
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Original Owner
Reason For Abandonment <u>SITE CLOSURE</u>		WI Unique Well No. of Replacement Well	Street Address or Route of Owner
			City, State, Zip Code

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Formation Type:		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material	
Total Well Depth (ft.) <u>10.1</u> Casing Diameter (in.) <u>4</u>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
(From ground surface) Casing Depth (ft.) _____		<input type="checkbox"/> Screened & Poured (Bentonite Chps) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
Lower Drillhole Diameter (in.) <u>NA</u>		Scaling Materials	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Depth to Water (Feet) <u>9.8</u>		<input type="checkbox"/> Concrete	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input checked="" type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
3/8" BENTONITE CHIPS	1	10.1	0.85 ft ³		DRY MIX

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<i>[Signature]</i>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

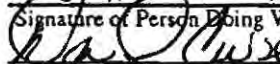
Route to: Drinking Water Watershed/Wastewater Waste Management Remediation/Redevelopment Other _____

(1) GENERAL INFORMATION			(2) FACILITY/OWNER INFORMATION		
WI Unique Well No.	DNR Well ID No.	County MONROE	Facility Name FORT McCOY SVE ABANDONMENT		
Common Well Name SVE-E6 Gov't Lot (If applicable)			Facility ID	License/Permit/Monitoring No.	
Grid Location ____ 1/4 of ____ 1/4 of Sec. 13 ; T. 18 N.; R. 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W			Street Address of Well 3850 WEST N STREET		
____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			City, Village, or Town FORT McCOY, TOWN OF LAFAYETTE		
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>			Present Well Owner		
Lat. _____ Long _____ or _____			Original Owner		
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Street Address or Route of Owner		
Reason For Abandonment SITE CLOSURE			City, State, Zip Code		
WI Unique Well No. of Replacement Well					

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION Original Construction Date _____ <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (Specify) _____ Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock Total Well Depth (ft.) _____ Casing Diameter (in.) _____ (From ground surface) Casing Depth (ft) _____ Lower Drillhole Diameter (in.) NA Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown If Yes, To What Depth? _____ Feet Depth to Water (Feet) _____	(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY Sealing Materials For monitoring wells and monitoring well boreholes only <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Bentonite Chlps <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input checked="" type="checkbox"/> Bentonite - Sand Slurry <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Bentonite Chlps
--	--

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealing or Volume	(Circle One)	Mix Ratio or Mud Weight
BENTONITE SLURRY	Surface		6 GALS		THICK

(6) Comments: **WELL INACCESSIBLE, COVERED WITH 3' GRAVEL, PUMPED SLURRY THRU LATERAL SYSTEM LINES.**

(7) Name of Person or Firm Doing Sealing Work Badger State Drilling Co., Inc.		Date of Abandonment 10-15-07	
Signature of Person Doing Work 		Date Signed 10-17-07	
Street or Route 360 Business Park Cr.		Telephone Number (608) 877-9770	
City, State, Zip Code Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

Route 10: Drinking Water Watershed/Wastewater Waste Management Remediation/Redevelopment Other _____

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No. _____	DNR Well ID No. _____	County MONROE	Facility Name FORT McCOY SVE ABANDONMENT
Common Well Name TVP-1 Gov't Lot (If applicable) _____		Facility ID _____	License/Permit/Monitoring No. _____
Grid Location ____ 1/4 of ____ 1/4 of Sec. 13 ; T. 18 N; R. 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well 3050 WEST N STREET	
____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S, ____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town FORT McCOY; TOWN OF LAFAYETTE	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		Present Well Owner _____ Original Owner _____	
Lat. _____ " Long _____ " or _____ " _____ "		Street Address or Route of Owner _____	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone _____		City, State, Zip Code _____	
Reason For Abandonment SITE CLOSURE		WI Unique Well No. _____ of Replacement Well _____	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION	(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL
Original Construction Date _____ <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (Specify) _____ Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock Total Well Depth (ft.) 10.4 Casing Diameter (in.) 2 (From ground surface) Casing Depth (ft.) _____ Lower Drillhole Diameter (in.) NA Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown If Yes, To What Depth? _____ Feet Depth to Water (Feet) DRY	Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input checked="" type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY Sealing Materials For monitoring wells and monitoring well boreholes only <input type="checkbox"/> Neat Cement Grout <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input checked="" type="checkbox"/> Bentonite - Sand Slurry <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Bentonite Chips

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
3/8" BENTONITE CHIPS	Surface	2 1/2	0.5		DRY MIX
BENTONITE SLURRY	2 1/2	10.4	1 1/2 GALS		THICK

(6) Comments: WELL OVERDRILLED TO 2 1/2' w/ 4 1/4 HSA.

