

Thompson, Matthew A - DNR

From: Cota, Jennine <JCota@arcadis-us.com>
Sent: Thursday, August 17, 2006 4:55 PM
To: Gutknecht, Lisa A.
Cc: kmwinogrodzki@mmm.com; Venne (Hull), Marie
Subject: 3M Wausau
Attachments: 0608_001.pdf; 0607_001.pdf

Hi Lisa,
Attached please find the revised drawing per our discussion to incorporate into the GIS packet. I have also attached the well abandonment forms for the site. As we discussed, this should be the last documentation needed to close out the site. Please let me know if there is anything additional required.

Regards,
Jennine

<<0608_001.pdf>> <<0607_001.pdf>>

Jennine Cota Trask, PE
Senior Engineer
ARCADIS
126 North Jefferson Street
Suite 400
Milwaukee, Wisconsin 53202
414-276-7742

DRAFTER: ELS/LMB

APPROVED:

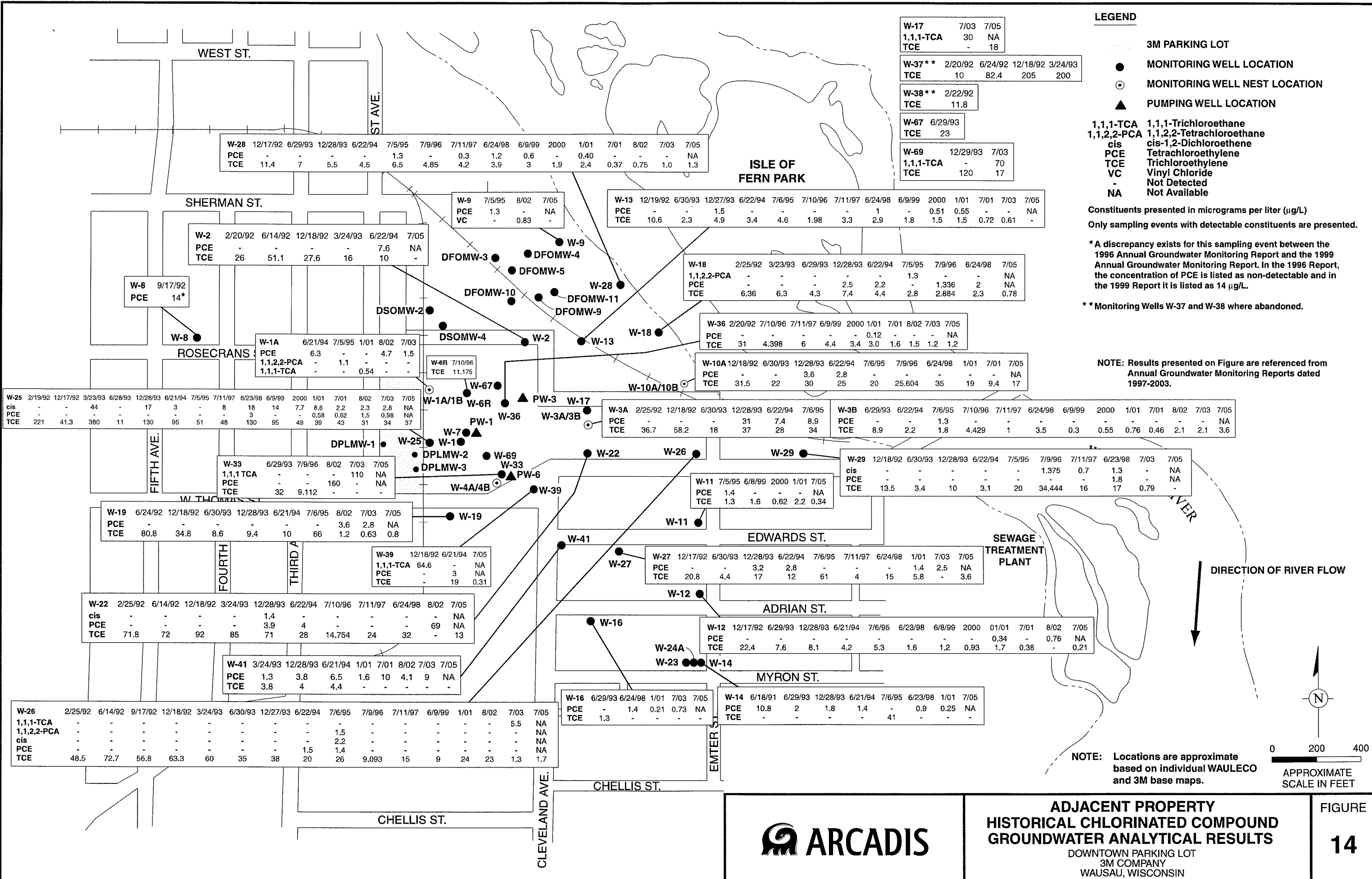
CHECKED: MH

DRAWING: ANAL_5.A1

FILE NO.: GRAPHICS

PN: 3M/W0799/PARKINGLOT

DWG DATE: 16AUG06



LEGEND

- MONITORING WELL LOCATION
- MONITORING WELL NEST LOCATION
- ▲ PUMPING WELL LOCATION

1,1,1-TCA 1,1,1-Trichloroethane
 1,1,2,2-PCA 1,1,2,2-Tetrachloroethane
 cis-1,2-Dichloroethane
 PCE Tetrachloroethylene
 TCE Trichloroethylene
 VC Vinyl Chloride
 - Not Detected
 NA Not Available

Constituents presented in micrograms per liter (µg/L)
 Only sampling events with detectable constituents are presented.

