



June 17, 2020

Mr. Lee Delcore
Wisconsin Department of Natural Resources
1155 Pilgrim Road
Plymouth, WI 53073

**Re: Monitoring Well Abandonment
 Suggar Property
 3301 – 60th Street
 Kenosha, WI 53144
 PECFA# 53144-4143-05
 BRRTS# 03-30-004964
 FID# 230156410**

Dear Mr. Delcore:

Midwest Environmental Consulting (MEC) has properly abandoned all of the groundwater monitoring wells at the above referenced site. The abandonment forms are attached.

If you have any questions or need additional information please contact me at (262) 237-4351.

Sincerely,



Sean Cranley, P.G.

Principal Hydrogeologist

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information				2. Facility / Owner Information			
County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Sugar Property</i>	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS) <i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22</i>	
Well Street Address <i>3301-60th Street</i>		Well City, Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		License/Permit/Monitoring # <i>MW-1</i>	
Subdivision Name		Lot #		Original Well Owner <i>AI Auto Repair</i>		Present Well Owner <i>As Above</i>	
Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		Mailing Address of Present Owner <i>3301-60th Street</i>		City of Present Owner <i>Kenosha</i>	
State		ZIP Code		State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Water Well		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
<input type="checkbox"/> Borehole / Drillhole		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
If a Well/Construction Report is available, please attach.		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Construction Type:		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Formation Type:		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Total Well Depth From Ground Surface (ft.) <i>16</i>		If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Casing Diameter (in.) <i>2</i>		Required Method of Placing Sealing Material			
Lower Drillhole Diameter (in.) <i>8</i>		<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
Casing Depth (ft.) <i>16</i>		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Sealing Materials			
If yes, to what depth (feet)? <i>1</i>		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete			
Depth to Water (feet) <i>9</i>		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips			
		For Monitoring Wells and Monitoring Well Boreholes Only:			
		<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout			
		<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry			

5. Material Used to Fill Well / Drillhole			
From (ft.)		To (ft.)	
<i>0</i>		<i>16</i>	
No. Yards, Sacks Sealant or Volume (circle one)		Mix Ratio or Mud Weight	
6. Comments			

7. Supervision of Work			DNR Use Only		
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>		Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>	

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>		

Latitude / Longitude (see instructions) _____ N _____ W	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>						
<table border="1" style="width:100%"> <tr> <td>1/4 NE</td> <td>1/4 NW</td> <td>Section <i>1</i></td> <td>Township <i>1 N</i></td> <td>Range <i>22</i></td> <td><input checked="" type="checkbox"/> E <input type="checkbox"/> W</td> </tr> </table>			1/4 NE	1/4 NW	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	License/Permit/Monitoring # <i>MW-2</i>
1/4 NE	1/4 NW	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W				

Well Street Address <i>3301-60th Street</i>	Original Well Owner <i>A1 Auto Repair</i>
Well (City), Village or Town <i>Kenosha, WI</i>	Present Well Owner <i>As Above</i>

Well ZIP Code <i>53144</i>	Mailing Address of Present Owner <i>3301-60th Street</i>	
Subdivision Name	City of Present Owner <i>Kenosha</i>	State <i>WI</i>
Lot #	ZIP Code <i>53144</i>	

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well
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3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>	Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A

Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	<table border="1" style="width:100%"> <tr> <td>Liner(s) removed?</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input checked="" type="checkbox"/> N/A</td> </tr> <tr> <td>Liner(s) perforated?</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input checked="" type="checkbox"/> N/A</td> </tr> <tr> <td>Screen removed?</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> <tr> <td>Casing left in place?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> </table>	Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A														
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A														
Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A														
Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A														

Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	<table border="1" style="width:100%"> <tr> <td>Was casing cut off below surface?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> <tr> <td>Did sealing material rise to surface?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> <tr> <td>Did material settle after 24 hours?</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> <tr> <td>If yes, was hole retopped?</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> <tr> <td>If bentonite chips were used, were they hydrated with water from a known safe source?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td><input type="checkbox"/> N/A</td> </tr> </table>	Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A																		
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A																		
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If yes, was hole retopped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A																		
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A																		

Total Well Depth From Ground Surface (ft.) <i>16</i>	Casing Diameter (in.) <i>2</i>						
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>16</i>						
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<table border="1" style="width:100%"> <tr> <td>Required Method of Placing Sealing Material</td> <td><input type="checkbox"/> Conductor Pipe-Gravity</td> <td><input type="checkbox"/> Conductor Pipe-Pumped</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)</td> <td><input type="checkbox"/> Other (Explain): _____</td> </tr> </table>	Required Method of Placing Sealing Material	<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)	<input type="checkbox"/> Other (Explain): _____
Required Method of Placing Sealing Material	<input type="checkbox"/> Conductor Pipe-Gravity	<input type="checkbox"/> Conductor Pipe-Pumped					
	<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)	<input type="checkbox"/> Other (Explain): _____					
If yes, to what depth (feet)? <i>1</i>	Depth to Water (feet) <i>10</i>						