(7) Name of Person or Firm Doing Sealing Work Badger State Drilling Co., Inc.		Date of Abandonment 10-16-07	
Signature of Person Doing Work <i>[Signature]</i>		Date Signed 10-17-07	
Street or Route 360 Business Park Cr.		Telephone Number (608) 877-9770	
City, State, Zip Code Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>TVP-2</u>		Gov't Lot (If applicable)	Facility ID
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u>			License/Permit/Monitoring No.
Grid Location <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		<u>3050 WEST N STREET</u>	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		City, Village, or Town	
Lat. _____ Long _____ or _____		<u>FORT McCOY, TOWN OF LAFAYETTE</u>	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		Present Well Owner	
Reason For Abandonment <u>SITE CLOSURE</u>		Original Owner	
WI Unique Well No. of Replacement Well _____		Street Address or Route of Owner	
		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Construction Type:		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Formation Type:		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Required Method of Placing Sealing Material	
Total Well Depth (ft.) <u>9.6</u>	Casing Diameter (in.) <u>2</u>	<input type="checkbox"/> Conductor Pipe-Gravity <input checked="" type="checkbox"/> Conductor Pipe-Pumped	
(From ground surface)	Casing Depth (ft.) _____	<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
Lower Drillhole Diameter (in.) <u>NA</u>		Sealing Materials	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Neat Cement Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Depth to Water (Feet) <u>DRY</u>		<input type="checkbox"/> Concrete	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input checked="" type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input checked="" type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	Mix Ratio or Mud Weight
<u>3/8" BENTONITE CHIPS</u>	Surface	<u>2 1/2</u>	<u>0.5 ft³</u>	<u>DRY MIX</u>
<u>BENTONITE SLURRY</u>	<u>2 1/2</u>	<u>9.6</u>	<u>1 1/2 GALS</u>	<u>THICK</u>

(6) Comments: WELL OVERDRILLED TO 2 1/2' w/ 1/4" HSA

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		<u>10-16-07</u>	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		<u>10-17-07</u>	
Street or Route		Telephone Number	
<u>360 Business Park Cr.</u>		<u>(608) 877-9770</u>	
City, State, Zip Code			
<u>Stoughton, WI 53589</u>			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCOY SVE ABANDONMENT
Common Well Name <u>2" SYSTEM</u> Gov't Lot (If applicable)		Facility ID	License/Permit/Monitoring No.
<u>1/4</u> of <u>1/4</u> of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well	
Grid Location		<u>3050 WEST N STREET</u>	
_____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., _____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		FORT McCOY, TOWN OF LAFAYETTE	
Lat. _____ Long _____ or _____		Present Well Owner	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> N Zone		Original Owner	
Reason For Abandonment		Street Address or Route of Owner	
<u>SITE CLOSURE</u>			
WI Unique Well No. of Replacement Well		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Driven (Sandpoint)		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Other (Specify) <u>PIPE LATERALS</u>		Required Method of Placing Sealing Material	
Formation Type:		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		<input type="checkbox"/> Screened & Poured (Bentonite Chlps) <input checked="" type="checkbox"/> Other (Explain) <u>PUMPED</u>	
Total Well Depth (ft.) _____ Casing Diameter (in.) <u>2</u>		Sealing Materials	
(From ground surface) Casing Depth (ft.) _____		<input type="checkbox"/> Neat Cement Grout	
Lower Drillhole Diameter (in.) <u>NA</u>		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Concrete	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
Depth to Water (Feet) <u>NA</u>		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chlps	
		For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Bentonite Chlps	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume (Circle One)	Mix Ratio or Mud Weight
BENTONITE SLURRY	Surface		180 GALS	THICK

(6) Comments: SVE SYSTEM LATERALS PUMPED FULL

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD # 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 285, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION			(2) FACILITY/OWNER INFORMATION		
WI Unique Well No.	DNR Well ID No.	County	Facility Name		
		MONROE	FORT McCOY SVE ABANDONMENT		
Common Well Name 4' SYSTEM Gov't Lot (If applicable)			Facility ID	License/Permit/Monitoring No.	
1/4 of 1/4 of Sec. 13; T. 18 N.; R. 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W			Street Address of Well		
Grid Location			3055 WEST N STREET		
ft. <input type="checkbox"/> N. <input type="checkbox"/> S. ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			City, Village, or Town		
Local Grid Origin (estimated:) or Well Location			FORT McCOY; TOWN OF LAFAYETTE		
Lat. Long. or			Present Well Owner		
St. Plane ft. N. ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Original Owner		
Reason For Abandonment			Street Address or Route of Owner		
SITE CLOSURE			City, State, Zip Code		
WI Unique Well No. of Replacement Well					