* A discrepancy exists for this sampling event between the 1996 Annual Groundwater Monitoring Report and the 1999 Annual Groundwater Monitoring Report. In the 1996 Report, the concentration of PCE is listed as non-detectable and in the 1999 Report it is listed as 14 µg/L.

** Monitoring Wells W-37 and W-38 were abandoned.

NOTE: Results presented on Figure are referenced from Annual Groundwater Monitoring Reports dated 1997-2003.

W-28	12/17/92	6/29/93	12/28/93	6/22/94	7/5/95	7/9/96	7/11/97	6/24/98	6/9/99	2000	1/01	7/01	8/02	7/03	7/05
PCE	-	-	-	-	1.3	-	0.3	1.2	0.6	-	0.40	-	-	-	NA
TCE	11.4	7	5.5	4.5	6.5	4.85	4.2	3.9	3	1.9	2.4	0.37	0.75	1.0	1.3

W-17	7/03	7/05
1,1,1-TCA	30	NA
TCE	-	18

W-37**	2/20/92	6/24/92	12/18/92	3/24/93
TCE	10	82.4	205	200

W-38**	2/22/92
TCE	11.8

W-67	6/29/93
TCE	23

W-69	12/29/93	7/03
1,1,1-TCA	-	70
TCE	120	17

W-13	12/19/92	6/30/93	12/27/93	6/22/94	7/6/95	7/10/96	7/11/97	6/24/98	6/9/99	2000	1/01	7/01	7/03	7/05
PCE	-	-	1.5	-	-	-	-	1	-	0.51	0.55	-	-	NA
TCE	10.6	2.3	4.9	3.4	4.6	1.98	3.3	2.9	1.8	1.5	1.5	0.72	0.61	-

W-18	2/25/92	3/23/93	6/29/93	12/28/93	6/22/94	7/5/95	7/9/96	6/24/98	7/05
1,1,2,2-PCA	-	-	-	-	-	1.3	-	-	NA
PCE	-	-	-	2.5	2.2	-	1.336	2	NA
TCE	6.36	6.3	4.3	7.4	4.4	2.8	2.884	2.3	0.78

W-36	2/20/92	7/10/96	7/11/97	6/9/99	2000	1/01	7/01	8/02	7/03	7/05
PCE	-	-	-	-	-	0.12	-	-	-	NA
TCE	31	4.398	6	4.4	3.4	3.0	1.6	1.5	1.2	1.2