5. Material Used to Fill Well / Drillhole			
<i>Bentonite chips</i>	From (ft.) <i>0</i>	To (ft.) <i>16</i>	No. Yards, Sacks Sealant or Volume (circle one)
			Mix Ratio or Mud Weight

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

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Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Sugar Property</i>	Facility ID (FID or PWS) <i>230156410</i>	License/Permit/Monitoring # <i>MW-3</i>
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Original Well Owner <i>A1 Auto Repair</i>	Present Well Owner <i>As Above</i>	Mailing Address of Present Owner <i>3301-60th Street</i>
1/4 NE 1/4 NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	City of Present Owner <i>Kenosha</i>
Well Street Address <i>3301-60th Street</i>	Well (City), Village or Town <i>Kenosha, WI</i>	Well ZIP Code <i>53144</i>	Subdivision Name	Lot #	State <i>WI</i>
Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	City of Present Owner <i>Kenosha</i>	State <i>WI</i>	ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole	Original Construction Date (mm/dd/yyyy) <i>5/14/18</i>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	If a Well Construction Report is available, please attach.	Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	Total Well Depth From Ground Surface (ft.) <i>16</i>	Casing Diameter (in.) <i>2</i>	Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>16</i>	If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	If yes, to what depth (feet)? <i>1</i>	Depth to Water (feet) <i>10</i>	Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____		
Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips		For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry			

5. Material Used to Fill Well / Drillhole			
<i>Bentonite Chips</i>	From (ft.) <i>0</i>	To (ft.) <i>16</i>	No. Yards, Sacks Sealant or Volume (circle one)
			Mix Ratio or Mud Weight

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

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Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

1. Well Location Information			2. Facility / Owner Information		
County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Sugar Property</i>	Facility ID (FID or PWS) <i>230156410</i>	
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	License/Permit/Monitoring # <i>MW-4</i>	Original Well Owner <i>AI Auto Repair</i>	
$\frac{1}{4}$ NE $\frac{1}{4}$ NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	Present Well Owner <i>As Above</i>	
Well Street Address <i>3301-60th Street</i>			Mailing Address of Present Owner <i>3301-60th Street</i>		
Well (City), Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		City of Present Owner <i>Kenosha</i>	
Subdivision Name		Lot #		State <i>WI</i>	ZIP Code <i>53144</i>

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	4. Pump, Liner, Screen, Casing & Sealing Material			
3. Filled & Sealed Well / Drillhole / Borehole Information		Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>5/15/18</i>	Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> Borehole / Drillhole		Screen removed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A
Construction Type:		Casing left in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	<input type="checkbox"/> Dug	Was casing cut off below surface?		
Other (specify): _____		<input checked="" type="checkbox"/> Yes			<input type="checkbox"/> No
Formation Type:		Did sealing material rise to surface?			<input checked="" type="checkbox"/> Yes
<input checked="" type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	Did material settle after 24 hours?			<input type="checkbox"/> Yes
Total Well Depth From Ground Surface (ft.) <i>16</i>		Casing Diameter (in.) <i>2</i>			<input checked="" type="checkbox"/> No
Lower Drillhole Diameter (in.) <i>8</i>		Casing Depth (ft.) <i>16</i>			<input type="checkbox"/> N/A
Was well annular space grouted?		If yes, was hole retopped?			<input type="checkbox"/> Yes
<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> Yes			<input type="checkbox"/> No
<input type="checkbox"/> No		If bentonite chips were used, were they hydrated with water from a known safe source?			<input checked="" type="checkbox"/> Yes
<input type="checkbox"/> Unknown		<input type="checkbox"/> No			<input type="checkbox"/> N/A
If yes, to what depth (feet)? <i>1</i>		Depth to Water (feet) <i>10</i>			Required Method of Placing Sealing Material
Depth to Water (feet) <i>10</i>		From (ft.)			<input type="checkbox"/> Conductor Pipe-Gravity
		To (ft.)			<input type="checkbox"/> Conductor Pipe-Pumped
		No. Yards, Sacks Sealant or Volume (circle one)			<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips)
		Mix Ratio or Mud Weight			<input type="checkbox"/> Other (Explain): _____