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date	If a Well Construction Report is available, please attach.	Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Liner(s) Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
Construction Type:		Screen Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Other (Specify) PIPE LATERALS		Was Casing Cut Off Below Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Formation Type:		Did Sealing Material Rise to Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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
Total Well Depth (ft.) Casing Diameter (in.) 4		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(From ground surface) Casing Depth (ft.)		Required Method of Placing Sealing Material	
Lower Drillhole Diameter (in.) NA		<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 checked="" type="checkbox"/> Unknown		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) PUMPED	
If Yes, To What Depth? Feet		Sealing Materials	
Depth to Water (Feet) NA		For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Clay-Sand Slurry (11 lb/gal. wt.) <input type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite-Sand Slurry " " <input checked="" type="checkbox"/> Bentonite - Sand Slurry	
		<input type="checkbox"/> Bentonite Chips	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
BENTONITE SLURRY	Surface		720 GALS		THICK

(6) Comments: SVE SYSTEM LATERALS PUMPED FULL

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<i>[Signature]</i>		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT MCCOY SVE ABANDONMENT
Common Well Name	Gov't Lot (if applicable)	Facility ID	License/Permit/Monitoring No.
AS-EI			
1/4 of 1/4 of Sec. 13	T. 18 N. R. 3	Street Address of Well	
Grid Location		3050 WEST N STREET	
ft. N. S. E. W.		City, Village, or Town	
		FORT MCCOY TOWN OF LAFAYETTE	
Local Grid Origin (estimated) or Well Location		Present Well Owner	Original Owner
Lat. Long.		Street Address or Route of Owner	
St. Plane ft. N. ft. E. Zone		City, State, Zip Code	
Reason For Abandonment	WI Unique Well No.		
SITE CLOSURE			

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date		Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring 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"/> Not Applicable
<input type="checkbox"/> Water Well		Screen Removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Construction Type:		Was Casing Cut Off Below Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Drilled		Did Sealing Material Rise to Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Driven (Sandpoint)		Did Material Settle After 24 Hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Other (Specify)		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Formation Type:		Required Method of Placing Sealing Material	
<input checked="" type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input type="checkbox"/> Bedrock		<input type="checkbox"/> Screened & Poured (Bentonite Chlps)	<input checked="" type="checkbox"/> Other (Explain) GRAVITY
Total Well Depth (ft.)	Casing Diameter (in.) 2	Sealing Materials	
(From ground surface)	Casing Depth (ft.)	<input type="checkbox"/> Neat Cement Grout	For monitoring wells and monitoring well boreholes only
Lower Drillhole Diameter (in.) NA		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
Was Well Annular Space Grouted?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Concrete	
If Yes, To What Depth? Feet		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
Depth to Water (Feet) UNKNOWN		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chlps	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks, Sealant & Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
BENTONITE SLURRY	1		4 GALS		THICK

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work	Date of Abandonment
Badger State Drilling Co., Inc.	10-15-07
Signature of Person Doing Work	Date Signed
<i>W. O. Cuse</i>	10-17-07
Street or Route	Telephone Number
360 Business Park Cr.	(608) 877-9770
City, State, Zip Code	
Stoughton, WI 53589	

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCox SVE ABANDONMENT
Common Well Name	Gov't Lot (If applicable)	Facility ID	License/Permit/Monitoring No.
AS-E2			
1/4 of 1/4 of Sec. 13 ; T. 18 N; R. 3	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Street Address of Well	
Grid Location		3050 WEST N STREET	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		FORT McCox, TOWN OF LAFAYETTE	
Lat. " Long "		Present Well Owner	Original Owner
St. Plane ft. N. ft. E. <input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> N Zone		Street Address or Route of Owner	
Reason For Abandonment	WI Unique Well No. of Replacement Well	City, State, Zip Code	
SITE CLOSURE			

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date	If a Well Construction Report is available, please attach.	Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Liner(s) Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
Construction Type:		Screen Removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Other (Specify)		Was Casing Cut Off Below Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Formation Type:		Did Sealing Material Rise to Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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
Total Well Depth (ft.) Casing Diameter (in.) 2		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(From ground surface) Casing Depth (ft.)		Required Method of Placing Sealing Material	
Lower Drillhole Diameter (in.) NA		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY	
If Yes, To What Depth? Feet		Sealing Materials	For monitoring wells and monitoring well boreholes only
Depth to Water (Feet) UNKNOWN		<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Bentonite Chips
		<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Granular Bentonite
		<input type="checkbox"/> Concrete	<input type="checkbox"/> Bentonite - Cement Grout
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	<input type="checkbox"/> Bentonite - Sand Slurry
		<input type="checkbox"/> Bentonite-Sand Slurry " "	<input checked="" type="checkbox"/> Bentonite - Sand Slurry
		<input type="checkbox"/> Bentonite Chips	

