

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 Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
1/4 / 1/4 SE 1/4 SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/16/2020
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 17	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 7
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 11.21

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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	
<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
3/8 Bentonite Chips	Surface	17	27.54 pounds	

6. Comments

Monitoring Well MW-1

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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Route to DNR Bureau:

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

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

County Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street		Well ZIP Code 54562	
Well City, Village or Town Three Lakes		Lot # _____	
Reason for Removal from Service Sampling Complete		WI Unique Well # of Replacement Well _____	

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner _____		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/16/2020
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 37	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 32
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) 11.25

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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	
<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
3/8 Bentonite Chips	Surface	37	59.94 pounds	

6. Comments

Monitoring Well MW-1P

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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Route to DNR Bureau:

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

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

County Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/16/2020
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 20	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 10
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 15.99

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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	
<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
3/8 Bentonite Chips	Surface	20	32.40 pounds	

6. Comments

Monitoring Well MW-2

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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

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

County Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/16/2020
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 15	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 5
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 3.20

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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	
<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
3/8 Bentonite Chips	Surface	15	24.3 pounds	

6. Comments

Monitoring Well MW-3

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

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Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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 Waste Management Other: _____

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

County Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/17/2020
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 30	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 20
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 25.25

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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	
<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
3/8 Bentonite Chips	Surface	30	48.6 pounds	

6. Comments

Monitoring Well MW-4

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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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 Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/17/2020
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 32	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 22
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 27.36

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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	
<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
3/8 Bentonite Chips	Surface	32	51.84 pounds	

6. Comments

Monitoring Well MW-5

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave	Telephone Number (715) 675-9784		Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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 Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/17/2020
<input type="checkbox"/> Water Well	If a Well Construction Report is available, please attach.
<input type="checkbox"/> Borehole / Drillhole	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 35	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 25
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 28.28

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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	
<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
3/8 Bentonite Chips	Surface	35	56.7 pounds	

6. Comments

Monitoring Well MW-6

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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 Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) _____ N _____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/18/2020
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 32	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 22
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 27.25

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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	
<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
3/8 Bentonite Chips	Surface	32	51.84 pounds	

6. Comments

Monitoring Well MW-7

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License # _____	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021

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 Oneida		WI Unique Well # of Removed Well _____	Hicap # _____
Latitude / Longitude (see instructions) ____ N ____ W		Format Code <input type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼ SE ¼ SW or Gov't Lot #	Section 6	Township 38 N	Range <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Well Street Address 7052 Huffman Street			
Well City, Village or Town Three Lakes		Well ZIP Code 54562	
Subdivision Name		Lot #	
Reason for Removal from Service Sampling Complete	WI Unique Well # of Replacement Well _____		

Facility Name WDNR PCE Investigation		
Facility ID (FID or PWS) NONE		
License/Permit/Monitoring # BRRTS# 02-44-000267		
Original Well Owner N/A		
Present Well Owner		
Mailing Address of Present Owner 7052 Huffman Street		
City of Present Owner Three Lakes	State WI	ZIP Code 54462

3. Filled & Sealed Well / Drillhole / Borehole Information

<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) 06/18/2020
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	If a Well Construction Report is available, please attach.
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.) 47.7	Casing Diameter (in.) 2.37
Lower Drillhole Diameter (in.) 8.0	Casing Depth (ft.) 42.7
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet) 27.13

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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 <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
3/8 Bentonite Chips	Surface	47.7	77.27 pounds	

6. Comments

Monitoring Well MW-7P

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

Name of Person or Firm Doing Filling & Sealing Paul Bushar (REI Engineering)	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy) 04/22/2021	Date Received	Noted By
Street or Route 4080 N. 20th Ave		Telephone Number (715) 675-9784	Comments	
City Wausau	State WI	ZIP Code 54401	Signature of Person Doing Work <i>Paul Bushar</i>	Date Signed 04/26/2021