W-10A	12/18/92	6/30/93	12/28/93	6/22/94	7/6/95	7/9/96	6/24/98	1/01	7/01	7/05
PCE	-	-	3.6	2.8	-	-	-	-	-	NA
TCE	31.5	22	30	25	20	25.604	35	19	9.4	17

W-3A	2/25/92	12/18/92	6/30/93	12/28/93	6/22/94	7/6/95
PCE	-	-	31	7.4	8.9	-
TCE	36.7	58.2	18	37	28	34

W-3B	6/29/93	6/22/94	7/6/95	7/10/96	7/11/97	6/24/98	6/9/99	2000	1/01	7/01	8/02	7/03	7/05
PCE	-	-	1.3	-	-	-	-	-	-	-	-	-	NA
TCE	8.9	2.2	1.8	4.429	1	3.5	0.3	0.55	0.76	0.46	2.1	2.1	3.6

W-25	2/19/92	12/17/92	3/23/93	6/28/93	12/28/93	6/21/94	7/5/95	7/11/97	6/23/98	6/9/99	2000	1/01	7/01	8/02	7/03	7/05
cis	-	-	44	-	17	3	-	8	18	14	7.7	8.6	2.2	2.3	2.8	NA
PCE	-	-	-	-	-	3	-	3	-	-	0.58	0.62	1.5	0.98	NA	NA
TCE	221	41.3	380	11	130	95	51	48	130	95	49	39	43	31	34	37

W-1A	6/21/94	7/5/95	1/01	8/02	7/03
PCE	6.3	-	-	4.7	1.5
1,1,2,2-PCA	-	-	1.1	-	-
1,1,1-TCA	-	-	-	0.54	-

W-6R	7/10/96
TCE	11.175

W-8	9/17/92
PCE	14*

W-2	2/20/92	6/14/92	12/18/92	3/24/93	6/22/94	7/05
PCE	-	-	-	-	7.6	NA
TCE	26	51.1	27.6	16	10	-

W-19	6/24/92	12/18/92	6/30/93	12/28/93	6/21/94	7/6/95	8/02	7/03	7/05
PCE	-	-	-	-	-	-	3.6	2.8	NA
TCE	80.8	34.8	8.6	9.4	10	66	1.2	0.63	0.8

W-39	12/18/92	6/21/94	7/05
1,1,1-TCA	64.6	-	NA
PCE	-	3	NA
TCE	-	19	0.31

W-22	2/25/92	6/14/92	12/18/92	3/24/93	12/28/93	6/22/94	7/10/96	7/11/97	6/24/98	8/02	7/05
cis	-	-	-	-	1.4	-	-	-	-	-	NA
PCE	-	-	-	-	3.9	4	-	-	-	69	NA
TCE	71.8	72	92	85	71	28	14.754	24	32	-	13

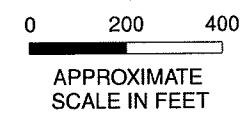
W-41	3/24/93	12/28/93	6/21/94	1/01	7/01	8/02	7/03	7/05
PCE	1.3	3.8	6.5	1.6	10	4.1	9	NA
TCE	3.8	4	4.4	-	-	-	-	-

W-26	2/25/92	6/14/92	9/17/92	12/18/92	3/24/93	6/30/93	12/27/93	6/22/94	7/6/95	7/9/96	7/11/97	6/9/99	1/01	8/02	7/03	7/05
1,1,1-TCA	-	-	-	-	-	-	-	-	1.5	-	-	-	-	-	-	NA
1,1,2,2-PCA	-	-	-	-	-	-	-	-	2.2	-	-	-	-	-	-	NA
cis	-	-	-	-	-	-	-	-	1.4	-	-	-	-	-	-	NA
PCE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	NA
TCE	48.5	72.7	56.8	63.3	60	35	38	20	26	9.093	15	9	24	23	1.3	1.7

W-16	6/29/93	6/24/98	1/01	7/03	7/05
PCE	-	1.4	0.21	0.73	NA
TCE	1.3	-	-	-	-

W-14	6/18/91	6/29/93	12/28/93	6/21/94	7/6/95	6/23/98	1/01	7/05
PCE	10.8	2	1.8	1.4	-	0.9	0.25	NA
TCE	-	-	-	-	41	-	-	-

NOTE: Locations are approximate based on individual WAULECO and 3M base maps.