(5)	Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant or Volume (Circle One)	Mix Ratio or Mud Weight
	CONCRETE	Surface	1		
	BENTONITE SLURRY	1		4 GALS THICK	

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
		10-17-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT MCCOY SVE ABANDONMENT
Common Well Name	Gov't Lot (If applicable)	Facility ID	License/Permit/Monitoring No.
AS-E3			
1/4 of 1/4 of Sec. 13 ; T. 18 N; R. 3	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Street Address of Well	
Grid Location		3050 WEST N STREET	
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	City, Village, or Town	
Lat. " " " " Long " " " "		FORT MCCOY TOWN OF LAFAYETTE	
St. Plane ft. N. ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		Present Well Owner	Original Owner
Reason For Abandonment	WI Unique Well No. of Replacement Well	Street Address or Route of Owner	
SITE CLOSURE		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date	If a Well Construction Report is available, please attach.	Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Liner(s) Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
Construction Type:		Screen Removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Formation Type:		Was Casing Cut Off Below Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<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
Total Well Depth (ft.) Casing Diameter (in.) 2		Did Material Settle After 24 Hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(From ground surface) Casing Depth (ft.)		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lower Drillhole Diameter (in.) NA		Required Method of Placing Sealing Material	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input checked="" 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		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY	
Depth to Water (Feet) UNKNOWN		Sealing Materials	For monitoring wells and monitoring well boreholes only
		<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Bentonite Chips
		<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Granular Bentonite
		<input type="checkbox"/> Concrete	<input type="checkbox"/> Bentonite - Cement Grout
		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	<input checked="" type="checkbox"/> Bentonite - Sand Slurry
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks, Sealant, or Volume (Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1		
BENTONITE SLURRY	1		4 GALS THICK	

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment
Badger State Drilling Co., Inc.		10-15-07
Signature of Person Doing Work	Date Signed	
<i>[Signature]</i>	10-17-07	
Street or Route	Telephone Number	
360 Business Park Cr.	(608) 877-9770	
City, State, Zip Code		
Stoughton, WI 53589		

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT MCCOY SVE ABANDONMENT
Common Well Name		Gov't Lot (If applicable)	Facility ID
AS-E4			License/Permit/Monitoring No.
1/4 of 1/4 of Sec. 13 ; T. 18 N; R. 3		<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Street Address of Well
Grid Location			3050 WEST N STREET
ft. <input type="checkbox"/> N. <input type="checkbox"/> S., ft. <input type="checkbox"/> E. <input type="checkbox"/> W.			City, Village, or Town
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>			FORT MCCOY, TOWN OF LAFAYETTE
Lat. " " Long. " "			Present Well Owner
St. Plane ft. N. ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone			Original Owner
Reason For Abandonment		WI Unique Well No.	City, State, Zip Code
SITE CLOSURE		of Replacement Well	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Other (Specify)		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 (ft.) Casing Diameter (in.) 2		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) GRAVITY	
(From ground surface) Casing Depth (ft.)		Sealing Materials	
Lower Drillhole Diameter (in.) NA		<input type="checkbox"/> Neat Cement Grout	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
If Yes, To What Depth? Feet		<input type="checkbox"/> Concrete	
Depth to Water (Feet) UNKNOWN		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input checked="" type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks, Sealant or Volume	(Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1			
BENTONITE SLURRY	1		4 GALS		THICK

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment
Badger State Drilling Co., Inc.		10-15-07
Signature of Person Doing Work	Date Signed	
<i>[Signature]</i>	10-17-07	
Street or Route	Telephone Number	
360 Business Park Cr.	(608) 877-9770	
City, State, Zip Code		
Stoughton, WI 53589		

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCox SVE ABANDONMENT
Common Well Name <u>AS-W1</u> Gov't Lot (If applicable)		Facility ID	License/Permit/Monitoring No.
1/4 of 1/4 of Sec. <u>13</u> ; T. <u>18</u> N.; R. <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W		Street Address of Well	
Grid Location		<u>3050 WEST N STREET</u>	
_____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., _____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.		City, Village, or Town	
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>		<u>FORT McCox TOWN OF LAFAYETTE</u>	
Lat. _____ Long. _____ or _____		Present Well Owner	
St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone		Original Owner	
Reason For Abandonment		Street Address or Route of Owner	
<u>SITE CLOSURE</u>			
WI Unique Well No. of Replacement Well		City, State, Zip Code	