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>	<i>0</i>	<i>16</i>		

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County <i>Kenosha</i>	WI Unique Well # of Removed Well _____	Hicap # _____	Facility Name <i>Suggar Property</i>
Latitude / Longitude (see instructions) _____ N _____ W	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>
1/4 1/4 NE 1/4 NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22 E</i>
Well Street Address <i>3301-60th Street</i>	Original Well Owner <i>AI Auto Repair</i>	Present Well Owner <i>As Above</i>	License/Permit/Monitoring # <i>MW-5</i>
Well (City), Village or Town <i>Kenosha, WI</i>	Well ZIP Code <i>53144</i>	Mailing Address of Present Owner <i>3301-60th Street</i>	City of Present Owner <i>Kenosha</i>
Subdivision Name _____	Lot # _____	State <i>WI</i>	ZIP Code <i>53144</i>

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

Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well _____	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Original Construction Date (mm/dd/yyyy) <i>5/15/18</i>	If a Well Construction Report is available, please attach. _____	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
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	Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <i>16</i>	Casing Diameter (in.) <i>2</i>	Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>16</i>	Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <i>11</i>	Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, to what depth (feet)? <i>1</i>		Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
		If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____
		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips
		For Monitoring Wells and Monitoring Well Boreholes Only: <input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>	<i>0</i>	<i>16</i>		

6. Comments

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

Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received _____	Noted By _____
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments 		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County <i>Kenosha</i>	WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Sugar Property</i>
Latitude / Longitude (see instructions) N _____ W _____	Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>
1/4 NE 1/4 NW or Gov't Lot #	Section <i>1</i>	Township <i>1 N</i>	Range <i>22 E</i>
Well Street Address <i>3301-60th Street</i>	Well (City), Village or Town <i>Kenosha, WI</i>	Well ZIP Code <i>53144</i>	License/Permit/Monitoring # <i>MW-6</i>
Subdivision Name	Lot #	City of Present Owner <i>Kenosha</i>	State <i>WI</i>
Reason for Removal from Service <i>Case Closure</i>	WI Unique Well # of Replacement Well	ZIP Code <i>53144</i>	Original Well Owner <i>AI Auto Repair</i>
3. Filled & Sealed Well / Drillhole / Borehole Information		Present Well Owner <i>As Above</i>	
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>12/11/18</i>	Mailing Address of Present Owner <i>3301-60th Street</i>	
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	City of Present Owner <i>Kenosha</i>	
<input type="checkbox"/> Borehole / Drillhole		State <i>WI</i>	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		ZIP Code <i>53144</i>	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.) <i>18</i>	Casing Diameter (in.) <i>2</i>		
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>18</i>		
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <i>12</i>		

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

Pump and piping removed? Yes No N/A

Liner(s) removed? Yes No N/A

Liner(s) perforated? Yes No N/A

Screen removed? Yes No N/A

Casing left in place? Yes No N/A

Was casing cut off below surface? Yes No N/A

Did sealing material rise to surface? Yes No N/A

Did material settle after 24 hours? Yes No N/A

If yes, was hole retopped? Yes No N/A

If bentonite chips were used, were they hydrated with water from a known safe source? Yes No N/A

Required Method of Placing Sealing Material

Conductor Pipe-Gravity Conductor Pipe-Pumped

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

Sealing Materials

Neat Cement Grout Concrete

Sand-Cement (Concrete) Grout Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips Bentonite - Cement Grout

Granular Bentonite Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole

Material	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>	<i>0</i>	<i>18</i>		

6. Comments

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	DNR Use Only	
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments	Date Received	Noted By
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County <i>Kenosha</i>		WI Unique Well # of Removed Well	Hicap #	Facility Name <i>Suggar Property</i>	
Latitude / Longitude (see instructions)		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>	Township <i>1 N</i>	Range <i>22</i>	License/Permit/Monitoring # <i>MW-7</i>
Well Street Address <i>3301 - 60th Street</i>		Original Well Owner <i>A1 Auto Repair</i>		Present Well Owner <i>As Above</i>	
Well (City), Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		Mailing Address of Present Owner <i>3301 - 60th Street</i>	
Subdivision Name		Lot #		City of Present Owner <i>Kenosha</i>	State <i>WI</i>
Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		ZIP Code <i>53144</i>	

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

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>12/11/18</i>	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.	Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) <i>18</i>	Casing Diameter (in.) <i>2</i>	Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) <i>8</i>	Casing Depth (ft.) <i>18</i>	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <i>17</i>	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)? <i>4.5</i>		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
5. Material Used to Fill Well / Drillhole <i>Bentonite chips</i>		If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
From (ft.)	To (ft.)	Required Method of Placing Sealing Material	
<i>0</i>	<i>18</i>	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
		<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
		Sealing Materials	
		<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
		<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips	
		For Monitoring Wells and Monitoring Well Boreholes Only:	
		<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout	
		<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>0</i>	<i>18</i>		

