

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 *Common*

Route to DNR Bureau:

Drinking Water Watershed/Wastewater Remediation/Redevelopment

Waste Management Other: _____

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

County <i>Chippewa</i>	WI Unique Well # of Removed Well* <i>MW-1</i>	Hicap # <i>NA</i>	Facility Name <i>National Forest Industries, Inc.</i>
Latitude / Longitude (see instructions) <i>44.85854</i> N <i>96.44275</i> W	Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM	Method Code <input type="checkbox"/> GPS008 <input checked="" type="checkbox"/> SCR002 <input type="checkbox"/> OTH001	Facility ID (FID or PWS) <i>609038320</i>
1/4 or Gov't Lot #	Section <i>35</i>	Township <i>28 N</i>	Range <i>9</i> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Well Street Address	Original Well Owner <i>Same as facility name</i>		
Well City, Village or Town	Present Well Owner <i>Same</i>		
Subdivision Name	Mailing Address of Present Owner <i>3925 N. Hastings Way</i>		
Lot #	City of Present Owner <i>Eau Claire</i>	State <i>WI</i>	ZIP Code <i>54703</i>

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

Reason for Removal from Service <i>No longer needed</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
<input checked="" type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy) <i>10/26/1976</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: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <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: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Total Well Depth From Ground Surface (ft.) <i>50</i>	Casing Diameter (in.) <i>2</i>	Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Lower Drillhole Diameter (in.) <i>8.25</i>	Casing Depth (ft.) <i>40</i>	Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	Depth to Water (feet) <i>44.0</i>	If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If yes, to what depth (feet)? <i>NA</i>		If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<i>neat cement grout</i>	<i>Surface</i>	<i>50</i>	<i>3 sacks</i>	<i>15.75/65</i>

6. Comments
** Common name of wells, no WI unique well# assigned.*

7. Supervision of Work			DNR Use Only	
Name of Person or Firm Doing Filling & Sealing <i>MIDWEST well drilling</i>	License # <i>6799</i>	Date of Filling & Sealing or Verification (mm/dd/yyyy) <i>8-15-23</i>	Date Received	Noted By
Street or Route <i>31569 150th AVE</i>		Telephone Number ()	Comments	
City <i>CORNWELL</i>	State <i>WI</i>	ZIP Code <i>54722</i>	Signature of Person Doing Work <i>H. Michael Phelps</i>	Date Signed <i>1-2-24</i>

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Route to DNR Bureau:

Verification Only of Fill and Seal

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

Common

1. Well Location Information				2. Facility / Owner Information																																																									
County <i>Chippewa</i>		WI Unique Well # of Removed Well <i>MW-7</i>		Hicap # <i>NA</i>		Facility Name <i>National Forest Industries, Inc.</i>																																																							
Latitude / Longitude (see instructions) <i>44.86403</i> N <i>96.44258</i> W		Format Code <input checked="" type="checkbox"/> DD <input type="checkbox"/> DDM		Method Code <input type="checkbox"/> GPS008 <input checked="" type="checkbox"/> SCR002 <input type="checkbox"/> OTH001		Facility ID (FID or PWS) <i>609038320</i>																																																							
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3. Filled & Sealed Well / Drillhole / Borehole Information <input checked="" type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole				Original Construction Date (mm/dd/yyyy) <i>01/08/1985</i>		State <i>WI</i>																																																							
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.		ZIP Code <i>54703</i>																																																							
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input checked="" type="checkbox"/> Bedrock				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 type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A																																																									
Total Well Depth From Ground Surface (ft.) <i>77</i>		Casing Diameter (in.) <i>2</i>		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input checked="" type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____																																																									
Lower Drillhole Diameter (in.) <i>8.25</i>		Casing Depth (ft.) <i>62</i>		Sealing Materials <input checked="" type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips																																																									
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If yes, to what depth (feet)? <i>NA</i>		Depth to Water (feet) <i>69.1</i>		5. Material Used to Fill Well / Drillhole <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>From (ft.)</th> <th>To (ft.)</th> <th>No. Yards, Sacks Sealant or Volume (circle one)</th> <th>Mix Ratio or Mud Weight</th> </tr> </thead> <tbody> <tr> <td><i>Surface</i></td> <td><i>77</i></td> <td><i>4 sacks</i></td> <td><i>15.75 lbs</i></td> </tr> </tbody> </table>				From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight	<i>Surface</i>	<i>77</i>	<i>4 sacks</i>	<i>15.75 lbs</i>																																														
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Common

Route to DNR Bureau:

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

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

County: Chippewa WI Unique Well # of Removed Well: RW-2 Hicap #: NA

Latitude / Longitude (see instructions): 44.86403 N 91.45229 W
 Format Code: DD DDM
 Method Code: GPS008 SCR002 OTH001

1/4 1/4 or Gov't Lot #: 35 Section: 28 Township: N Range: 9 E W

Well Street Address: _____

Well City, Village or Town: _____ Well ZIP Code: _____

Subdivision Name: _____ Lot #: _____

Facility Name: National Presto Industries, Inc.

Facility ID (FID or PWS): 609038320

License/Permit/Monitoring #: _____

Original Well Owner: Same as facility name

Present Well Owner: Same

Mailing Address of Present Owner: 3125 N. Hastings Way

City of Present Owner: Eau Claire State: WI ZIP Code: 54703

Reason for Removal from Service: No longer needed WI Unique Well # of Replacement Well: _____

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy): 01/03/1994
 Water Well
 Borehole / Drillhole

If a Well Construction Report is available, please attach. _____

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

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.): 77 Casing Diameter (in.): 2

Lower Drillhole Diameter (in.): 8.25 Casing Depth (ft.): 62

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? NA Depth to Water (feet): 69.3

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 & Paired (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	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
<u>Neat cement grout</u>	<u>Surface</u>	<u>77</u>	<u>4 sacks</u>	<u>15.75 lbs</u>

6. Comments

** Common name of well; no WI unique well # assigned.*

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing			DNR Use Only	
Name	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
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Street or Route: <u>31569 150th Ave</u>		Telephone Number: ()	Comments	
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