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date _____		Pump & Piping Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable	
<input type="checkbox"/> Water Well		Screen Removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable	
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If a Well Construction Report is available, please attach.		Was Casing Cut Off Below Surface? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Construction Type:		Did Sealing Material Rise to Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did Material Settle After 24 Hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Other (Specify) _____		If Yes, Was Hole Retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 (ft.) _____ Casing Diameter (in.) <u>2</u>		<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input checked="" type="checkbox"/> Other (Explain) <u>GRAVITY</u>	
(From ground surface) Casing Depth (ft.) _____		Sealing Materials	
Lower Drillhole Diameter (in.) <u>NA</u>		<input type="checkbox"/> Neat Cement Grout	
Was Well Annular Space Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Sand-Cement (Concrete) Grout	
If Yes, To What Depth? _____ Feet		<input type="checkbox"/> Concrete	
Depth to Water (Feet) <u>UNKNOWN</u>		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	
		<input type="checkbox"/> Bentonite-Sand Slurry " "	
		<input type="checkbox"/> Bentonite Chips	
		For monitoring wells and monitoring well boreholes only	
		<input type="checkbox"/> Bentonite Chips	
		<input type="checkbox"/> Granular Bentonite	
		<input type="checkbox"/> Bentonite - Cement Grout	
		<input checked="" type="checkbox"/> Bentonite - Sand Slurry	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant & Volume (Circle One)	Mix Ratio or Mud Weight
CONCRETE	Surface	1		
BENTONITE SLURRY	1		4 GALS	THICK

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work		Date of Abandonment	
Badger State Drilling Co., Inc.		10-15-07	
Signature of Person Doing Work		Date Signed	
<u>[Signature]</u>		10-14-07	
Street or Route		Telephone Number	
360 Business Park Cr.		(608) 877-9770	
City, State, Zip Code			
Stoughton, WI 53589			

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/OWNER INFORMATION	
WI Unique Well No. _____	DNR Well ID No. _____	County <u>MONROE</u>	Facility Name <u>FORT McCOY SVE ABANDONMENT</u>
Common Well Name <u>AS-W2</u>	Gov't Lot (If applicable) _____	Facility ID _____	License/Permit/Monitoring No. _____
1/4 of _____ 1/4 of Sec. <u>13</u> ; T. <u>18</u> N; R. <u>3</u>	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	Street Address of Well <u>3050 WEST N STREET</u>	
Grid Location _____ ft. <input type="checkbox"/> N. <input type="checkbox"/> S., _____ ft. <input type="checkbox"/> E. <input type="checkbox"/> W.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/>	City, Village, or Town <u>FORT McCOY TOWN OF LAFAYETTE</u>	
Lat. _____ Long. _____ or _____	St. Plane _____ ft. N. _____ ft. E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Zone	Present Well Owner _____	Original Owner _____
Reason For Abandonment <u>SITE CLOSURE</u>	WI Unique Well No. _____ of Replacement Well _____	Street Address or Route of Owner _____	
(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	

Original Construction Date _____

Monitoring Well
 Water Well
 Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:
 Drilled Driven (Sandpoint) Dug
 Other (Specify) _____

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth (ft.) _____ Casing Diameter (in.) 2
(From ground surface) Casing Depth (ft.) _____

Lower Drillhole Diameter (in.) NA

Was Well Annular Space Grouted? Yes No Unknown
If Yes, To What Depth? _____ Feet

Depth to Water (Feet) UNKNOWN

Pump & Piping Removed? Yes No Not Applicable
Liner(s) Removed? Yes No Not Applicable
Screen Removed? Yes No Not Applicable
Casing Left in Place? Yes No

Was Casing Cut Off Below Surface? Yes No
Did Sealing Material Rise to Surface? Yes No
Did Material Settle After 24 Hours? Yes No
If Yes, Was Hole Retopped? Yes No

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

Sealing Materials For monitoring wells and monitoring well boreholes only

<input type="checkbox"/> Neat Cement Grout	<input type="checkbox"/> Bentonite Chips
<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Granular Bentonite
<input type="checkbox"/> Concrete	<input type="checkbox"/> Bentonite - Cement Grout
<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	<input checked="" type="checkbox"/> Bentonite - Sand Slurry
<input type="checkbox"/> Bentonite-Sand Slurry " "	
<input type="checkbox"/> Bentonite Chips	

(5) Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks, Sealant, or Volume (Circle One)	Mix Ratio or Mud Weight
<u>CONCRETE</u>	Surface	<u>1</u>		
<u>BENTONITE SLURRY</u>	<u>1</u>		<u>4 GALS</u>	<u>THICK</u>

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work: Badgen State Drilling Co., Inc. Date of Abandonment: 10-15-07

Signature of Person Doing Work: [Signature] Date Signed: 10-17-07

Street or Route: 360 Business Park Cr. Telephone Number: (608) 877-9770

City, State, Zip Code: Stoughton, WI 53589

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	

BSD# 4705

Notice: Please complete Form 3300-5P and return it to the appropriate DNR office and bureau. Completion of this report is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. NOTE: See the instructions for more information.