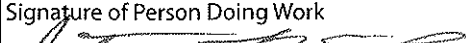
**ADJACENT PROPERTY
 HISTORICAL CHLORINATED COMPOUND
 GROUNDWATER ANALYTICAL RESULTS**
 DOWNTOWN PARKING LOT
 3M COMPANY
 WAUSAU, WISCONSIN

FIGURE
14

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

Route to:

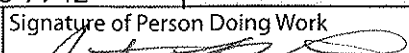
Drinking Water Watershed/Wastewater Waste Management Remediation/Redevelopment Other: _____

1. General Information				2. Facility/Owner Information			
WI Unique Well No. _____		DNR Well ID No. _____		County Marathon		Facility Name 3M Downtown Facility	
Common Well Name DPLMW-1		Gov't Lot # (if applicable)		Facility ID	License/Permit/Monitoring No.	City, Village or Town Wausau	
1/4 / 1/4 NW	1/4 SE	Section 35	Township 29 N	Range 7	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Street Address of Well 144 Rosecrans Street	
Grid Location Feet <input type="checkbox"/> N <input type="checkbox"/> S		Feet <input type="checkbox"/> E <input type="checkbox"/> W		<input type="checkbox"/> Local Grid Origin <input type="checkbox"/> (estimated) OR <input type="checkbox"/> Well Location		Present Well Owner 3M	Original Well Owner 3M
Latitude: DEG MIN SEC		Longitude: DEG MIN SEC		Street Address or Route of Owner P.O. Box 33331			
City St. Paul		State MN		ZIP Code 55133-3331			
Reason For Abandonment Closure		WI Unique Well No. of Replacement Well _____		4. Pump, Liner, Screen, Casing & Sealing Material			
3. 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 <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole/Drillhole		Original Construction Date 8/24/98		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): _____		If a Well Construction Report is available, please attach.		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 Groundsurface (ft.) 36.45		Casing Diameter (in.) 2		Was casing cut off below surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Lower Drillhole Diameter (in.) 8.3		Casing Depth (ft.) 36.45		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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown				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)?		Depth to Water (feet) 28.39		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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
5. Material Used to Fill Well/Drillhole				Required Method of Placing Sealing Material			
Bentonite Chips				<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 Pour			
				Sealing Materials			
				<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.)			
				<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " "			
				<input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips			
				For Monitoring Wells and Monitoring Well Boreholes Only:			
				<input 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
				Surface	36.45	1 bag	
6. Comments							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Sealing Work Boart Longyear/ARCADIS		Date of Abandonment 10/10/05		Date Received		Noted By	
Street or Route 126 N. Jefferson Street		Telephone Number (414) 276-7742		Comments			
City Milwaukee		State WI		ZIP Code 53202		Signature of Person Doing Work 	
3M/wi1044/wausau/graphics/logs/dplmw1.ai						Date Signed 8/16/05	

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

Route to:


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

1. General Information				2. Facility/Owner Information				
WI Unique Well No. _____		DNR Well ID No. _____		County Marathon		Facility Name 3M Downtown Facility		
Common Well Name DPLMW-3			Gov't Lot # (if applicable) _____			Facility ID _____	License/Permit/Monitoring No. _____	City, Village or Town Wausau
1/4 / 1/4 NW	1/4 SE	Section 35	Township 29 N	Range 7	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Street Address of Well 144 Rosecrans Street		
Grid Location Feet <input type="checkbox"/> N <input type="checkbox"/> S		Feet <input type="checkbox"/> E <input type="checkbox"/> W		<input type="checkbox"/> Local Grid Origin <input type="checkbox"/> (estimated) OR <input type="checkbox"/> Well Location		Present Well Owner 3M	Original Well Owner 3M	
Latitude: DEG MIN SEC _____ N		Longitude: DEG MIN SEC _____ W		Street Address or Route of Owner P.O. Box 33331				
Reason For Abandonment Closure		WI Unique Well No. of Replacement Well _____		City St. Paul	State MN	ZIP Code 55133-3331		
3. 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 8/24/98		If a Well Construction Report is available, please attach. _____		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): _____		Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Total Well Depth From Groundsurface (ft.) 35.94		Casing Diameter (in.) 2		
Lower Drillhole Diameter (in.) 8.3		Casing Depth (ft.) 35.94		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 well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		If yes, to what depth (feet)? 29.94		Did 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		
If yes, to what depth (feet)? 29.94		Depth to Water (feet) 29.94		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 type="checkbox"/> Yes <input checked="" 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 Pour		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips		For Monitoring Wells and Monitoring Well Boreholes Only: <input 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	
Bentonite Chips				Surface	35.94	1 bag		
6. Comments								
7. Supervision of Work				DNR Use Only				
Name of Person or Firm Doing Sealing Work Boart Longyear/ARCADIS			Date of Abandonment 10/10/05		Date Received	Noted By		
Street or Route 126 N. Jefferson Street			Telephone Number (414) 276-7742		Comments			
City Milwaukee		State WI	ZIP Code 53202	Signature of Person Doing Work 		Date Signed 8/16/06		

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Route to:

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

1. General Information				2. Facility/Owner Information			
WI Unique Well No. _____		DNR Well ID No. _____		County Marathon		Facility Name 3M Downtown Facility	
Common Well Name DPLMW-2		Gov't Lot # (if applicable) _____		Facility ID _____	License/Permit/Monitoring No. _____	City, Village or Town Wausau	
1/4 / 1/4 NW	1/4 SE	Section 35	Township 29 N	Range 7	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Street Address of Well 144 Rosecrans Street	
Grid Location Feet <input type="checkbox"/> N <input type="checkbox"/> S		Feet <input type="checkbox"/> E <input type="checkbox"/> W		<input type="checkbox"/> Local Grid Origin <input type="checkbox"/> (estimated) OR <input type="checkbox"/> Well Location		Present Well Owner 3M	
Latitude: DEG MIN SEC _____ N		Longitude: DEG MIN SEC _____ W		Original Well Owner 3M		Street Address or Route of Owner P.O. Box 33331	
Reason For Abandonment Closure		WI Unique Well No. of Replacement Well _____		City St. Paul		State MN	ZIP Code 55133-3331
3. Well/Drillhole/Borehole Information				4. Pump, Liner, Screen, Casing & Sealing Material			
<input checked="" type="checkbox"/> Monitoring Well		Original Construction Date 8/24/98		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	
<input type="checkbox"/> Water Well		If a Well Construction Report is available, please attach.		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	
<input type="checkbox"/> Borehole/Drillhole				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	
Construction Type: <input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____				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	
Formation Type: <input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock				If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input checked="" 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 Pour	
Total Well Depth From Groundsurface (ft.) 35.97		Casing Diameter (in.) 2		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Bentonite Chips		For Monitoring Wells and Monitoring Well Boreholes Only: <input type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	
Lower Drillhole Diameter (in.) 8.3		Casing Depth (ft.) 35.97		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) 30.29					
5. Material Used to Fill Well/Drillhole							
Bentonite Chips		From (ft.) Surface	To (ft.) 35.97	No. Yards, Sacks Sealant or Volume (circle one) 1 bag	Mix Ratio or Mud Weight		
6. Comments							
7. Supervision of Work				DNR Use Only			
Name of Person or Firm Doing Sealing Work Boart Longyear/ARCADIS		Date of Abandonment 10/10/05		Date Received		Noted By	
Street or Route 126 N. Jefferson Street		Telephone Number (414) 276-7742		Comments			
City Milwaukee		State WI		ZIP Code 53202		Signature of Person Doing Work 	
3M/wi1044/wausau/graphics/logs/dplmw2.ai						Date Signed 8/16/06	