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>	Telephone Number <i>(262) 237-4351</i>	Comments		
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

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

1. Well Location Information				2. Facility / Owner Information			
County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Suggar Property</i>	
Latitude / Longitude (see instructions)		Format Code		Method Code		Facility ID (FID or PWS)	
_____ N _____ W		<input type="checkbox"/> DD <input type="checkbox"/> DDM		<input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		<i>230156410</i>	
1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22 E</i>	
Well Street Address <i>3301 - 60th Street</i>		Well (City), Village or Town <i>Kenosha, WI</i>		Well ZIP Code <i>53144</i>		License/Permit/Monitoring # <i>MW-8</i>	
Subdivision Name		Lot #		Original Well Owner <i>AI Auto Repair</i>		Present Well Owner <i>As Above</i>	
Reason for Removal from Service <i>Case Closure</i>		WI Unique Well # of Replacement Well		Mailing Address of Present Owner <i>3301 - 60th Street</i>		City of Present Owner <i>Kenosha</i>	
				State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information		4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date (mm/dd/yyyy) <i>4/3/08</i>		Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.		Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
<input type="checkbox"/> Borehole / Drillhole		Construction Type:		Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
		<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug		Screen removed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
		<input type="checkbox"/> Other (specify): _____		Casing left in place? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Formation Type:				Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Total Well Depth From Ground Surface (ft.) <i>17.5</i>		Casing Diameter (in.) <i>2</i>		Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Lower Drillhole Diameter (in.) <i>8</i>		Casing Depth (ft.) <i>17.5</i>		If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was well annular space grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, to what depth (feet)? <i>1</i>		Depth to Water (feet) <i>10</i>		Required Method of Placing Sealing Material	
				<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
				<input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
				Sealing Materials	
				<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
				<input type="checkbox"/> Sand-Cement (Concrete) Grout <input checked="" type="checkbox"/> Bentonite Chips	
				For Monitoring Wells and Monitoring Well Boreholes Only:	
				<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout	
				<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole			
From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite chips</i>			
<i>0</i>	<i>17.5</i>		

6. Comments

7. Supervision of Work				DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>		Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53105</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>	

Well / Drillhole / Borehole Filling & Sealing Report

Form 3300-005 (R 4/2015)

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

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

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

County <i>Kenosha</i>		WI Unique Well # of Removed Well		Hicap #		Facility Name <i>Sugar Property</i>	
Latitude / Longitude (see instructions) N _____ W _____		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FJD or PWS) <i>230156410</i>	
1/4 1/4 NE 1/4 NW or Gov't Lot #		Section <i>1</i>		Township <i>1 N</i>		Range <i>22</i> <input checked="" type="checkbox"/> E <input type="checkbox"/> W	
Well Street Address <i>3301 - 60th Street</i>				Original Well Owner <i>A1 Auto Repair</i>			
Well (City, Village or Town) <i>Kenosha, WI</i>				Well ZIP Code <i>53144</i>			
Subdivision Name				Lot #		Present Well Owner <i>As Above</i>	
Reason for Removal from Service <i>Case Closure</i>				WI Unique Well # of Replacement Well			
Well (City, Village or Town) <i>Kenosha, WI</i>				Well ZIP Code <i>53144</i>			
Subdivision Name				Lot #		Mailing Address of Present Owner <i>3301 - 60th Street</i>	
City of Present Owner <i>Kenosha</i>				State <i>WI</i>		ZIP Code <i>53144</i>	

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy)
 Water Well *1/14/2020*
 Borehole / Drillhole If a Well Construction Report is available, please attach.

Construction Type:

Drilled Driven (Sandpoint) Dug
 Other (specify): _____

Formation Type:

Unconsolidated Formation Bedrock

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

20 *2*

Lower Drillhole Diameter (in.) Casing Depth (ft.)

8 *20*

Was well annular space grouted? Yes No Unknown

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

1 *12*

5. Material Used to Fill Well / Drillhole		From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>Bentonite Chips</i>		<i>0</i>	<i>20</i>		

6. Comments

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>Sean Cranley</i>	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>6/17/2020</i>	Date Received	Noted By
Street or Route <i>N6395 E. Paradise Rd.</i>		Telephone Number <i>(262) 237-4351</i>	Comments	
City <i>Burlington</i>	State <i>WI</i>	ZIP Code <i>53109</i>	Signature of Person Doing Work <i>Sean Cranley</i>	Date Signed <i>6/17/2020</i>