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

(1) GENERAL INFORMATION		(2) FACILITY/TOWNER INFORMATION	
WI Unique Well No.	DNR Well ID No.	County	Facility Name
		MONROE	FORT McCox SVE ABANDONMENT
Common Well Name	Gov't Lot (If applicable)	Facility ID	License/Permit/Monitoring No.
AS-W3			
1/4 of 1/4 of Sec. 13	T. 18 N. R. 3	Street Address of Well	
		3040 WEST N STREET	
Grid Location		City, Village, or Town	
		FORT McCox; TOWN OF LAFAYETTE	
Local Grid Origin	Well Location	Present Well Owner	Original Owner
Lat.	Long	Street Address or Route of Owner	
Reason For Abandonment	WI Unique Well No. of Replacement Well	City, State, Zip Code	
SITE CLOSURE			

(3) WELL/DRILLHOLE/BOREHOLE INFORMATION		(4) PUMP, LINER, SCREEN, CASING, & SEALING MATERIAL	
Original Construction Date	If a Well Construction Report is available, please attach.	Pump & Piping Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Monitoring Well		Liner(s) Removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable
<input type="checkbox"/> Water Well		Screen Removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Borehole / Drillhole		Casing Left in Place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Construction Type:		Was Casing Cut Off Below Surface?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Drilled		Did Sealing Material Rise to Surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Driven (Sandpoint)		Did Material Settle After 24 Hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Other (Specify)		If Yes, Was Hole Retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Formation Type:		Required Method of Placing Sealing Material	
<input checked="" type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped
<input type="checkbox"/> Bedrock		<input type="checkbox"/> Screened & Poured (Bentonite Chips)	<input checked="" type="checkbox"/> Other (Explain) GRAVITY
Total Well Depth (ft.)	Casing Diameter (in.)	Sealing Materials	
(From ground surface)	2	<input type="checkbox"/> Neat Cement Grout	For monitoring wells and monitoring well boreholes only
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	<input type="checkbox"/> Sand-Cement (Concrete) Grout	<input type="checkbox"/> Bentonite Chips
NA		<input type="checkbox"/> Concrete	<input type="checkbox"/> Granular Bentonite
Was Well Annular Space Grouted?		<input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)	<input type="checkbox"/> Bentonite - Cement Grout
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		<input type="checkbox"/> Bentonite-Sand Slurry " "	<input type="checkbox"/> Bentonite - Cement Grout
If Yes, To What Depth? Feet		<input type="checkbox"/> Bentonite Chips	<input checked="" type="checkbox"/> Bentonite - Sand Slurry
Depth to Water (Feet)			
UNKNOWN			

(5)	Material Used To Fill Well/Drillhole	From (Ft.)	To (Ft.)	No. Yards, Sacks Sealant & Volume (Circle One)	Mix Ratio or Mud Weight
	CONCRETE	Surface	1		
	BENTONITE SLURRY	1		4 GALS	THICK

(6) Comments: FLUSH MOUNT WELL BOX LEFT IN-PLACE

(7) Name of Person or Firm Doing Sealing Work	Date of Abandonment
Badger State Drilling Co., Inc.	10-15-07
Signature of Person Doing Work	Date Signed
<i>[Signature]</i>	10-17-07
Street or Route	Telephone Number
360 Business Park Cr.	(608) 877-9770
City, State, Zip Code	
Stoughton, WI 53589	

FOR DNR OR COUNTY USE ONLY	
Date Received	Noted By
Comments	



FIELD ENVIRONMENTAL INSTRUMENTS, INC.

www.fieldenvironmental.com

301 Brushton Avenue
Suite A
Pittsburgh PA 15221
800-393-4009 Toll Free
(412) 436-2600 Local
(412) 436-2616 Fax

Photo-Ionization Detector Calibration Certificate

Isobutylene Gas	Lot # 6-3079	Expiration 9/13/2008
Cal Standard 100 ppm ▼	Reading 101.0	Acceptable Range (98 - 102) ▼
	Pump Flow mL/min 550	Acceptable Range (300 - 550)
	Response Factor 1.0	

Model	MiniRae 2000 ▼
Lamp	10.6 eV ▼
S/N	110-014784
Barcode	U54462X
Order #	95733

Calibrated By Gene Donofrio ▼

Date of Calibration 10/10/07

All calibrations performed by Field Environmental Instruments conform to manufacturer's specifications. Any problems must be reported to Field Environmental within 24 hours of receiving equipment.

**FORM E
REAL TIME AIR MONITORING LOG**

Date	Time	Work Area	Location	PID Serial No.	PID Reading (ppm)	PDR Serial No.	PDR Reading (mg/m ³)		Comments	Name
							Conc.	TWA		
10/25	1000	EZ	EZ	110-01478	0					Tim Duda
	1025	FTBP2	EZ		0				sampled inside 2" o.d. pipes/discharge	
	1035		EZ		0					
	1050		EZ		0					
	1052		SUE-W5		0-1 ppm				} Inside pipe only "00 @ surface	
	1053		SUE-E5		0 ppm					
	1054		SUE-W6		1 ppm					
	1055		SUE-E7		0					
	1108		EZ		0 ppm					
	1116		SUE-W3		1 ppm				} Inside pipe only 0.0 @ surface	
	1158		SUE 4		14 ppm					
	1211		EZ		0 ppm					
	1231		EZ		0					
	1304		EZ		0					
	1325		EZ		0				} No CO2 in SUE wells (tops are open) (2" pipe valves stems)	
	1345		EZ		0					
	1400		EZ		0					
	1430		EZ		0					
	1447		E6		0					
	1447		E8		0					
10/25	1503	FTBP1	EZ		0					Tim Duda

KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo:	1
View Direction:	W
Time:	9:53
Comments:	FTBP1 work area looking west
Pic. #:	20071015-FTBP1-005



Photo:	2
View Direction:	W
Time:	9:52
Comments:	AS/SVE staging area looking west
Pic. #:	20071015-FTBP1-003



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo: 3

View Direction: S

Time: 9:51

Comments:

AS/SVE conduit adapters along south side of concrete pad

Pic. #: 20071015-FTBP1-001



Photo: 4

View Direction: W

Time: 10:24

Comments:

AS/SVE abandonment grout plant set-up

potable water

D-120 drill rig

150 gallon tub

Waukesha SP-50 hose pump

conduit adapters

Pic. #: 20071015-FTBP1-027



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo: 5
View Direction: N/A
Time: 9:58

Comments:

AS vault 2" diameter
AS well valve is open
sampling port (closed)

Pic. #: 20071015-FTBP1-018

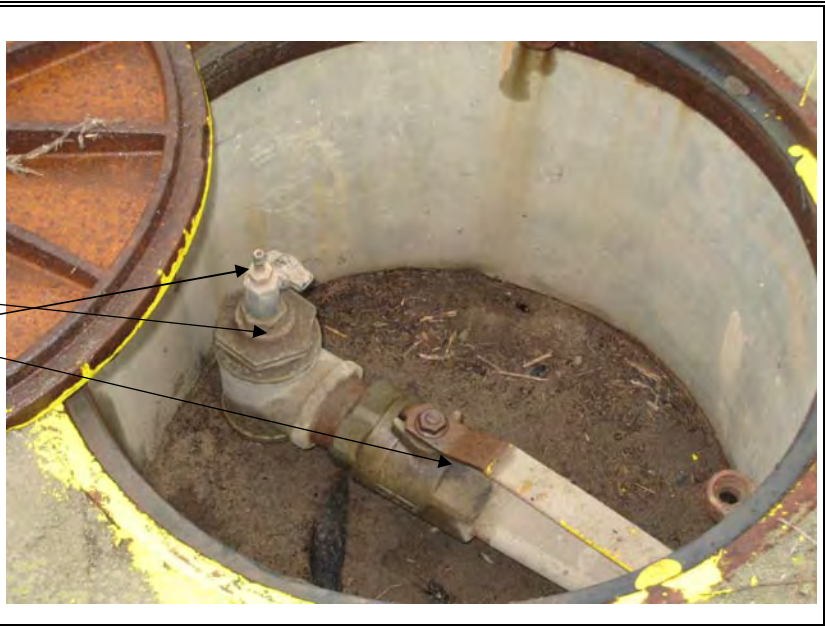


Photo: 6
View Direction: N/A
Time: 14:10

Comments:

AS vault: grout spurting out of port confirms well is grouted

Pic. #: 20071015-FTBP1-054



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo:	7
View Direction:	N/A
Time:	9:56
Comments:	SVE vault (SVE-W5) vault conditions prior to abandonment
Pic. #:	20071015-FTBP1-012

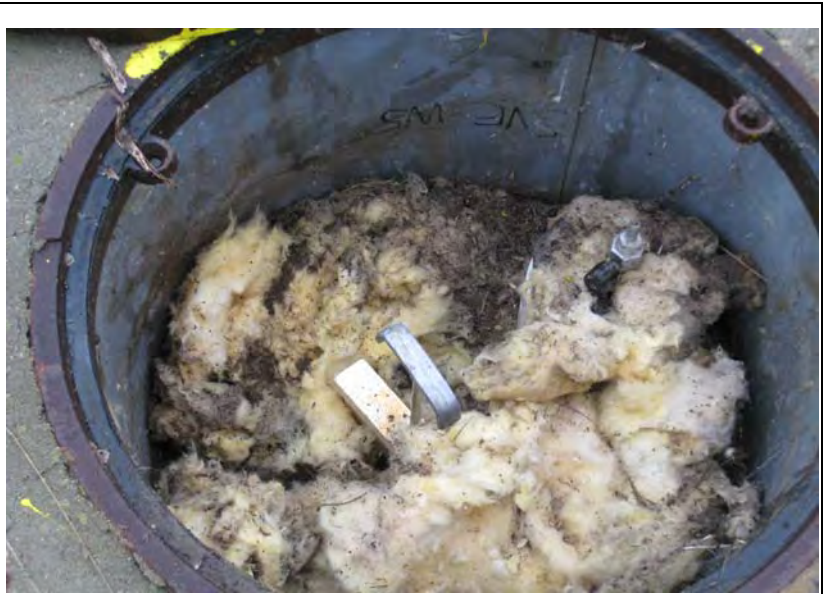


Photo:	8
View Direction:	N/A
Time:	10:59
Comments:	SVE vault (SVE-W5) 4" SVE well cap has been removed valve is open
Pic. #:	20071015FTBP1-028



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo:	9
View Direction:	N/A
Time:	12:14
Comments:	
SVE vault SVE well has been abandoned using bentonite chips	
Pic. #:	20071015-FTBP1-032



Photo:	10
View Direction:	N/A
Time:	13:03
Comments:	
SVE vault bentonite grout has filled laterals and over topped well	
Pic. #:	20071015-FTBP1-039



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo: 11
View Direction: N/A
Time: 14:04

Comments:

Bentonite grout seeping through FTBP1 gravel cap in general location of former SVE E6 well, confirming former pipes are grouted

Pic. #: 20071015-FTBP1-052



Photo: 12
View Direction: S
Time: 9:39

Comments:

3000 PSI strength concrete used to fill in vaults

Pic. #: 20071016-FTBP1-081



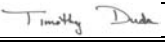
KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	16-Oct-07
Signature:			

Photo:	13
View Direction:	N/A
Time:	9:42
Comments:	
Vault was filled in with concrete until it was flush with surface, then smoothed out with trowel	
Pic. #:	20071016-FTBP1-086



Photo:	14
View Direction:	E
Time:	10:56
Comments:	
Vault was filled in with concrete until it was flush with surface, then smoothed out with trowel	
Pic. #:	20071016-FTBP1-092



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo: 15

View Direction: W

Time: 14:38

Comments:

Abandonment of temporary vacuum probe TVP2 with bentonite slurry

TVP1

TVP2

Pic. #: 20071015-FTBP1-061



Photo: 16

View Direction: N

Time: 15:51

Comments:

D-120 drill rig used to remove 2" and 4" diameter conduits located along the south edge of the concrete pad

Pic. #: 20071015-FTBP1-068



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	15-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo: 17
View Direction: W
Time: 15:57

Comments:

Holes resulting from the removal of conduits were filled in with bentonite chips

Pic. #: 20071015-FTBP1-074



Photo: 18
View Direction: W
Time: 16:03

Comments:

A total of two 4'-long x 4"-diameter and two 4'-long x 2"-diameter steel conduit pipes were removed

Pic. #: 20071015-FTBP1-079



KEMRON Environmental Services Photographic Record			
Client Name:	USARC	Project Number:	U0027 AB 004
Site Name:	Fire Training Burn Pit #1	Site Location:	Fort McCoy, WI
Photographer:	Tim Duda	Date:	16-Oct-07
Signature:	<i>Timothy Duda</i>		

Photo:	19
View Direction:	N
Time:	11:40
Comments:	FTBP1 work area post abandonment
Pic. #:	20071016-FTBP1-099

